



Evelina Hospital School

www.evelina.southwark.sch.uk



School, Family, Community



Evelina Hospital School Provision Framework: A tool to support planning, monitoring and evaluation

ALL - June 2016

Evelina Aims: Supporting Transition

1. Framework for monitoring the quality of provision at Evelina Hospital School

This framework outlines the school's aspirations for all its pupils.

2.1 Our Pupil Groups

Our hospital school admits, on average, over 1,500 children and young people each academic year.

The age range is two years – nineteen years. We do not have 'cohorts', just 'individuals'. With the exception of our two year olds, almost all our pupils are Dual Registered, attend children's centres, nursery, primary, secondary and special schools; a very few attend college; a very few are from abroad.

The ability range of our pupils spans the full spectrum from children with complex and profound SEND, many with Educational Health Care Plans (EHCP), to people with the potential to achieve **grades at GCSE and A Level**.

For purposes of assessing need, planning provision, prioritising professional input and multi-agency liaison, and for the monitoring of pupil progress, we identify the following 'admission types' who have education needs in common, while also having individual needs associated with their physical and cognitive ability, special educational and/or medical needs, ethnicity and first language, economic circumstances etc:

- **Long-Term Day Patient-Pupils:** These pupils attend the Dialysis Unit either three days a week (mostly EYFS and primary) or two days a week (mostly secondary). They can be on-roll at the school for anything from half a term to several years, as they are awaiting transplants.
- **Short-stay pupils:** These pupils attend the school for between one and ten sessions, but, depending on their treatment plans and their recovery rates, may reside in hospital for up to two weeks.
- **Medium -stay pupils:** Pupils in hospital for up to four weeks, attending the school for between 20 – 40 sessions.
- **Long-stay pupils:** Pupils attending the hospital school for more than four weeks. A few such pupils can reside in hospital for months; a very few, for years.
- **Regular Recurring pupil-patients:** These pupils are often in for short- or medium-stays, but have several recurring admissions every year, frequently followed by further days recuperation at home.

- **Day-attending pupils on Re-Engagement / Re-Integration programmes:** We have a few such pupils, all secondary phase, with chronic or life-threatening conditions, who have been referred by their consultants. These pupils can attend our school for varying time frames.
- **Outreach Home Education Programme:** We are commissioned by the LA to deliver home programmes for a select number of pupils.
- **Long-Stay Siblings:** Our hospital is a specialist regional centre for a number of complex, chronic and life threatening conditions. We have a High Dependency Unit, a Paediatric Intensive Care Unit, and a Neo-natal/Special baby care Unit. The hospital has its own accommodation - The Ronald McDonald House - for parents/families who need to live near the hospital. Where parents have younger children who cannot be accommodated with relatives, the hospital provides family accommodation. In such cases, siblings are entitled to attend the school. They will be monitored daily and reviewed on a case by case basis.
- **Short/Medium-stay Siblings:** Our hospital is a specialist regional centre for a number of complex, chronic and life threatening conditions. Occasionally parents/carers have to bring siblings to hospital for short periods of time (e.g. A&E admissions; major operation of a younger sibling) because they must attend to the needs of the sick child and are unable to leave their younger children unattended at home/ take and collect them from school. In the interests of maximising school attendance of siblings, we will also admit siblings in such special circumstances.

2. Supporting the human rights of children and young people with medical needs

We are members of the **Hospital Organisation of Pedagogues in Europe (H.O.P.E.)**. As such our work supports the realisation of the human rights enshrined in the H.O.P.E . charter.

H.O.P.E. Charter: The Rights and Educational Needs of Sick Children and Adolescents

<http://www.hospitalteachers.eu>

1. Every sick child and adolescent has the right to tuition within hospital or at home.
2. The aim of tuition for sick children and adolescents is the continuation of education, enabling them to maintain their pupil-role.
3. The hospital school creates a community of children and adolescents, and normalizes everyday life. Hospital education shall be organized as class, group or individual teaching and at the bedside.
4. Hospital and home tuition must be adapted to the needs and abilities of the child or adolescent in co-operation with the home school.
5. The learning environment and facilities must be adapted to the needs of sick children and adolescents, and communication technologies shall also be used to prevent isolation.
6. A variety of teaching methods and resources shall be used. The content encompasses more than formal curriculum learning. It includes subjects related to special needs arising from illness and hospitalization.
7. The hospital and home tuition teachers must be fully qualified and receive further training.
8. The teachers of sick children and adolescents are full members of the multi-disciplinary caring team and are the link between the hospitalized child or adolescent and the home school.
9. Parents must be informed about the right to schooling and the educational program of their sick child or adolescent. They shall be recognized as active and responsible partners.
10. The integrity of the child or adolescent shall be respected including medical confidentiality and private convictions.



3. Framework for monitoring the quality of provision at Evelina Hospital School

This framework outlines the school's aspirations for all its pupils.

3.2 The Evelina Framework

This framework is a work-in-progress.

The framework presents the core criteria for judging the quality of provision at Evelina Hospital School. Occasionally, criteria will be qualified by further customisation related to admission type (e.g. short-stay, long-stay, recurring).

The framework has been written by the staff team with reference to

- best practice for ensuring the educational progress of children with medical needs when they are in hospital.
- the new Ofsted Framework

The framework is the school's primary tool for monitoring and evaluating the quality of provision, including the quality of teaching and learning. It informs evaluation judgements at individual, team, and whole school level. Final judgements on the quality of provision (i.e. inadequate, satisfactory, good or outstanding) are based on the extent to which criteria are met under each of the headings (i.e. few, some, most, all) and the quality of evidence underpinning the judgements (i.e. consistency of standard; elements of triangulation; moderation).

