

Office use only	Initial Assessment	Light touch	Monthly Early Advice	Core Portage	End of service	Did not meet criteria
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Christchurch & Poole Portage Service - request for involvement Level 3: Partnership Plus

Child's Name:		
(Male/Female)		DOB: Current age:
Address:		Postcode:
Parent/carer's names:	Mother:	Father:
Siblings names and ages:		
Contact telephone numbers:		
Language spoken at home:		Translator Needed: Y/N
I give consent for the Portage service to request, record and share information about me and my child for the purpose of processing this referral and providing us with services.		Yes/No
Parent's name:	Parent's signature:	Date:
Referrer:	Designation:	Date:

To enable your request for Portage involvement to be processed, please provide as much detail as possible. Current level of learning and development (i.e. approximate developmental age in months). If using the EYFS bands please state if this is within the younger, middle or older range.

Area of Need/highlight the PRIMARY NEED	Functioning age in months	Additional areas of need	Tick box
Sensory/Physical Development		Visual Impairment	
Communication & Language		Hearing Impairment	
Personal, Social & Emotional Development		LSCB Level of Need: 4 - CiN, CP, LAC 3 - Partnership Plus	
Cognition, Learning & Play		Other	

ADDITIONAL SUPPORTING INFORMATION PROVIDED:

Type of assessment	Attached	Type of assessment	Attached
ASQ		Paediatrician's report	
EYFS tracking/profiles		Speech & Language report	
Early Help Assessment (EHA)		Copies of recent TAC/TAF meetings	
Health Visitor Early Help Assessment		Other	

Other professionals involved - please provide name & contact number of each professional.

Health Visitor - Reach Area		Early Years Setting	
Speech & Language Therapist		0-5 Family Outreach Worker	
Paediatrician		Starting Out FOW	
Physio/Occupational Therapist		Social Worker	
Other (please state)		Portage - another Borough	

Additional information relating to a request for Portage involvement:

Portage is a Level 3 Partnership Plus Service.

Continuum of Need - Level 3 Partnership Plus is for children and families which need a multi-agency response – needs can't be addressed by providing extra support within Universal Services and referral to targeted or specialist services is needed. Families at this level usually benefit from a holistic Early Help Assessment and a multi-agency plan led by a named Lead Practitioner (from any agency) who co-ordinates a Team Around the Family to ensure actions are completed and needs are met.

Portage criteria. The child must:

- live in either a Christchurch or Poole postcode area.
- have Special Educational Needs/Disability: including significant delays in at least three or more areas of development by 50% of their chronological age. Note: one area must be cognition and learning.
- be aged between 1 year and 3 years 11 months (babies under a year old may be offered 'light touch Portage Stay and Play sessions' until they are over 12 months of age).
- have at least one whole academic year before transitioning to school.

Parents/carers need to have the time, motivation and capacity to access regular home visits and be prepared to implement daily Portage learning activities/strategies.

Before considering or making a referral to the Portage Service please utilise the Pre-Early Help Assessment (Pre-PEHA) or a full Early Help Assessment to identify all possible areas of need or additional risk factors within the family. These could include: housing issues; unemployment/financial issues; general parenting needs; parental mental health; drug and alcohol issues; Domestic Violence.

Referrals to other agencies and support may also be required or need to be in place prior to Portage home visiting commencing.

Please send this referral form with supporting information to:

Helen Jones
Portage Team Manager (Christchurch and Poole),
Children, Young People & Learning,
Dolphin Centre,
POOLE, BH15 1SA.

Email: helen.jones@bcpcouncil.gov.uk

Tel queries: 01202 261931

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