

SEND Portal

User Guide – Educational Psychology

Updated November 2020

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1 SEND Portal User-Guide (Educational Psychology)

1.1 Registering on the SEND Portal

<u>eturnUrl=%2FP</u>	ProfessionalPortal_LIVE%2F
	Professional Portal
Coventry City Council	👗 Login 🛛 🗭 Register
Don't have an account? Please registration. register Email Address aaron.aardvaark@cove Password Q Login Forgotten your password?	This list is for schools and settings to request an Education, Health and Care (EHC) assessment and professionals to submit advice for an EHC assessment. All users can create their own account by clicking register.
1.1.2 Complete	the Security Details & click Next
for this purpose. You will need to end Security Details About you Email Ad Contirm I Pass Confirm Pass Secret Que Secret Ar 1.1.3 Complete	Email Image: aaron.aardvaark@coventry.gov.uk sword a_ a_ Mothers maiden name
	essary information required for registration process. Please hover the mouse over each field to see what information you will need to enter
	ou use your work place contact details to create your account. rrk Details
Title •	د. Mr ۲
Forename •	La Aaron
Surname *	Aardvaark
Surname -	
Gender •	👗 Male 🗸

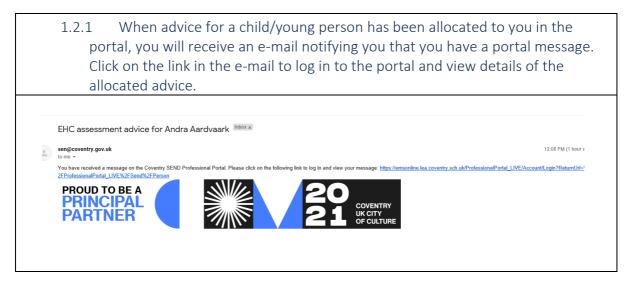


1.1.4 Complete you	ur Work Details & click Submit registration
for this purpose. You will need to ensure you	sary information required for registration process. Please hover the mouse over each field to see what information you will need to enter use your work place contact details to create your account.
Professional Role *	SENCo
Organisation Name *	Served Served
	postcode and then click Find Address. If your address is not listed, press the 'Enter Address Manually' and type the correct address in the
boxes provided	
	C Use Another Address
House Number	<i>*</i>
House Name	Coventry City Council
Building Name	A Lord Mayor's Office, Council House
Street Name	W Earl Street
District / Village	*
Town	W COVENTRY
County	₩ West Midlands
Postcode *	e CV1 SRR
Country	Please select *
Please supply a telephone number where yo	u can be contacted during normal office hours, if necessary.
Mobile Number	0
Work Phone	v
If you would like to add another Professional	Role to your account, please navigate to "My Account" once you have completed your registration.
	Previous
	1 TEPHNAR
	Submit Registration
	be sent an e-mail to verify your e-mail address, click on the
link in the e-mail a	and return to the log-on screen to enter your user credentials
Professional Portal ac	tivation Inbox ×
sen@coventry.gov.uk to me ≁	
Dear new portal user,	
Thank you for registering with the Co	wentry SEND Portal.
	u to confirm your email address is valid. To do this, please click on the link below.
https://emsonline.lea.coventry.sch.ul	/ProfessionalPortal_LIVE/Account.Mvc/CompleteRegistration/68613855577e5-e158-4b31-8468-def9f4285be2
Please note: if you are unable to clic	k on this link, carefully copy and paste the text into your Internet browser.
With best wishes,	
Coventry STAR team	
Important - Please do not reply to	this email as this account is not monitored.
-	ial Educational Needs and Disabilities and you will be taken to a Step Verification Now – click this link.
★ SEND	Enable Two Step Verification now