Provision Framework of Teaching & Learning: EYFS-Primary

Version: June2016

<p>1. Environment & Health and Safety Creating a welcoming, safe and appropriately stimulating environment accessible to all.</p>	<ul style="list-style-type: none"> • The classroom environment is welcoming. The learning stations provide a ‘familiar’ and ‘known’ school environment within the hospital context which helps children settle in. • The classroom is well organised and labelled to allow children to find equipment and contribute to independent learning. • Information is clearly displayed for parents/carers on how the EYFS and Primary is being delivered in the setting, session times, the staff in the setting, how we meet the needs of pupils with special needs and other information including ways parents and carers can support their children at home. • Displays are of a high standard, reflecting recent and/or current teaching and learning topics. • Displays celebrate children’s achievements. • Displays are inclusive for pupils with SEND and use symbols, objects of reference and visual supports such as visual timetables etc. • A daily register is in operation in the classroom, logging who is in and out. This has important health and safety information related to which ward the children are from, their NBM status, photo consent, etc. • Children who arrive attached to a medical machine that has trailing leads will be carefully supervised. If the child is seated, the leads will be covered with a safety carpet. • Safeguarding is the highest priority and staff are fully confident in following the school’s procedures and protocol at all times. Please see the school’s safeguarding policy. <p><i>Long-Stay Pupils</i></p> <ul style="list-style-type: none"> • To engender a sense of belonging, long-stay children are assigned a drawer or work book to store their work, they are also welcome to work on their school’s books. Children are given classroom responsibilities and routines: weather chart, date, and register. EYFS children have a learning journey. Staff ensure their work contributes to the classroom display.
<p>2. Respect & Relationships Promoting good behaviour and trusting relationships based on mutual respect.</p>	<ul style="list-style-type: none"> • Staff engage with children in a positive, welcoming way and know all children by name. • Positive and open relationships with parents are established at the outset. • Children arriving after the start of the session are introduced to more regular attenders at appropriate moments to support relationship building. • Staff show interest in the children by engaging in conversation and asking questions in a sensitive manner. • Activities (in particular for long stay / regular recurring children) are well matched to children so that they reflect, as far as practically possible in a highly mobile school population, their interests and abilities. • Positive behaviour management strategies are used consistently by all staff within the team. • Poor behaviour is consistently challenged and managed by staff with consequences appropriate to age/SEN. • Staff discuss the management of children with challenging behaviour to ensure consistency in approach.

	<ul style="list-style-type: none"> • Staff talk to each other, and the children in a polite, respectful and warm manner - and encourage children to do the same.
<p>3. Well-being & Health and Safety Ensuring physical, social and emotional well-being.</p> <p>Ensuring children feel comfortable and safe.</p>	<ul style="list-style-type: none"> • Children are excited to come into the classroom - with support, if required. In EYFS they can find and settle to an activity they find engaging and challenging or soothing. In primary they are encouraged to join in planned activities. • Staff encourage children to attempt tasks and provide them with the scaffolding they need to feel confident enough to start learning or continue with their work. • Children may feel confident enough in the school environment to talk with staff or peers about their illness or their concerns about the health of a sibling. • New children are welcomed to the classroom and invited to choose an activity to settle them in before more formal or structured group learning begins. • Short stay children may be given the option to opt out of the focus group activity if engaged in purposeful activity. • Pupils in the EYFS are brought in and collected by their parents/carers as they would be in a usual nursery setting. • Staff ask parents of younger children to stay for a settling in period in order to ensure children do not become distressed. • Staff use appropriate touch or soothing strategies to calm and settle especially distressed younger children. • Safeguarding is the highest priority and staff are fully confident in following the school's procedures and protocol at all times. Please see the school's safeguarding policy.
<p>4. Communication Communicating clearly and effectively. Working together to support the child and their family.</p> <ul style="list-style-type: none"> • Parents, carers and children • Home schools and Atrium 	<ul style="list-style-type: none"> • Staff gather information about the medical, and where possible / available, the SEND of the children before the start of their first visit to the school and this information is updated frequently. For longer stay children, they liaise on a daily basis with play specialists and nurses to get regular updates of children's physical and emotional well-being and their readiness for learning. • Staff share information with each other throughout the day and at meetings throughout the week and this information is used to inform future planning. • Staff talk to parents of new children to gather information about children's needs. In the EYFS an additional form to gather information about the child's home life and interests is completed by parents/carers if the child is likely to become long stay. • Staff talk to long stay early years parents to gather comprehensive information about their child to complete the star profile. Feedback about their child's time in school and progress is shared informally on a daily basis. If appropriate, for long term EYFS pupils, the Progress Check at Age 2 is completed by the child's key worker and EYFS leader. • Staff communicate regularly with schools and parents of long term pupils to agree on an attendance plan and school work. Attendance certificates and reports are issued when requested and appropriate.

<p>School staff</p> <ul style="list-style-type: none"> • Medical team and other professionals 	
<p>5. Pedagogical approaches to support learning and inclusion Employing a range of teaching styles to facilitate challenging learning appropriate to individual needs and changing circumstances</p>	<p><u>Teaching</u></p> <ul style="list-style-type: none"> • Staff are sensitive to children’s changing physical and emotional states. They monitor ‘readiness for learning’ throughout the session. • Children are encouraged to participate in planned focused activities. • Staff monitor and support children engaged in class lessons learning. They support them with ‘next steps’ challenges as appropriate. • Staff explain clearly, introducing new vocabulary and providing appropriate scaffolding tools to support learners of different abilities. • Staff use a range of teaching strategies (e.g. explanation, questioning, demonstration / modelling) and a hands-on, multi-sensory approach. • Staff challenge children by providing appropriate resources to extend tasks. • Staff use skilful questioning to establish prior learning, check for understanding throughout the lesson, and challenge the more able / least able. • Staff use descriptive praise to reinforce skills acquired and desirable behaviours demonstrated. • Staff use the interests of the EYFS pupils to plan engaging activities. • In the EYFS a strong emphasis is placed on the Prime Areas of learning, particularly for younger pupils and those new to the school.
	<p><u>Learning</u></p> <ul style="list-style-type: none"> • Newcomers are given time and space to explore and settle into their new environment. • EYFS children learn through play, making choices, trial and error, reflection, sharing outcomes. • Children enjoy their learning. • Children understand what they what is expected of them and engage with enthusiasm. • Children have the opportunity to learn independently, in pairs and in small groups. • Children reflect on their learning. • Children are given pertinent and positive feedback on their learning.

