

School Improvement Plan 2017 / 18 (update June 2018)

# The Children's Hospital School at Great Ormond Street & UCH

| Full Review                | Annual         | Next review date: July 2018 |
|----------------------------|----------------|-----------------------------|
| Updates                    | Termly (SLT)   |                             |
| Full Governing Body Review | November 2017  | Date:                       |
| Approving Committee        | All            | Date: Autumn term           |
| Key contact                | Jayne Franklin |                             |
| Published on website       | YES            |                             |

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Headteacher Jayne Franklin BEd Hons (Cantab) Chair of Governors: Lara Fielden MA

# School Improvement Plan 2017 18

# The Children's Hospital School at Great Ormond Street & UCH

#### 1. Mission Statement

The Children's Hospital School seeks to minimise the interruption and disruption to children & young people's education so that academic progress and an interest in learning will continue, as far as their health permits. In order to fulfil the above we aim to:

- ✓ Provide personalised, challenging, enjoyable & innovative learning opportunities
- ✓ Make learning an integral part of children & young people's stay in hospital
- ✓ Foster the values of friendship and determination
- ✓ Prepare and empower pupils in the present & for the future
- ✓ Support, nurture and value families

The above 5 statements of strategic intent form the basis of all our school improvement planning and self review process.

#### 2. Reflecting GOS/UCLH Trusts' visions and values:

'Helping children with complex health needs fulfil their potential' GOSH vision 2017

At GOS 'The child first and always' and their 'Always' values of:

- Always be welcoming
- Always be helpful
- Always be Expert
- Always be One Team.

At UCLH the commitment to delivering top quality patient care, excellent education and world class research and their values :

- Putting safety and well being above everything
- To offer kindness we would want for a loved one
- To achieve through teamwork
- To strive to keep improving

### 3. WHOLE SCHOOL KEY PRIORITIES FOR 2017/18 ARE TO:

- i. Ensure all pupils make good or better progress towards meeting their PEP targets while taking account of their medical context
- ii. Ensure that at least 90% teaching is consistently outstanding across all age ranges
- iii. Ensure effective & appropriate referral to school for long stay pupils
- iv. Continue to build leadership capacity & capability at all levels, including Governance, so that all leaders can deliver & develop high quality provision

## 4. NON-CURRICULUM KEY STRATEGIC DEVELOPMENTS 17/18

- i. Secure the best possible resources (staff, skills, accommodation, equipment, support) to sustain school's future and realise our vision
- ii. Input into NHS strategic direction regarding building redevelopment
- iii. Reviewing database and storage of pupil data (compliance with GDPR)
- iv. Review use of income in relation to holiday provision and IPP-seek external funding

## 5. PREVIOUS OFSTED RECOMMENDED AREAS FOR IMPROVEMENT (Report 25-26 February 2014)

- Further develop how the school supports parents and students by expanding the services provided within the activity centre
- Seek more opportunities to share the outstanding practice within the school with other educational providers and organisations

### 6. FINANCE & SIP

- Three year forecast submitted to Finance Committee / SFVS completed and scrutinised by Governors
- Planned expenditure in line with income and matches school improvement priorities.
- Capital priorities include updating classroom furniture, upgrade of ipads, laptops, robotic support for distance learning
- 7. PREMISES & SIP Upcoming considerations for premises development include:
- Updating furniture for pupils in the schoolrooms
- New floor throughout schoolroom

## 8. GOVERNOR MONITORING

The Governors have a key role in monitoring the School Improvement Plan, which they do through their committees and full governors' meetings for which the Headteacher provides an evaluation of progress in achieving the SIP targets. Each governor is linked to a priority area and is encouraged to make visits with individual staff members and to our schoolrooms. The named staff contact\* may just be a starting point for discussing the relevant priorities & sign posting on to other staff; governors are welcome to shadow/meet any member of staff following our agreed protocol for school visits.