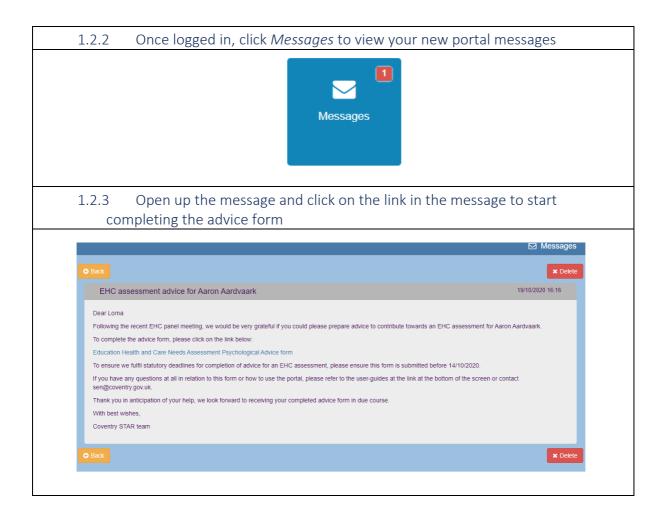


1.1.7 Select e-mail	as the preferred method of Two Step Verification, click Save
My Account	Two Step Verification
Personal Details	We require all SEND portal users to enable two step verification.
Work Details	Two Step Verification is our way to make your data more secure.
Change Email Address	Please select e-mail in the drop down box below to receive a verification code via e-mail to complete log- in.
Change Password	The e-mail address used will be the e-mail you provided when you created your account.
Change Secret Question	Preferred method
Change of Circumstances	Email
Two Step Verification	Save
	be returned to the log-on screen to log in and begin using the gging-in, you will receive a verification code via e-mail to in process.
sen@coventry.gov.u	ry SEND portal verification Code Inbox × Ik for the Coventry SEND portal is 497266 This verification code will be valid for 5 minutes.

1.2 Completing an Advice form









1.2.4 Selec	ct your work profile
	Work Details
	Please select the Professional Role you would like to complete this form as that you have not yet added to your Professional Portal account, then pleas Professional Role. If your Organisation Name, Work Address, or contact de My Account then select Work Details to update these details.
	Project Manager
	Organisation Name Coventry City Council
	Address 1 Friargate, Coventry, CV1 2GN
	Work Phone
	Mobile Number
	Select
	plete the various pages of the form, denoted by the different headings o clicking <i>Save and Continue</i> to save and move on to the next page.
	Step 1 Step 2 Step 3 Work Details Completed form Re-allocate advice Summary
Please upload a comple	ated Education Health and Care Needs Assessment Psychological Advice form
 The maximum file : By uploading this fi images of people, i 	your files have the correct extensions, these should be .doc, .docx, .pdf, .png, .jpg, .jpg, .bmp size allowed is 10MB le, you are confirming that it is free from viruses or other malware and contains no inappropriate material. If the file contains please ensure you have their consent for the image to be shared ach file by selecting the upload button for the file to be added to the form
	Choose file No file chosen Upload Delete
File Name: File Type: File Size:	
	Save & Continue

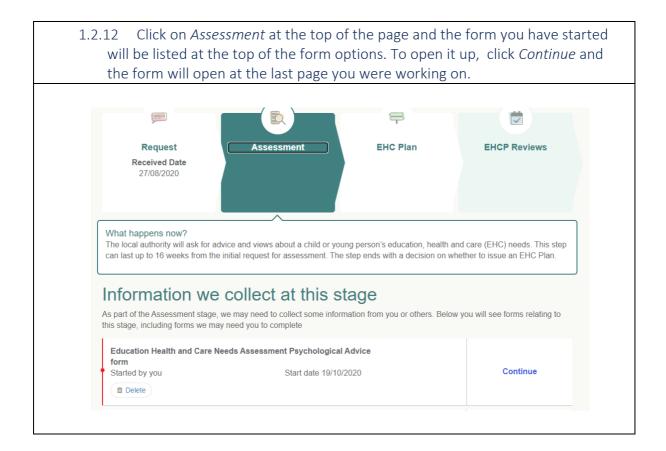


1.2.6 If it is the case that you will no longer be complet the team and the advice request needs to be re-allocative the team, please complete Step 3 of the form only.	0
Step 1 Step 2 Step 3 Step 4 Summary	
If the advice request needs to be re-allocated to another team member, please complete this page, click Save	e & Continue and submit the form.
Is it the case that you will no longer be completing this advice?	
Who should we re-allocate the advice to? (Please include first name and surname) William Wallaby	
1.2.7 Once a page has been completed, it's header tab1' in the image above) and you can navigate back to tgreen header.	
1.2.8 At any time, you can move backwards through the	ne from by clicking <i>Back.</i>
Back	
1.2.9 To exit the form and return to it later, click SEND	Ноте
Goventry City Council	Professional Portal
	My Account © Sign Out