<p>6. Curriculum Consolidating and extending knowledge, skills and understanding in literacy, numeracy, ict, personal & social health education and creativity.</p>	<ul style="list-style-type: none"> • The content /topics / activities chosen are based on the Early Years Framework, the National Curriculum, children’s personal interests, and work sent by the home schools of long-stay children. • Children in EYFS have access to 7 areas of learning each day. The emphasis is on learning through play. There is a balance of child initiated and adult led learning. • Children in KS1 and KS2 have access to daily core literacy and/or numeracy lesson and a foundation subject lesson through a creative and hands on approach. They can access the EYFS 7 areas of learning and sensibly work with their younger peers at the times. • The curriculum is a skills-based curriculum, reinforcing and extending skills in language development and literacy, numeracy and problem solving; ICT, social, moral, spiritual and cultural; and creativity. • Adults engage with children in play activities extending children’s’ communication, understanding of mathematical and scientific concepts and building personal and social values. • Where appropriate to their pupil well-being, children are given physical experience on a daily basis. Options available on site are softplay, ball sports, dance and other physical games and activities in the Beach Atrium and Beach ‘Garden’. We also have equipment in the classroom which children can access at any time in the session which promotes physical development. Outings to the Archbishop’s Community Playground which has play zones for children aged one to eleven are also organised for selected children, weather and medical / parental permissions permitting. <p><i>EYFS Oracy and Literacy Development</i></p> <ul style="list-style-type: none"> • We place a high emphasis on children’s language development and plan and provide a wide range of activities to develop and support children’s communication, speaking and listening skills. • We value and encourage the enjoyment of reading through story sacks and props, storyteller visits, author visits and the Readathon partnership. • We deliver signed (Makaton), sensory and interactive stories for all children to access. • Children participate in Letters and Sounds activities to build phonic knowledge when appropriate. • Specific phonic texts engage reception aged children to read using phonics. • A wide range of books are available for children to read, have read to them and borrow to read with parents/carers. We provide long stay children with book bags so they can take home a different book to read regularly. <p><i>Long-Stay Pupils</i></p> <ul style="list-style-type: none"> • Children have individual work programmes which include activities based on home school plans, where these have been received by the school. • Children participate in at least one daily focused activity planned to support them attaining their personal targets. • Selected children may be working on physiotherapy, occupational therapy and/or speech and language therapy goals set by hospital therapists.
<p>7. Resources</p>	<ul style="list-style-type: none"> • Resources selected to support learning activities / the focussed activity are age and task appropriate, providing access to the

<p>Ensuring access and inclusion.</p>	<p>curriculum for all abilities.</p> <ul style="list-style-type: none"> Resources selected are of a high quality, cleaned as per hygiene protocols, and regularly checked for damage / any other health and safety risks. Resources for independent learning are accessible to children and clearly labelled. Additional adults are deployed strategically in the classroom to maximise learning and ensure health and safety. 			
<p>8. Assessment and appropriate challenge Identifying individual needs, providing appropriate challenge, monitoring progress</p>	<ul style="list-style-type: none"> Staff are skilled at employing assessment-for-learning strategies in their day-to-day teaching. Children’s logs record achievement and progress within the lesson and across time. They inform next steps planning for long-stay children. <table border="1" data-bbox="472 432 2132 890"> <tr> <td data-bbox="472 432 1435 890"> <p><i>Long-Stay Pupils</i></p> <ul style="list-style-type: none"> Home school are contacted to provide information on pupils’ abilities. Assessment information for long-stay children is readily accessible to all staff and informs next steps planning. Long stay EYFS children’s records are kept using a Southwark star learning journey. The statutory Progress Check at Age 2 is completed when appropriate (i.e. for long term pupils for whom this is their only setting). Long stay KS1/2 pupils’ logs record achievement and progress within the lessons and across time. This information and an Attendance Certificate are passed to home schools on discharge. </td> <td data-bbox="1435 432 2132 890"> <p><i>Short-Stay Pupils</i></p> <ul style="list-style-type: none"> Staff observe children to assess their well being, ascertain their interests and gauge current levels of attainment. This information is recorded on a short term log to inform staff if a child attends the school again. </td> </tr> </table>		<p><i>Long-Stay Pupils</i></p> <ul style="list-style-type: none"> Home school are contacted to provide information on pupils’ abilities. Assessment information for long-stay children is readily accessible to all staff and informs next steps planning. Long stay EYFS children’s records are kept using a Southwark star learning journey. The statutory Progress Check at Age 2 is completed when appropriate (i.e. for long term pupils for whom this is their only setting). Long stay KS1/2 pupils’ logs record achievement and progress within the lessons and across time. This information and an Attendance Certificate are passed to home schools on discharge. 	<p><i>Short-Stay Pupils</i></p> <ul style="list-style-type: none"> Staff observe children to assess their well being, ascertain their interests and gauge current levels of attainment. This information is recorded on a short term log to inform staff if a child attends the school again.
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<p>9. Attendance, Achievement and Progress Supporting children to achieve to the best of their ability in the context of their current well-being.</p>	<ul style="list-style-type: none"> Staff encourage attendance through personal morning and afternoon collections. Where practicable, a member of staff will do a second collection round for children are unable to attend at school opening times due to doctor’s rounds or therapy appointments. Children are motivated to attend sessions in the schoolroom even when they are feeling unwell. Children participate in the focused activity (and/or a self-initiated activity) with concentration and a level of engagement and enjoyment in line with their current physical, emotional and psychological well-being and appropriate to their age / ability. Appropriate to their age and ability, children reflect on their achievement and can identify things that went well or things they found difficult. Children show a sense of pride in what they have accomplished. They share their achievements with peers and staff present and with parents / carers and/or staff on the wards. Children’s logs record achievement and progress within the lesson and across time. They inform next steps planning for long-stay children. The Team regularly rewards good effort, determination, resilience and achievement through session certificates, activity 			

	stickers, presentations of EHS equipment, Readathon books , targeted verbal praise and Head Teacher Awards.
10. Flexibility Delivering outstanding provision through flexible working practices	<ul style="list-style-type: none"> • Specialist resources and/or focused one-to-one teaching assistant support will be used to ensure access to learning for children with individual needs. • Staff adapt lessons to accommodate different medical conditions and states of well being. • Staff adapt lessons to match home school targets and/or curriculum. • Children will access activities appropriately matched to their age/ability/medical conditions.

