Suffolk County Council (SCC) Early Years Provider Portal (SCC Capita One)

Agreement of Use (AoU)

Between SCC and the Suffolk School

**This agreement must be completed electronically by the school headteacher or a senior member of staff.**

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| **Name of Suffolk School:** |  |
| **Full Address:**  **(Include postcode)** |  |
| **Information Commissioner’s Office (ICO) data protection registration reference:**  [**https://ico.org.uk/for-organisations/**](https://ico.org.uk/for-organisations/) |  |
| **Purposes for which the data will be used:** | 1. Headcount 2. Two Year Old Funding 3. Expanded/Extended Entitlements 4. Early Years Pupil Premium |
| **Data to be made available to schools via:** | SCC Capita One Early Years Portal (Provider Portal) |
| **Frequency of data required:** | Termly (school academic year) |
| **User process:** | 1. The school will log on to the Provider Portal. 2. A view of the spreadsheet will be available on the Provider Portal. 3. The school updates the spreadsheet on the Provider Portal. 4. The school confirms entry of the data into the Provider Portal. 5. The data is then written on to a database within the Provider Portal. |

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| **PROVIDER CERTIFICATION** | | Please confirm in each section your agreement by typing  **I agree** in the relevant sections below. |
| 1 | The information I am submitting to the Provider Portal is accurate at the time of returning it to SCC. |  |
| 2 | I am aware of my obligations under the Data Protection Law in relation to the processing of personal and special category data and confirm that my Childcare Provision has the following policies in place which are compliant:   1. Data Protection 2. Information Security 3. Acceptable Use   I have added the organisation’s ICO data protection registration number in the relevant section above. |  |
| 3 | That, in the event of a security incident  (i.e. the inappropriate use and/or disclosure of individuals’ personal and sensitive personal data obtained via the Provider Portal)  I will, within 24 hours of the working week, notify the Early Years and Childcare Service (SCC):  Email: [provider.portal@suffolk.gov.uk](mailto:provider.portal@suffolk.gov.uk)  Tel: 0345 60 800 33 |  |
| 4 | I confirm that I am **legally authorised** to enter into this **Agreement of Use** on behalf of the above-named Childcare Provider. |  |

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| **Signatory:**  Please type your full name |  |
| **Position:**  (School Headteacher or Senior member of staff) |  |
| **Email address:** |  |
| **Date:** |  |

**FOR SCC OFFICE USE:**

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| Name:  (SCC signatory must be either the asset owner or Service manager) |  |
| Email address: |  |
| Position: |  |
| Date: |  |