to you			
,			
# ~			Professional Portal
oventry City Council			
Home \star SEND Ho	ome		My Account 😃 Sign Out
			Sandar Sandar
100			
			$\left(\begin{array}{c} \end{array}\right)$
			har
			0.0
Select Person			
This area allows you	to complete Special Education	al Needs and Disabilities actions for children and you	ung people you are working with.
		ave previously added them to your account or if the L	
	Needs and Disabilities informat		
Person Filter	All	•	+ Add Person
Name 🗢	Date of Birth 🗢	Address ‡	School 🗢
Aardvaark, Aaron	01/02/2008	an and the second second second second	
	o return to the		caludon Castle School
1.2.11 T	o return to the		
1.2.11 T	o return to the nal information	form, click on the child's r	
1.2.11 T	o return to the nal information	form, click on the child's r and click <i>Continue</i>	
1.2.11 T	o return to the nal information	form, click on the child's r	
1.2.11 T	o return to the nal information	form, click on the child's r and click <i>Continue</i>	
1.2.11 T	To return to the nal information	form, click on the child's r and click <i>Continue</i>	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename	form, click on the child's r and click <i>Continue</i>	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename Middle Name	form, click on the child's r and click <i>Continue</i>	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename Middle Name Surname	form, click on the child's r and click Continue	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename Middle Name Surname Cender Date of Birth Current Schoo	form, click on the child's r and click Continue before proceeding. Fields marked with * are mandatory.	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename Middle Name Surname Carrent Schoo Ethnicity	form, click on the child's r and click Continue before proceeding. Fields marked with * are mandatory.	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename Middle Name Surname Cender Date of Birth Current Schoo Ethnicky First Language	form, click on the child's r and click Continue before proceeding. Fields marked with * are mandatory.	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename Middle Name Surname Carrent Schoo Ethnicity	form, click on the child's r and click Continue before proceeding. Fields marked with * are mandatory.	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename Middle Name Surname Carrent Schoo Ethnicky First Language House Number	form, click on the child's r and click Continue	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename Middle Name Surname Canter Date of Birth Current Schoo Ethnicity First Language House Number House Name	form, click on the child's r and click Continue	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename Middle Name Surname Canter Date of Birth Current Schoo Ethnicity First Language House Number House Number Building Name	form, click on the child's r and click Continue before proceeding. Fields marked with * are mandatory.	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename Middle Name Surrame Date of Birth Current Schoo Ethnicky First Language House Name Building Name Street Name	form, click on the child's r and click Continue before proceeding. Fields marked with * are mandatory.	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename Middle Name Surname Canter Date of Birth Current Schoo Ethnichy First Language House Number House Number Building Name Street Name	form, click on the child's r and click Continue before proceeding. Fields marked with * are mandatory.	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename Middle Name Surname Carnet Date of Birth Current Schoo Ethnicity First Language House Number House Number Building Name Street Name District / Village Towr County Postcode	form, click on the child's r and click Continue	
1.2.11 T	To return to the nal information Edit Person Please confirm the details below Forename Middle Name Surname Carnet Date of Birth Current Schoo Ethnicity First Language House Number House Number Building Name Street Name District / Village Towr Courty	form, click on the child's r and click Continue before proceeding. Fields marked with * are mandatory.	