Provision Framework of Teaching & Learning: **Secondary**

Version: June2016

1. Environment Creating a welcoming, safe and stimulating environment accessible to all.	<ul style="list-style-type: none"> • Pupils are invited to sit at the tables grouped in the centre of the room. The height of the tables is adjusted to suit the individual pupils. Pupils who attend in beds or wheelchairs will usually be at either end of the room or the atrium where there is more space. Where a pupil is attached to a drip or other medical equipment that needs to be plugged in, they will be placed where this does not create a hazard. • Details of individual pupils with their wards, medical needs and other sensitive information is kept by staff in the classroom, and a class register is also maintained. • Many of the classroom's resources are on open view, and pupils' work is on display. • Safeguarding is the highest priority and staff are fully confident in following the school's procedures and protocol at all times. Please see the school's safeguarding policy. 	
	Long stay pupils have their own folders and shelf space in the classroom. They will also play their part in welcoming new pupils, helping them settle and providing positive role models.	Parents and carers of short-stay pupils are welcome to join the classroom if this helps the short stay pupil to feel more comfortable. The adults are encouraged to participate in the lesson. Short stay pupils are welcomed and engaged in conversation through a questionnaire.
2. Respect & Relationships Promoting good	<ul style="list-style-type: none"> • Staff work at building positive relationships in the classroom. Classroom rules for behaviour, including respecting each other are regularly updated by pupils. Both staff and pupils are called by their first names. There is a supportive environment built on mutual respect. There is a relaxed, friendly atmosphere. 	

behaviour and trusting relationships based on mutual respect.	Long stay pupils model good behaviour and attitudes, including welcoming new pupils into the classroom, helping them settle, and supporting them with their work.	Short stay pupils are greeted by staff and long stay pupils. They will often play educational games to help them integrate and feel part of the group.
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3. Well-being & Health and Safety Ensuring physical, social and emotional well-being. Ensuring children feel comfortable and safe.	<ul style="list-style-type: none"> • Being in hospital and unwell can have a significant effect upon a child's wellbeing. • Staff are sensitive to pupils' emotional and physical well-being to help them settle in the classroom and enjoy their learning. • There is a culture of openness and trust. Mistakes are welcomed as a route to greater understanding and learning. Pupils know that the classroom is inclusive, that their successes will be met with praise, and their difficulties be will attended to in a supportive way. 		
	<table border="1"> <tr> <td>Long-term and recurring pupils play a significant part in maintaining an environment in which pupils feel comfortable and safe. Some of the long-term pupils are asked to be ambassadors for the school and help motivate pupils that might be anxious. They do this by telling them about their own experiences of school.</td> <td>New pupils are encouraged to be honest about any difficulties they have in their learning so that staff can support them effectively. Certain pupils who are anxious about joining the class, particularly about joining a group activity, may have a discrete activity or educational challenge to allow them to observe the group and the way the classroom works.</td> </tr> </table>	Long-term and recurring pupils play a significant part in maintaining an environment in which pupils feel comfortable and safe. Some of the long-term pupils are asked to be ambassadors for the school and help motivate pupils that might be anxious. They do this by telling them about their own experiences of school.	New pupils are encouraged to be honest about any difficulties they have in their learning so that staff can support them effectively. Certain pupils who are anxious about joining the class, particularly about joining a group activity, may have a discrete activity or educational challenge to allow them to observe the group and the way the classroom works.
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4. Communication Communicating clearly and effectively. Working together to support the child and their family. <ul style="list-style-type: none"> • Parents, carers and pupils • Home schools and Atrium School staff • Medical team and other professionals 	<ul style="list-style-type: none"> • Confidential information is shared between staff so that they are aware of pupil needs whether medical, academic, social and emotional, or physical. <table border="1"> <tr> <td> Long stay pupils are involved in plans for the classroom each day, and aware that they may have a greater role assisting in the classroom depending upon who attends. They may be working at tasks set by their home school, or by EHS. Long stay pupils may discuss their condition with staff. Many of our pupils have chronic conditions that mean they have missed large amounts of schooling and have significant gaps in their knowledge. This has a negative effect on their self-esteem and belief in their ability. Staff help pupils to address these gaps, and to feel renewed interest and confidence in their learning, rising to new challenges. </td> <td> Information given by the ward, and by parents and the pupils themselves, helps staff gather relevant information about short stay pupils' needs and interests. The alien environment of hospital can make pupils uneasy and on edge. In the classroom we are able to offer a more normal environment with a non-medical emphasis. Medical procedures are not carried out in the classroom. Being with their peers may help them to relax and even in a short time, they may succeed in understanding something that has been difficult for them at school. </td> </tr> </table>	Long stay pupils are involved in plans for the classroom each day, and aware that they may have a greater role assisting in the classroom depending upon who attends. They may be working at tasks set by their home school, or by EHS. Long stay pupils may discuss their condition with staff. Many of our pupils have chronic conditions that mean they have missed large amounts of schooling and have significant gaps in their knowledge. This has a negative effect on their self-esteem and belief in their ability. Staff help pupils to address these gaps, and to feel renewed interest and confidence in their learning, rising to new challenges.	Information given by the ward, and by parents and the pupils themselves, helps staff gather relevant information about short stay pupils' needs and interests. The alien environment of hospital can make pupils uneasy and on edge. In the classroom we are able to offer a more normal environment with a non-medical emphasis. Medical procedures are not carried out in the classroom. Being with their peers may help them to relax and even in a short time, they may succeed in understanding something that has been difficult for them at school.
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<p>5. Pedagogical approaches to support learning and inclusion</p>	<ul style="list-style-type: none"> • Pupils are recognised as the experts of their learning. Staff will talk with them to discover particular concerns; their health on the day; interests and experiences; prior learning; strategies they use to deal with disorders such as dyslexia, to encourage them to be in control of key aspects of their learning. • All pupils, long and short stay, are engaged in creative lessons that encourage divergent thinking. They are encouraged to be self-critical about their own work and progress. Where possible, a personalised approach to learning is offered to accommodate individual aptitudes and needs. • Pupils work independently, with one-to-one support, in pairs or in a group using a range of resources appropriate to task and learning. • Pupils are encouraged to participate in some group activities so that they can benefit from the social aspect of the classroom. • Pupils will experience a range of pupil focused learning experiences in the secondary classroom. These will include independent enquiry, multi-sensory, collaborative, creative, flexible, reflective and social. They will have opportunities to use various technologies, including audio recording equipment and digital photography to support their learning across the curriculum. • In the classroom pupils are given the opportunity to identify areas of weakness for revision / instruction. Individual feedback is provided within the session so pupils know how to improve their work.
<p>6. Curriculum Consolidating and extending knowledge, skills and understanding in literacy, numeracy, ict, personal & social health education and creativity.</p>	<ul style="list-style-type: none"> • Teaching and learning is through a planned curriculum that is cross-curricular and differentiated. The curriculum encompasses all the core subjects in addition to a variety of foundation subjects. Morning sessions begin with pupils involved in purposeful and enjoyable activities that stimulate curiosity, prepare the brain for learning and support core skills. Lessons are planned to include active, independent learning and collaborative activities, differentiated according to age, ability and well-being. • Pupils with special needs are identified and appropriate activities and support given to provide a route to learning. The work of all staff and pupils is valued and individuals are encouraged to reflect on and share their achievements with the group at the end of each lesson. • Outside agencies help widen the curriculum and broaden pupils' outlook. • Short stay pupils may be working on tasks brought from their home school, but will always be encouraged to participate in some group activities so that they can benefit from the social aspect of the classroom and contribute to the success of the classroom. • Long stay pupils work on agreed tasks at appropriate levels. They may have work from their home school, or work from EHS. They are encouraged to work independently and as part of a group. • Pupils who bring homework set by their home school are given support with this as necessary. • Short-stay pupils who have attended the morning session, may have had further literacy / topic work set for completion in the afternoon session. • Where possible students are given the ability to complete work from their home school. • Afternoon sessions at times involve working with pupils from the primary classroom on whole school activities.