| Strategic intent   | Whole School Priorities (WSP) 2017-18  | Governor Link<br>(proposed)                     | Staff<br>Contact*            | Monitoring Progress   |
|--|--|---|------------------------------|---|
|  | WSP 1: Outcomes for Pupils   |   |                              |   |
| <ul> <li>Prepare and empower pupils in<br/>the present &amp; for the future</li> </ul>   | Ensure all pupils make good or better progress towards meeting their PEP targets while taking account of their medical context   | Ali Fryer<br>Michael Holland<br>Susie Griffiths | Bianca/Jackie                | Parent/pupil feedback, Home<br>school Liaison, case studies,<br>moderation, exam results  |
|  | WSP 2: Teaching, Learning and Assessment   |   |                              |   |
| <ul> <li>Provide personalised,<br/>challenging, enjoyable &amp;<br/>innovative learning<br/>opportunities</li> </ul>   | Ensure that at least 90% teaching is consistently outstanding across all age ranges  | Geoff Lee<br>Janice lavery<br>Katy Graves       | Danielle/Bianca              | Work scrutiny, meeting notes,<br>database planning, lesson obsv,<br>CPP feedback, governor sub<br>committees  |
|  | WSP 3: Personal Development, Behaviour & Welfare   |   |                              |   |
| <ul> <li>Make learning an integral part<br/>of children &amp; young people's<br/>stay in hospital</li> <li>Foster the values of friendship<br/>and determination</li> </ul>              | Ensure effective & appropriate referral to school for long stay pupils   | Lazzaro P<br>Jo Begent<br>Edward Green          | Senior<br>Leadership<br>Team | Database evaluations, parent<br>feedback, attendance,<br>committee discussion, action<br>plans, NHS/School meetings,<br>profile in hospital               |
|  | WSP 4: Leadership & Management   |   |                              |   |
| <ul> <li>Make learning an integral part<br/>of children &amp; young people's<br/>stay in hospital</li> <li>Prepare and empower pupils in<br/>the present &amp; for the future</li> </ul> | To further develop the role of our leadership teams, including<br>Governance, to ensure all members are able to lead with<br>aspirational vision and can demonstrate their impact on teaching<br>and learning. | Alan Farkas<br>Lara Fielden<br>Lizzie Yauner    | Jayne                        | SEF, Governor/staff meetings,<br>CPP feedback, appraisal<br>evaluations, staff<br>questionnaires, governor self<br>evaluation/audits, governor<br>minutes |

| <b>OUTCOMES WSP 1:</b><br>(Whole School Priority -WSP)   | Ensure all pu<br>context<br>September 20.<br>July 2018     | pils make good or better progress towa<br>17 1 2 3 4 5 6 7 8 9 10<br>1 2 3 4 5 6 7 8 9 10 | irds meet   | ing   | their PEI            | P targets            | while tak                           | ing account of their medical                               |
|--|--|---|---|-------|----------------------|----------------------|-------------------------------------|--|
| Strategic Intent   | Prepare and empower pupils in the present & for the future |   |   |       |                      |                      |                                     |  |
| Success Criteria   |  |   | Eviden  | се    |                      |                      |                                     |  |
| <ol> <li>Pupil continuity of learning measured and analysed in database</li> <li>Targets set by all staff are SMART</li> <li>Full reintegration to home school after discharge (where medically able)</li> <li>Pupils/parent/carers recognise and understand individual targets</li> </ol> |  | Target<br>Home  | rec<br>sch  | cords | ack/visits           |                      | amples, google +<br>Is/exam results |  |
| Impact Milestones  |  |   | 2017<br>RAG   |       | <b>R</b><br>June '18 | <b>A</b><br>June '18 | <b>G</b><br>June '18                | Comments   |
| •  | ar and timely in   | ging circumstances the target setting<br>nformation on standards achieved<br>e schools    |   |       |                      |                      |                                     | improve engagement of home schools in shared moderation    |
| <ul> <li>Teachers and leaders systematically communicate across all agencies and<br/>'home schools' for 100 % long stay and recurrent students</li> </ul>  |  |   |   |       |                      |                      |                                     | Adapt attainment element of report writing for KS2 upwards |
|  |  | long stay inpatient pupils with medical educed. Refusal rates remain below 8%.            |   |       |                      |                      |                                     |  |
| <ul> <li>% targets fully met/p</li> </ul>  | arty met are c   | onsistently above 70%   |   |       |                      |                      |                                     |  |
| Funding & Resources  |  | Cost  | Governoi  | Lin   | nks                  |                      |                                     | NHS links  |
| Database development<br>New IT assessment tools<br>Staff visits to other settings  |  | Up to £1000   | Achievement & Curriculum CommitteePFEEC/FED committeesAli Fryer Michael HollandSenior Ward SistersSusie Griffiths (staff governor)Sustantial State St |       |                      |                      |                                     | -  |

