
IPSWICH HOSPITAL SCHOOL IMPROVEMENT PLAN

2022-2023



RÆDWALD
T·R·U·S·T

SEPTEMBER 2022

Ipswich Hospital School

1. Academy Priorities, Areas for Development (AfD), Key performance Indicators (KPI) Summary 2022-2023

Overarching themes for Parkside URN: Establishing a culture of leadership, Reading and Supporting struggling readers, Attendance and Working in Partnership (Selected from the Trust Priorities and identified areas of focus from last inspection).

Priority 1: Enabling Inspirational Leadership and Management

AFD	Area for Development	KPIs	Actions	Evaluation RAG					
				1/6	2/6	3/6	4/6	5/6	6/6
AFD 1.2	<p>Create a culture of determined leadership across the trust, rooted in growth and possibility. Establish and develop a culture of leadership and responsibility</p>	<ul style="list-style-type: none"> Where appropriate, cross-trust working is evident; drawing on the expertise of others and providing support to those who need it. Leader of Hospital School contributes to Trustwide CPD, in particular with relation to Mental Health and Medical Needs IHS team continue to liaise with Next Steps Medical Team and wider agencies to increase local understanding of the pathway and MNIS. RT has a Mental Health Policy in place A mental health lead is in post for each site, clear about Terms of Reference and their role, and routinely meets with Hospital Lead to raise awareness of 	<ul style="list-style-type: none"> Teachers use their initiative to draw on support across the trust when needed. They take part in cross trust working teams. They offer their expertise in supporting those with similar responsibilities across the trust. Teachers continue to review and improve their subject area, drawing on evidence-based research to inform their practice. Trustwide CPD delivered by Lead Teacher at Hospital School for MNIS and Mental Health; September 2022 Mental Health audit across the Trust Mental Health Policy to be written and implemented Hospital School Lead to share exemplar Mental Health Policy with CEO and Trust Board. Trust Board agrees MH Policy and implements Trustwide Lead Teacher to set dates for MH Lead meetings, set agenda and chair 						

		Mental Health issues across the Trust	<ul style="list-style-type: none"> Continue to work alongside MN Pathway (St C's) to promote and embed wider stakeholder understanding of the Medical Needs pathway. 						
AFD 1.5	Strengthen policies and procedures to ensure that statutory requirements are met and accountability measures are supported	<ul style="list-style-type: none"> RT Policies and Procedures are in place and followed as far as practicable in the NHS Hospital setting Supporting Children with Medical needs Policy in Schools is reviewed for the Trust and policy used as an exemplar across Suffolk – shared with MNiS partner schools 	<ul style="list-style-type: none"> Staff at IHS use internal and external scrutiny to consciously review policy and procedures. Lead teacher to review MN Policy, keeping up to date with any policy changes through continued membership of NAHE; MNiS and advising Trust Board of any changes Strengthen links with school nursing service and other local groups e.g., SNEE CYP Asthma project Mandatory training for Hospital School staff following NHS procedures is undertaken 						

Priority 2: Delivering High Quality Learning

AFD	Area for Development	KPIs	Actions	Evaluation RAG					
				1/6	2/6	3/6	4/6	5/6	6/6