Provision Framework of Teaching & Learning: **Ward**

Version:) 10/6/16 FD

<p>1. Environment Creating a welcoming, safe and stimulating environment accessible to all</p>	<ul style="list-style-type: none"> • Staff link with hospital staff to ensure they are briefed of medical conditions/ equipment/ treatment plans through daily Ward hand over meetings and through weekly Psychological and Social multidisciplinary meetings. • This information informs timing of a teaching session, the nature of the activity selected and the types of resources/ equipment used to ensure access to education. • Contact with Ward staff, family members of children may be made to discuss educational or pastoral needs and provide information or support. • Teaching takes place bedside in 1:1 or small group situations through activities on the Ward. • Potential risks are considered; health and safety protocols on infection control and safe working practices are followed. All staff are familiar with school child protection procedures and protocols. • Ward Team liaise with School room staff to ensure safety and well being of children transitioning between Ward and Schoolroom environments. • Guidance for all Ward Team and visitors is signposted and available in the Ward Team Folder. • Safeguarding is the highest priority and staff are fully confident in following the school's procedures and protocol at all times. Please see the school's safeguarding policy.
<p>2. Respect & Relationships Promoting good behaviour and trusting relationships based on mutual respect.</p>	<ul style="list-style-type: none"> • Staff quickly establish positive and supportive relationships with parents and child. • Parents and children are consulted about their preferred methods of communication, interests and other approaches/activities that might be successful in engaging their child. • Pairing of staff to pupils is carefully considered in teaching allocation, as relationships between staff and a child develop. • Lessons are tailored and adapted to meet the physical and emotional needs of the individual.
<p>3. Well being & health and safety Ensuring physical, social and emotional well-</p>	<ul style="list-style-type: none"> • Staff ensure they are informed of medical procedures pending, pain issues or medication impacting on the ability to engage prior to beginning their teaching session. They use this knowledge to respond flexibly in the teaching session. • Length of teaching sessions is flexible to accommodate individual needs and medical treatment plans. If appropriate teaching sessions are scheduled into a child's therapy timetable. • Hospital protocols on infection control are applied in the appropriate circumstances (e.g. disposable and/or laminated materials

<p>being. Ensuring children feel comfortable and safe.</p>	<p>in isolation rooms). Enquiries are made to medical staff when there are new and/or challenging health risks, to ensure the teaching team applies the correct protocols</p> <ul style="list-style-type: none"> • Safeguarding concerns are noted and monitored on a daily basis for the attention of our DSL. • All the Ward Team members and any external visitors are aware of safeguarding protocols.
<p>4. Communication Communicating clearly and effectively. Working together to support the child and their family.</p>	<ul style="list-style-type: none"> • Staff gather and share information with a variety of sources: in morning handover, psychosocial meetings, ward staff, parents/carers and home school. Detailed information is held on our MIS and internal systems. This ensures that personal, social, medical and educational information is shared and that learning programmes are based on a holistic understanding of the child's strengths and individual needs. Confidentiality is ensured and information updated and shared throughout the school day. • Staff ensure smooth transition and continuity for the child from one education setting to another within the hospital on admission and on return to the home school. Home schools, parents and children are encouraged to set up regular communications to enable continuity of education and referrals to home tuition services when appropriate once a child is discharged. Information sharing is timely, informative and communicated to all those 'who need to know'. • Longer term pupils are supported through the keyworker and liaison worker systems.
<p>5. Pedagogical approaches to support learning and inclusion Employing a range of teaching styles to facilitate challenging learning appropriate to individual needs and changing circumstances</p>	<ul style="list-style-type: none"> • Staff place a strong emphasis on developing engagement, self-awareness and confidence as learners with transferrable learning skills while raising awareness of personalised learning styles. • Staff model a range of emotional, cognitive and social behaviours in their interactions with children and other adults. Where appropriate, certain interactions may be made explicit to develop children's awareness of 'learning power muscles' and how the capacity to use these is useful in different contexts. • Pupils' individual interests and abilities are considered when planning activities. • Lessons are adapted and modified to fit in with a child's changing medical condition, whether improving or deteriorating. • Lessons are well resourced in topic packs with differentiated activities, links to National Curriculum and cross phase learning objectives.
<p>6. Curriculum</p>	<ul style="list-style-type: none"> • Activity packs suited to different ages and abilities are planned which link in with the term's whole school theme. Activity packs