| Ch, JF ongoing<br>CL Completed<br>ELT Completed/on going<br>C Completed |
|---|
| CLCompletedELTCompleted/on going  |
| ELT Completed/on going  |
|   |
| Completed   |
|   |
| completed   |
| early stages of consideration   |
| - ongoing   |
| G/JF ongoing – workshops hard to access                                 |
| F completed/ongoing   |
|   |
|   |

Bianca is still exploring options with new providers but we do not want to make any significant or costly change until we are secure in what the system offers us as a school.

• The hospital is developing their new online patient record system (EPR) which launches in April 2019. We are part of working groups to see how this might help school – for example we may be able to 'schedule' school sessions like you would an x-ray so that all clinical and non-clinical teams can see the patient's daily timetable. This might be a significant step forward in reducing time wasted by teachers when patients are not available.

• Target setting moderation is a continuous process carried out by Assistant Heads. Staff meetings this year have had a focus on teachers only in some sessions so we can really address quality of targets. Often meet in age phases to share subject specific knowledge.

- Case studies completed and sharing with all staff-presentations to full staff group and for governors
- AH's pulling out key themes from case studies to improve delivery and outcomes
- Family Learning: E safety parent workshop, parent engagement in ward lessons, Arts Award presentation/exhibition by pupils with parents & teachers
- Evaluation of home school reports ongoing-have identified areas for improving how we share exact age related progress with home schools.
- Early Years planning moderated and increasing use of Development Matters as a planning tool. Adapting use of Tapestry to ensure meaninful feedback for families. Considering our setting and our needs and the restrictions on fully delivering the EYFS framework.