<p>AFD 2.1</p>	<p>Ensure an ambitious programme of exceptional learning through inclusive practices.</p> <p><i>Link to Ofsted – points 1 and 3 Staff are expert in managing pupils’ needs and anxieties. Leaders have started to provide staff with more specialist training related to improving pupils’ mental health. Leaders need to train all staff so more are highly skilled at meeting pupils’ needs.</i></p>	<ol style="list-style-type: none"> 1. RT Readers for Life Curriculum is prioritised daily to ensure all pupils can access learning 2. Struggling readers have access to RWI fresh start to support inclusion. 3. Pupils engage with their reading/intervention sessions 4. EDI framework is evident in all sessions as appropriate and internal scrutiny supports this. 5. Implementation of effective SEND strategies are evidenced in all sessions and the impact is monitored. Eg AV1 Robots <ul style="list-style-type: none"> • AV1 Robots are used in mainstream settings for some pupils with long term medical needs • Pupils feel confident accessing lessons using the AV1 • Pupils maintain progress and do not fall behind in their learning • Pupils feel less isolated • Review meetings show positive impact 	<ul style="list-style-type: none"> • Hospital School Lead teacher ensures all staff understand the foundation of the RT Readers for Life Curriculum in order to support pupils and teach reading. • Bespoke focus on the individual learner is a key focus at IHS • Reading sessions are prioritised and timetabled • Pupils receive free reading materials on admission to hospital • Phonics programme RWI/Freshstart is introduced and used with eligible pupils within the IHS; RWI Resources are acquired, sorted and prepared for use; Reading books for RWI acquired; IHS staff attend implementation days at FBI/Alderwood; IHS staff have training sessions with new materials; RWI action plan appropriate for Hospital Setting is completed • Staff use all Phonics programmes with confidence • Pupil progress is evident and recorded via Schoolpod lesson logs • AV1 Robots: Set up procedures are shared with staff at Home Schools; face to face sessions given by IHS staff for AV1 use; Home visits are completed to support families with use; Support material is shared with Home School staff /families; Signed agreement forms are acquired prior to loan and scanned into Schoolpod; Pre-lesson learning is requested from home school staff and emailed to pupil • IHS staff support any catch up necessary and provide interventions to fill any gaps in knowledge/background/ extension tasks • Feedback from pupil is routinely sought to aid with target setting and next steps • Review meetings/impact reports undertaken 						
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AFD 2.2	Implement an ambitious programme of exceptional learning for all learners through focused, challenging, pupil target setting	<ul style="list-style-type: none"> Staff are confident in the various curricula used at the Hospital School eg Home School curriculum; RT Curriculum and IHS Topic Curriculum, pedagogy and pupil progress demonstrating impact of: Pupils making progress as a result of their curriculum and teaching. Pupils reintegrate successfully back to their home schools after hospital Admission 	<ul style="list-style-type: none"> Strong working practices exist between the home school and IHS Staff to support the needs of their dual pupils Staff use information gathered through induction process to ensure individual pupil learning points are known and inform teacher planning 						
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Priority 3: Securing Safe and Energising Learning Environments

AFD	Area for Development	KPIs	Actions	Evaluation RAG					
				1/6	2/6	3/6	4/6	5/6	6/6
AFD 3.1	Institutionalise exemplary, standardised, safeguarding practices, compliant with statutory requirement and mutually strengthening procedures within and beyond the Trust (Attendance). - Establish a culture of purposeful learning by embedding high expectations for attendance	<ul style="list-style-type: none"> Attendance governed by clinical decisions that support wider engagement with agreed programme. Adjustments are made when pupils leave is communicated to wider professionals to support positive engagement. Use of MNiS to build capacity of schools to support pupils to access the curriculum. Attendance at the Hospital 	<ul style="list-style-type: none"> High expectations for Hospital School attendance is communicated to pupils on Day 1 of admission Links with Home schools are strengthened through liaison Displays: online safety; wellbeing; mental health, reading; resilience; diversity etc to be checked and updated routinely Staff access further CPD on mental health disorders pertinent to their Hospital School teaching role e.g., eating disorders; Self Harm etc Parents/Pupil lending library of self-help material is extended 						

	(at both Raedwald and mainstream).	<p>School, for those well enough, is expected and encouraged</p> <ul style="list-style-type: none"> • Safeguarding attendance in Hospital, for patients with safeguarding/mental health concerns is communicated to Home Schools • Information sharing routinely occurs with Home Schools (Safeguarding) • Displays in and around the schoolroom are relevant, up to date, and signpost staff, parents and pupils to relevant organisations eg safeguarding; mental health, online safety • Staff build on existing safeguarding procedures and have extend their knowledge of safeguarding and mental health issues pertinent to this role • Pupils indicate they feel safe in the Hospital Schoolroom • Pupils and Parents are empowered to ensure they can keep themselves self <p>New Build environment:</p> <ul style="list-style-type: none"> • Hospital School staff have a voice in the building project for the new ward • Plans indicate a suitable space for the Hospital School room 	<p>New Build</p> <ul style="list-style-type: none"> • Lead teacher attends the planning steering group • Minutes and plans are regularly scrutinised • Relevant feedback given, in particular with regard to safeguarding practicalities • Health and safety advice implemented and risks assessed e.g., infection control; new build risk assessments etc 						
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Priority 4: Empowering Supportive, Skilled and Nurturing Staff