<p>Consolidating and extending core skills (literacy, numeracy, science, ICT, personal and social, and creativity)</p>	<p>are skills-led often with a social, emotional, communication, literacy and creative, practical focus with the aim of encouraging greater engagement with and enjoyment of learning.</p> <ul style="list-style-type: none"> • Lessons may also be taught as discrete curriculum subjects linking to home school topics or a specific need identified by the pupil. • Sensory activities are facilitated for children with complex needs. • When appropriate to the child's well-being, home schools are contacted. Support is given to facilitate completion of home school work including use of websites and virtual classrooms. • Learning goals for children with communication difficulties, complex medical needs and SEND are informed by therapy goals set by hospital professionals, home school targets, Pupil Passports and EHCPs. • Students and new staff are given induction and access to our Guidance for Working on Ward to ensure that provision on the ward is maintained to a consistently high standard.
<p>7. Resources Ensuring access and inclusion.</p>	<ul style="list-style-type: none"> • The department has resources suited to all ages and abilities. Where necessary, additional resources are created, researched on the internet and purchased to ensure access to education for all abilities. • Specialist resources, including ICT hardware and software and multi-sensory materials are used to provide access to the curriculum for a range of individual needs. • Laminated/disposable resources are created for isolation cubicles.
<p>8. Assessment and appropriate challenge Identifying individual needs, providing appropriate challenge, monitoring progress</p>	<ul style="list-style-type: none"> • Initial assessments are based on observation-through-teaching and on information gathered from parents / professionals who know the child. Ward staff meet regularly throughout the day and after school to discuss pupils and share information which informs planning. • Detailed logs with clear learning objectives/assessments/next steps are written after every teaching session. Differentiated learning objectives are based on initial assessments. Logs show outcomes of each activity. • Pupils are engaged and motivated in a range of activities across the curriculum areas based on Evelina School themes or on information received from the home schools. • Home schools are encouraged to send appropriately challenging work for children during their hospital stay . Evidence of progression is documented on MIS and shared with home schools through email, telephone contact, attainment reports and samples of work. Feedback on this work from home schools is used to monitor children's progress and further inform planning for individuals. Pupils are encouraged to take copies of their work back to their home school
<p>9. Attendance, Achievement and Progress</p>	<ul style="list-style-type: none"> • Home schools receive registers indicating Evelina school attendance for any children when requested by a parent or a home school. • Children receive constructive staff feedback throughout the teaching session. Pupils are encouraged to reflect on their

Supporting pupils to achieve to the best of their ability in the context of their current well-being.	<p>achievement and progress so they can understand how to improve their work. Written work is annotated with feedback in line with the EHS marking policy and copies provided for home schools when appropriate.</p> <ul style="list-style-type: none"> • Long stay pupils receive an attainment report when requested or at the end of a term or an academic year. • Recurring pupils have individual learning folders where details of their needs, their education plans and evidence of their learning journeys are held. • The Ward Team regularly rewards good effort, determination, resilience and achievement through session certificates, activity stickers, presentations of EHS equipment, Readathon books , targeted verbal praise and Head Teacher Awards.
10. Flexibility Delivering outstanding provision through flexible working practices	<ul style="list-style-type: none"> • Activities are adapted to changing medical conditions, at times during teaching sessions. When appropriate, lessons are timetabled to fit in with medical procedures or therapy sessions as part of a child’s routine. • A flexible approach to teaching is encouraged at all times to maintain a personalised learning approach centred on the child’s physical and emotional wellbeing. • Where appropriate lessons may be delivered in pairs and small groups on the ward , involving other children , family members and friends to support socialisation and engagement. • Children are encouraged to attend our school rooms where possible to repair, maintain and develop their social interactions and to aid their transition between hospital and their home schools.

Provision Framework of Teaching & Learning: **Dialysis Class**

Version: June 2016

1. Environment Creating a welcoming, safe and stimulating environment accessible to all (1)	<ul style="list-style-type: none"> • Dialysis ward becomes a learning environment during designated school hours and is acknowledged and valued by parents and medical professionals as such. • In recognition of this, parents, carers and visitors are encouraged to leave the ward during school hours. (However, as EYFS children receive a time tabled slot, parents/carers stay with their children in between sessions. At times parents and carers stay due to concerns regarding their child’s medical needs.)
2. Respect & Relationships	<ul style="list-style-type: none"> • School and medical staff work together and are respectful of each other’s roles. Pupils, parents and professionals respect school

<p>Promoting good behaviour and trusting relationships based on mutual respect.</p>	<p>times. Pupils are confident talking to the teaching staff about worries and concerns which affect their education and lives.</p> <ul style="list-style-type: none"> • Staff model a polite and respectful manner; staff have an excellent understanding of pupils' emotional and behavioural needs and devise behaviour management strategies as appropriate to ensure successful learning outcomes. These strategies are shared with parents and medical professionals to support a holistic approach to behaviour management.
<p>3. Well being & health and safety Ensuring physical, social and emotional well-being. Ensuring children feel comfortable and safe.</p>	<ul style="list-style-type: none"> • Staff ensure noise-levels and teacher-pupil engagement are adjusted appropriately when medical staff need to carry out a medical procedures; staff consistently follow infection control and safeguarding procedures; they reinforce ward health and safety protocols related to children's treatment positions. • Staff are in regular contact with home schools over education and medical issues; staff work effectively with home schools to maximise pupils' participation in home-school life. • Staff are sensitive in dealing with pupils when pupils are unwell/ upset during treatment or by the experience of others on the ward. Pupils are encouraged to be sympathetic to the unwell child, but also to understand their need for quiet and privacy. Well pupils are encouraged to focus on their learning. • Staff work as a supportive/interchangeable team and pupils are confident working with all members of the team. • Staff are skilled at providing appropriate support when pupils' treatment, physical well-being and/or emotional state impacts on their ability to learn. • Pupils receive e-safety guidance and general information about keeping safe. • Safeguarding is the highest priority and staff are fully confident in following the school's procedures and protocol at all times. Please see the school's safeguarding policy.
<p>4. Communication Communicating clearly and effectively. Working together to support the child and their family.</p> <ul style="list-style-type: none"> • Parents, carers and pupils 	<ul style="list-style-type: none"> • Staff attend and contribute to ward and professional meetings. They are considered an important part of the Dialysis Ward Team. • Staff are pro-active in keeping parents up to date with their child's education progress; they are accessible on a daily basis and create opportunities for parents to talk about their child's education and/or other school issues. • Staff have established effective systems of communication with pupils' home schools which ensure the hospital school complements and supports home school learning. • Staff provide opportunity for and encourage pupils to discuss issues related to their education; they involve pupils in problem

