**Alternative provision commissioning agreement**

|  |  |  |  |
| --- | --- | --- | --- |
| **Pupil:** |  | **Year:** |  |
| **Original school:****New school:** |  | **Date of set up visit:**  |  |
| **Name of staff member completing document :** |  | **Date on roll:** |  |

|  |
| --- |
| ***Commissioning aims – to be completed with the alternative provider before placement begins*** |
| **Rationale –** *Why the new school?* |  |
| **Pupil profile** *Note their strengths and barriers**Offer insight into what works to meet their needs* |  |
| **DIT completed**  | **Y / N** |
| **DIT outcomes** |  |

|  |
| --- |
| **Target setting- to be completed with alternative provider when setting up placement** |
| **Target**  | **Support from original school** | **Support from alternative provider** |
|  |  |  |
|  |  |  |
|  |  |  |
| **How will this be assessed?*** Daily attendance checks.
* Bi-weekly feedback and communications via email.
* Ongoing regular communications if there are any safeguarding or other concerns.
* Half termly review meeting.
* Termly report and face to face review meeting.
 |

**Set-up meeting agenda**

**Details of Discussion:**

***Agree rationale and targets***

***Agree timetable –***

*This may be p/t to begin, depending on the situation*

***Agree accreditation / qualification aim*** *(if different to GCSEs/Vocational qualifications)*

*What are they studying? At what level? What will they be accredited with on completion? How is progress reported? Is there flexibility to move up/down levels as needed?*

***Personal/social/wellbeing***

*Share information on this -how is the pupil managing friendships/community/their mental health. What support is in place?*

***Safeguarding*** *– Share relevant information*

*Establish reporting procedures – who will communicate concerns – phone/email?*

*Ensure DSL details are circulated and regular communication is established*

***Careers/P16*** *– Agree plan and share contact details of relevant professionals*

***Access arrangements*** *– Discuss current and plans for future assessment – ensure clear actions*

**Date of next visit: Staff member completing review:**

|  |
| --- |
| **Review (INSERT DATE)****Behaviour** **Attendance** **Safeguarding queries/concerns** **Progress to previous targets****Progress (academic)** |

|  |
| --- |
| **Comments** |

|  |
| --- |
| **Target setting review**  |
| **Target**  | **Support from original school** | **Support from alternative provider**  |
|  |  |  |
|  |  |  |
|  |  |  |

**Date of next visit: Staff member completing review:**