AFD	Area for Development	KPIs	Actions	Evaluation RAG					
				1/6	2/6	3/6	4/6	5/6	6/6
AFD 4.1	Create a culture of openness, respect, transparency and responsibility.	<ol style="list-style-type: none"> 1. Positive engagement with Progress and Learning meetings with Headteacher 2. Support: Staff will actively seek support from leaders, taking responsibility for improving their own practices. 3. Community: Staff will be an integral part of the school development. 4. Communication: There will be clear lines of communication between leaders and staff grounded in openness and respect. 5. Wellbeing: Staff will feel able to speak to leaders about concerns and leaders will promote staff wellbeing. 	<ul style="list-style-type: none"> • Systems are in place to positively manage staff progress and workload (ie. Access to purpose-built curriculum to reduce planning time, etc). • Leaders will be a visible presence throughout the school and use purposeful coaching to improve practice. • Regular briefing and debrief will serve as a place to ask for and receive support from colleagues. • Staff will be guided to take a role in school developments through working parties. • Staff wellbeing schedule in place, including team building and leadership activities, questionnaire, CPD etc. 						
AFD 4.2	Develop the use of professional development across the Hospital School	<ol style="list-style-type: none"> 1. Through the RT Professional Development modules, implement a programme of professional supervision focused on development and growth. 2. CPD: CPD is delivered on a regular basis. The importance and impact of CPD is evident through teacher planning, pedagogy and wider pastoral responsibilities. 3. MNiS partners benefit from continued consultancy and training delivered by Hospital School 4. RT staff – 100 % trained on MHFA by end of year 5. Hospital School staff are able to offer consultancy to other staff and schools on complex medical and mental health needs for which they have experience and training 	<ul style="list-style-type: none"> • Support staff in implementing the PD and appraisal procedures. • Staff questionnaires to identify areas for development within given areas, for example ICT, SEND and Safeguarding. • Leaders and champions are available to support staff. • Ensure that all staff have time and resources they need to complete their PD/appraisal process. • Continue monitoring RT staff and uptake on Mental Health courses, retraining as necessary • Continue offering mental health training to all Suffolk Schools. • Further training for complex mental health and medical needs are undertaken by staff e.g., eating disorders (e.g., BEAT online training), Self- 						

			Harm <ul style="list-style-type: none"> • Lead teacher upskills to deliver adult MH training • Lead teacher updates knowledge on the new MHFA Youth course (in the New Year) 						
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Priority 5: Forging Focused Partnerships and Collaborations Benefitting Pupil Outcomes

AFD	Area for Development	KPIs	Actions	Evaluation RAG					
				1/6	2/6	3/6	4/6	5/6	6/6
AFD 5.1 & 5.3	Stakeholders have a strong voice and presence within the school (working in collaboration) Strengthen opportunities to learn from ‘pupil voice’ and influence the work	Medical Needs in Schools, Suffolk is extended. MNIS Workshops – new specialisms/presenters deliver MNIS workshops and bank of recordings on website is extended. Website for MNiS is improved and used by stakeholders MNIS Suffolk is routinely used for support and consultancy by Suffolk Schools through the Suffolk Wellbeing Network A database is compiled of all MNIS Leads across Suffolk A parental lending library of resources – mental health books and signposting – is created to support parents/professionals IHS through MNiS contributes to local initiatives to improve outcomes for pupils with medical needs	<ul style="list-style-type: none"> • Further workshops set up by Hospital School for MNIS to share with Suffolk schools and beyond. • Extend reach of presenters/ expertise into West Suffolk proactively seeking new opportunities for collaboration • Consider new / dedicated website for MNIS, Suffolk • Suffolk school staff know where to access support • Spreadsheet of all MNIS Leads in Suffolk details completed for advertising courses and sharing of information • Continued membership of the new Suffolk Wellbeing Network – contribute to monthly newsletters and advertise MNIS Hub through this • Build on the lending library for parents with MH resources to enable them to support their children • Lead teacher contributes to the SNEE CYP Asthma Project - local group advising schools across the county • Complete process of achieving the Wellbeing and resilience accreditation for Hospital School • Stakeholders are asked for 360 feedback by the 						

			end of the year <ul style="list-style-type: none"> • All standards of the award to be revisited and evidence to be uploaded for each on portal • Pupils are routinely asked for feedback from lessons via a variety of means – feedback is collated • Pupils contribute to the planning of Topics and evaluate lessons they have been taught 						
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2. Monitoring and evaluation of the action plan

In order to ensure rapid progress towards these outcomes the actions and KPIs will be monitored in the following way:

a. Academy based monitoring, including Quality of Education Committee

The school based lead for each of the AFDs in the plan will have overall responsibility for the implementation of the action plan for that priority. The lead will RAG the completion of the actions as follows:

- *RED: the action is not yet started and/or there is a high risk of slippage or non-completion.*
- *AMBER: the action has started though not yet completed, there is some slippage but not cause for concern.*
- *GREEN: the action is fully complete as specified*

Completion of the actions is intended to lead to the impact as outlined in the KPIs.

The Head Teacher will RAG rate each area for the CEO.

b. Trust based monitoring

The CEO will receive a progress report on the action. There will be an evaluation of progress towards the success measures of each AFD. On a cycle across each meeting the academy based leads will present the evidence of impact to the Head Teacher for scrutiny by the CEO and Trust Board. The success measures will be communicated to the Quality of Education Committee.