<ul style="list-style-type: none"> • Home schools and Atrium School staff • Medical team and other professionals 	<p>solving and decision-making around the practical day-to-day issues related to being dual roll.</p> <ul style="list-style-type: none"> • The dialysis class team meet as necessary to share information from ward rounds / visits / parental contact. This information informs decisions on next steps planning for pupils, including best deployment of staff and resources.
<p>5. Pedagogical approaches to support learning and inclusion</p> <p>Employing a range of teaching styles to facilitate challenging learning opportunities appropriate to individual needs and fluctuating states of well-being.</p>	<ul style="list-style-type: none"> • Staff place a strong emphasis on developing self-aware and confident learners with transferrable learning skills. • Staff model a range of emotional, cognitive and social behaviours in their interactions with children and other adults. Where appropriate, certain interactions may be made explicit to develop children’s awareness of ‘learning power muscles’ and how the capacity to use these is useful in different contexts. • Staff adapt tasks when pupils’ treatment impacts on their well being and/or their ability to learn. • Pupils learn mostly one-to-one due to the nature of their treatment; where possible, opportunities are created for pair and group work. Pupils have opportunities to practise turn-taking and other social skills. • Pupils have the opportunity to pursue activities related to their own interests in addition to their home school curriculum as well as using EHS’s termly topic as a springboard for learning.

<p>6. Curriculum</p> <p>Building Learning Power (Learning Skills)</p> <p>Consolidating and extending core skills (literacy, numeracy, ict, personal and social, creative)</p>	<ul style="list-style-type: none"> • Staff follow the agreed home school curriculum plans for each pupil ensuring continuity of education. Staff liaise with home schools to prioritise particular subject(s) / areas of learning. Individual learning plans develop knowledge, skills and understanding which reviews, consolidates and/or extends home school curriculum. When necessary, pupils' home school plans/ are adapted to meet needs of the child at that time. Feedback is given to home school/parents in such circumstances. • When home school plans are not available, staff plan and deliver activities appropriate to age and ability based on prior knowledge of home school curriculum and the child's achievements and/or EHS curriculum and individual targets. • Most lessons are delivered 1:1; however, staff provide opportunities for collaborative sessions. Visiting workshops enrich the learning experience and socialisation within the group. • Staff ensure all pupils contribute to the daily reflection on their learning and school experience. During joint sessions with our external visitors pupils develop skills of working as part of a team. We aim to develop a sense of belonging and recognise achievement under challenging circumstances. This happens through assemblies, rewards and parent/carers meetings with the school team.
<p>7. Assessment and appropriate challenge</p> <p>Assessing strengths, identifying individual needs and providing appropriate challenge.</p>	<ul style="list-style-type: none"> • Staff liaise with pupils' home schools in order to gather baseline information on attainment and rates of progress and special educational needs and to find the most effective ways of supporting the continuity of education. • Pupils are working at appropriate levels and are being challenged. They enjoy their learning and are proud of their achievements. They are clear about objectives/ tasks and expected outcomes/ length of lesson. There is regular dialogue with pupils during the course of the lesson so that they can check with the teacher how well they are doing and how to improve their work. The marking policy supports children in reflecting upon their work and how to improve and reach goals. • There is a range of shared monitoring of pupil progress with home schools through the National Curriculum objectives, shared setting of targets for IEPs, enabling pupils to take home-school tests, mock exams on the dialysis unit. Staff organise and support transferred candidate arrangements for GCSE exams and other public exams. • Occasionally acute patients requiring dialysis are present on the ward. Although usually too unwell to participate in school they will be offered games and activities to engage with as and when appropriate.

<p>8. Attendance, Achievement and Progress</p> <p>Supporting pupils to achieve to the best of their ability in the context of their current well-being.</p>	<ul style="list-style-type: none"> • Home schools receive attendance registers half-termly, so that all attendances in dialysis unit school can be accurately recorded as dual roll attendances (or illness). • Pupils show a sense of belonging to Dialysis class as well as their home school. They participate in Dialysis assemblies with pride, showing off home school work and work from Evelina School projects. • Pupils demonstrate good study and self-organisation skills. Pupils are confident at initiating learning. They frequently take a lead in determining next steps. • Constructive staff feedback (and marking where appropriate) occurs throughout the session. It is of a consistently high quality and enables pupils to understand how to improve their work. Pupils are encouraged to reflect on their achievement and progress at the end of every session. • Pupils celebrate their own achievements and appreciate the achievements of others. • Staff log pupil achievement and wellbeing session by session, tracking progress over time and monitoring the effective of well-being on learning outcomes. Staff regularly feedback to home schools about how pupils have managed tasks and assignments. Pupil progress and achievement reports are written at the end of the summer term or on discharge.
<p>9. Resources</p> <p>Ensuring access and inclusion.</p>	<ul style="list-style-type: none"> • Resources are of high quality (whether home produced or commercially purchased) and meet the diverse individual learning programmes delivered at the school. Where a pupil requires particular text books / set texts to complete a home school project (e.g. primary topic, GCSE course) or specialist resources to access the curriculum, these are purchased for use on dialysis. Staff liaise with home schools and specialist advisory services to ensure the value for money. • Internet provision enables pupils to access their home school VLE. • Resources are arranged and adapted to provide opportunities for independent learning on the dialysis unit.
<p>10. Flexibility</p> <p>Delivering outstanding provision through flexible working practices</p>	<ul style="list-style-type: none"> • Staff, resources and time are managed effectively to maximise the learning opportunities for pupils; rotas are used when necessary to ensure all pupils have equal opportunity to work with range of staff. • Specialist tutors or staff members are brought in to support particular subjects or assignments. • Opportunities are created for teaching in different groupings - pairs, small groups.