1.3 Submitting the form

1.3.1 Once cor	nplete, the form will generate a summary page.
Summary	
Summary	
The information you have entered provided before continuing.	as part of this Special Educational Needs & Disabilities form is displayed below. Please review the information
Form Submitter Details	
Lorna Holland	
Professional Role	Project Manager
Organisation Name	Coventry City Council
Child / Young Person Details	
Aaron Aardvaark	
Gender	Male
Date of Birth	01-Feb-2008
	it the form, check 'I agree' to the statements listed and click Sub
All users: I confirm that the inform If submitting a request form only: education, health and care asses the request. I also confirm they h education establishment's privac	nation I have provided is accurate and complete to the best of my knowledge I confirm that the child/young person and their parents/guardians (if under 13) are aware this request for an asment is being submitted that it will be used and shared in accordance with statutory processes to assess and fulfil ave had access to Coventry City Council's SEND Statutory Assessment and Review Service Privacy Notice and the
All users: I confirm that the inform If submitting a request form only: education, health and care asses the request. I also confirm they h education establishment's privac Please note: Coventry City Coun	nation I have provided is accurate and complete to the best of my knowledge I confirm that the child/young person and their parents/guardians (if under 13) are aware this request for an issment is being submitted that it will be used and shared in accordance with statutory processes to assess and fulfil ave had access to Coventry City Council's SEND Statutory Assessment and Review Service Privacy Notice and the y notice.
All users: I confirm that the inform If submitting a request form only: education, health and care asses the request. I also confirm they h education establishment's privac: Please note: Coventry City Coun bottom of the web page.	nation I have provided is accurate and complete to the best of my knowledge I confirm that the child/young person and their parents/guardians (if under 13) are aware this request for an issment is being submitted that it will be used and shared in accordance with statutory processes to assess and fulfil ave had access to Coventry City Council's SEND Statutory Assessment and Review Service Privacy Notice and the y notice.
All users: I confirm that the inform If submitting a request form only: education, health and care asses the request. I also confirm they h education establishment's privac; Please note: Coventry City Coun bottom of the web page. ✓ I agree The information that you have pro Disabilities Code of Practice. It is important that the child or you	nation I have provided is accurate and complete to the best of my knowledge I confirm that the child/young person and their parents/guardians (if under 13) are aware this request for an sment is being submitted that it will be used and shared in accordance with statutory processes to assess and fulfil ave had access to Coventry City Council's SEND Statutory Assessment and Review Service Privacy Notice and the y notice. cil's SEND Statutory Assessment and Review Service Privacy Notice can be found at the Privacy Notice tab at the
All users: I confirm that the inform If submitting a request form only: education, health and care asses the request. I also confirm they h education establishment's privac; Please note: Coventry City Coun bottom of the web page. I agree The information that you have pro Disabilities Code of Practice. It is important that the child or yo them. It will also be shared with c Before submitting this information	nation I have provided is accurate and complete to the best of my knowledge I confirm that the child/young person and their parents/guardians (if under 13) are aware this request for an issment is being submitted that it will be used and shared in accordance with statutory processes to assess and fulfil ave had access to Coventry City Council's SEND Statutory Assessment and Review Service Privacy Notice and the y notice. cil's SEND Statutory Assessment and Review Service Privacy Notice can be found at the Privacy Notice tab at the ovided on this form will be used in accordance with processes outlined in the current Special Educational Needs & ung person and their parent or carer are able to see the information you are providing and for it to be shared with
 All users: I confirm that the inform If submitting a request form only: education, health and care asses the request. I also confirm they h education establishment's privac: Please note: Coventry City Coun bottom of the web page. ✓ I agree The information that you have pro Disabilities Code of Practice. It is important that the child or you them. It will also be shared with the Before submitting this information or young person and their parent I agree that the information I am 	nation I have provided is accurate and complete to the best of my knowledge I confirm that the child/young person and their parents/guardians (if under 13) are aware this request for an issment is being submitted that it will be used and shared in accordance with statutory processes to assess and fulfil ave had access to Coventry City Council's SEND Statutory Assessment and Review Service Privacy Notice and the y notice. cil's SEND Statutory Assessment and Review Service Privacy Notice can be found at the Privacy Notice tab at the ovided on this form will be used in accordance with processes outlined in the current Special Educational Needs & ung person and their parent or carer are able to see the information you are providing and for it to be shared with other professionals working with the child or young person. n, you must agree that the information provided can be shared with other professionals, the local authority, the child
All users: I confirm that the inform If submitting a request form only: education, health and care asses the request. I also confirm they h education establishment's privac; Please note: Coventry City Coun bottom of the web page. I agree The information that you have pro Disabilities Code of Practice. It is important that the child or yo them. It will also be shared with c Before submitting this information or young person and their parent I agree that the information I am	nation I have provided is accurate and complete to the best of my knowledge I confirm that the child/young person and their parents/guardians (if under 13) are aware this request for an issment is being submitted that it will be used and shared in accordance with statutory processes to assess and fulfil ave had access to Coventry City Council's SEND Statutory Assessment and Review Service Privacy Notice and the y notice. cil's SEND Statutory Assessment and Review Service Privacy Notice can be found at the Privacy Notice tab at the ovided on this form will be used in accordance with processes outlined in the current Special Educational Needs & ung person and their parent or carer are able to see the information you are providing and for it to be shared with ther professionals working with the child or young person. n, you must agree that the information provided can be shared with other professionals, the local authority, the child or carer. If you do not agree to this, you will not be able to send it using this online form. submitting can be shared with other professionals, the local authority, the child or young person and their parent or the professionals, the local authority and their parent or carer are able to send it using this online form.
 All users: I confirm that the inform If submitting a request form only: education, health and care asses the request. I also confirm they h education establishment's privac: Please note: Coventry City Counbottom of the web page. ✓ I agree The information that you have problemabilities Code of Practice. It is important that the child or yot them. It will also be shared with comparison and their parent I agree that the information I am a carer as part of processes outline 	nation I have provided is accurate and complete to the best of my knowledge I confirm that the child/young person and their parents/guardians (if under 13) are aware this request for an issment is being submitted that it will be used and shared in accordance with statutory processes to assess and fulfil ave had access to Coventry City Council's SEND Statutory Assessment and Review Service Privacy Notice and the y notice. cil's SEND Statutory Assessment and Review Service Privacy Notice can be found at the Privacy Notice tab at the ovided on this form will be used in accordance with processes outlined in the current Special Educational Needs & ung person and their parent or carer are able to see the information you are providing and for it to be shared with ther professionals working with the child or young person. n, you must agree that the information provided can be shared with other professionals, the local authority, the child or carer. If you do not agree to this, you will not be able to send it using this online form. submitting can be shared with other professionals, the local authority, the child or young person and their parent or the professionals, the local authority and their parent or carer are able to send it using this online form.