Provision Framework of Teaching & Learning: Administration Team

Version: Draft 1 – 15th June 2016

<p>1. Environment & health and safety</p> <p>Creating a welcoming, safe and stimulating environment accessible to all</p>	<ul style="list-style-type: none"> • Staff on reception are friendly, approachable and well-informed. New pupils are taken into the classrooms and if teachers are busy support is given to settle them with an activity. • Initial security checks are processed for all visitors. DBS checks are verified and entered on the central register. • Visitors sign in and are issued with identity badges. Staff are aware by colour coded lanyards who has a valid DBS check and who has not and needs to be accompanied. • Induction in EHS Safeguarding Procedures is conducted at point of school entry for all casual supply staff, visiting workshop providers and any other visitors working with children. • All visitors are asked to conform to infection control procedures. • The team ensures the school premises complies with Health and Safety regulations – e.g. <ul style="list-style-type: none"> ○ The Administration Officer and SBM are fire wardens. ○ The SBM liaises with Trust safety officers including the Fire Officer and Essentia to ensure regulations are complied with. ○ The SBM ensures the school adheres to all aspects of Safer Recruitment and maintains up-to-date Single Central Register. ○ The SBM is the health and safety officer, ensuring premises and resources are checked regularly for risk and undertakes rigorous risk assessments on all areas of the school and deals with issues arising.. ○ Occupational Health checks made on all staff.
<p>2. Respect & Relationships</p> <p>Promoting good behaviour and trusting relationships based on mutual respect.</p>	<ul style="list-style-type: none"> • Reception support staff are first port of call for information for visitors, hospital professionals and parents. They may encounter parents in distress; when this happens they respond sympathetically and tactfully, before referring parents onto the appropriate team leader or member of Senior Leadership. • The team supports and monitors the collection of staff, parental and pupil feedback surveys. Data from this feedback informs internal self-evaluation. • The team adopts a solution-focused approach to short and long-term challenges; along with all other staff, their excellent inter-personal relationships with school and hospital staff, parents and pupils exemplifies the school’s core values on a daily basis.

<p>3. Well being</p> <p>Ensuring physical, social and emotional well-being. Ensuring children feel comfortable and safe.</p>	<ul style="list-style-type: none"> • All staff and school facilities contribute to whole school well-being - Kitchen facilities; virtual staff room; monitoring cleaning; efficient waste disposal and recycling services. • See also Criteria 1: Environment and Health and safety • See also Criteria 2: Respect and Relationships. • See also Criteria 3: Communication to support selected pupils Education Plans
<p>4. Communication</p> <p>Communicating clearly and effectively. Working together to support the child and their families.</p> <ul style="list-style-type: none"> • Parents, carers and pupils • Home schools and School staff • Medical team and other professionals 	<ul style="list-style-type: none"> • The team provide effective support and administration for pupils and professionals related to the implementation of selected pupils' Education Plans, in particular with respect to: <ul style="list-style-type: none"> ○ Attendance ○ Liaison with specialist staff ○ Team Around the Child liaison. ○ Liaison with home schools. ○ Preparing publicity and information materials • The team high quality branded communication media that conveys clearly the aims and achievements of the school in print, online, and in display materials • ICT network providing staff with shared calendars, email contacts • Prompt polite correspondence with school partners and suppliers • Networking / communication with NHS staff • Proof reading documents of all kinds for quality assurance prior to distribution • Regular tours of the school provided to newly trained hospital staff and other visitors
<p>5. Pedagogical approaches to support learning and inclusion</p> <p>Employing a range of teaching styles to facilitate challenging learning</p>	<ul style="list-style-type: none"> • The administrative team ensures that the resources needed for teaching and learning are ordered promptly and stored in an orderly fashion. • The SBM collates information on pupil attainment and provides it to SLT and the teaching staff in an appropriate format to support pupil progress. • The SBM allocates budgets and monitors expenditure to support the teaching and learning aims of the school. • The administrative team ensure that events and workshops run smoothly by ensuring that resources are available to support these initiatives.

<p>opportunities appropriate to individual needs and fluctuating states of well-being.</p>	<ul style="list-style-type: none"> • The administrative officer and SBM support the school by keeping the website up-to-date with news, events and curriculum articles. • The administrative assistant entered pupil data on the MIS system, checks logs and cleanses data to ensure that effective pupil records are maintained. • The administrative assistant provides cover in the classroom for HLTA absence and works specifically on food technology lessons once a week. • Administrative staff are active on MIS team and the ICT team attending meetings and contributing to projects.
<p>6. Curriculum Consolidating and extending knowledge, skills and understanding in literacy, numeracy, ICT, personal & social health education and creativity.</p>	<ul style="list-style-type: none"> • The SBM is a member of the ICT team supporting teaching colleagues with ICT issues. She also advises on pupil data issues and collation of prior attainment and other pupil data to support learning and progress. The administrative assistant supports the SLT team with collating documentation to support assessment and safeguarding.
<p>7. Assessment and appropriate challenge Assessing strengths, identifying individual needs and providing appropriate challenge.</p>	<ul style="list-style-type: none"> • The customised MIS supports information sharing on baseline assessment and the monitoring of pupil progress for long-stay and recurring pupils.
<p>8. Attendance, Achievement and Progress Supporting pupils</p>	<ul style="list-style-type: none"> • The team contributes directly to enhanced pupil outcomes, in particular with respect to: <ul style="list-style-type: none"> ○ Attendance: Long-stay and recurring pupils' attendance records are shared with the home schools; absence through illness is monitored closely for selected children with chronic conditions to assist with targeted support (e.g. home tuition, re-integration plans, transport)

<p>to achieve to the best of their ability in the context of their current well-being.</p>	<ul style="list-style-type: none"> ○ Pupil Progress: The team administers the school's customised MIS. This is reviewed in consultation with the ICT Team, to improve data collection for a variety of purposes, including supporting SLT and Governors with monitoring of individual pupil progress, and the progress of different admission types (e.g. short, long, recurring).
<p>9. Resources Ensuring access and inclusion</p>	<ul style="list-style-type: none"> ● The SBM provides advice and guidance to the SLT and staff on appropriate ICT and other resources to support administration, teaching and learning. The administrative officer sources best value to ensure efficient use of school funds. ● The administrative team ensure financial controls are in place and appropriately applied.
<p>10. Flexibility Delivering outstanding provision through flexible working practices</p>	<ul style="list-style-type: none"> ● The support team has developed a dynamic, bespoke and adaptable data management systems (MIS). ● The SBM provides ICT support to teachers delivering curriculum ● Support staff in Performance Management targets contribute to school's strategic vision and annual school improvement planning and review