| WSP 2:<br>Teaching, Learning &<br>Assessment  | Ensure that at least 90% of teaching is consistently outstanding across all age ranges         September 2017       1       2       3       4       5       6       7       8       9       10         July 2018       1       2       3       4       5       6       7       8       9       10 |  |             |       |                      |   |  |  |
|---|---|--|-------------|-------|----------------------|---|--|--|
| Strategic Intent  | Provide perso   | onalised, challenging, enjoyable & inno                    | vative le   | arnii | ng oppor             | rtunities                                   |  |  |
| Success Criteria  |   |  | Evide       | nce   |                      |   |  |  |
| 1. Positive pupil engagement in lessons   |   |  | Self-a      | ssess | sment to             | ols, datak                                  | oase reco  | rds  |
| 2. Pupil achievement &  | progress can b  | be identified in a variety of outcomes                     | Work        | sam   | ples, dat            | abase, ok                                   | servatio   | ns   |
| 3. Purposeful meetings  | for teaching st   | aff impacts on learning outcomes                           | CPD re      | core  | ds, staff f          | feedback                                    |  |  |
| 4. Parent & carers enga   | ged in childrer   | i's learning   | Comr        | ns/da | atabase,             | parent fe                                   | edback   |  |
| 5. Staff attitude to work   | <pre>     &amp; profession </pre>   | al development positive                                    | Absen       | ce re | eports, st           | aff surve                                   | γ,   |  |
| Impact Milestones   |   |  | 2017<br>RAG |       | <b>R</b><br>June '18 | A<br>June '18                               | <b>G</b><br>June '18                                 | Comments                                     |
| Work samples/observentee the challenge of learn   |   | ently demonstrate how pupils embrace<br>silient to failure |             |       |                      |   |  |  |
| <ul> <li>Newly admitted Tier 3/4 pupils thrive quickly in lessons making substantial<br/>progress in agreed areas</li> </ul>  |   |  |             |       |                      | $\rightarrow$                               | Mental Health Functioning in<br>Education Assessment |  |
| <ul> <li>The curriculum allows all pupils to develop excellent knowledge,<br/>understanding and skills considering their individual medical needs and<br/>prior attainment</li> </ul> |   |  |             |       |                      |   |  | Added computing/Added the A (arts) in STEAM/ |
| <ul> <li>Teaching regularly pr<br/>effectively</li> </ul>   | ovide incisive  | feedback and pupils use the feedback                       |             |       |                      |   |  |  |
| Funding & Resources   |   | Cost   | Governo     | r Lin | iks                  |   |  | NHS links                                    |
| Camden Learning TDS packa<br>CPD – training outside of Car<br>Visits to other national hosp<br>(travel costs)<br>Curriculum Leaders –SEN allo   | mden Learning<br>ital schools   |  |             |       |                      | PFEEC/FED committees<br>Senior Ward Sisters |  |  |

| Ensure that at least 90% of teaching is consistently outstanding across all age ranges | Timescales                                    |  |  |  |  |
|--|---|--|--|--|--|
| ACTIONS (against success criteria)   |   |  |  |  |  |
| 1. opportunities for EYs teachers to share setting specific challenges                 | Ongoing                                       |  |  |  |  |
| 1. development of peer observations systems  | Ongoing                                       |  |  |  |  |
| 1. increased feedback from pupils and reflection on their own learning                 | Ongoing & personalised according to pupils    |  |  |  |  |
| 1. 2. moderation with teachers in other settings                                       | Completed                                     |  |  |  |  |
| 1. actively engage teaching staff in current national curriculum developments          | Completed & ongoing                           |  |  |  |  |
| 3. ensure a wide, relevant and challenging CPD offer to all staff                      | Completed & ongoing (see records of meetings) |  |  |  |  |
| 3. sharing of best practice across age range and subject specialists                   | Completed & ongoing                           |  |  |  |  |
| 4. communication systems and feedback improved, monitored & reviewed                   | ongoing                                       |  |  |  |  |
| 5. track and actively support staff well being   | Ongoing (June 2018)                           |  |  |  |  |
| Evaluation (updates Feb '18/April '18)   |   |  |  |  |  |
|  |   |  |  |  |  |

• Best practice shared through our Google Communities – moderated examples of work identify outstanding outcomes across the curriculum

• Early years staff visits to Coram Fields, Primrose Hill, Kentish (all outstanding mainstream nursery provision). Sensory stories a focus for shared staff CPD.

- Baseline-testing MHFEA -Mental Health Functioning in Education Assessment
- Primary teachers visit to Sheffield Hospital School and Oxford Hospital School. Secondary teacher visits to eating disorder clinic and school setting.
- AH visit to Birmingham Hospital School James Brindley. AH & HT attendance at HOPE conference in Poland.
- Rigorous CPD programme since Sept 2017 more focus on teaching staff as a group this year. Activity shares have once again been a thoughtful way for teams to share best practice.
- Primary and secondary teaching teams developed a collective understanding of outstanding lessons in our setting.
- Attendance at Camden Learning training for curriculum leads staying in touch with curriculum developments
- Healthy Minds at Work working with Headteacher during supervision sessions- planned and delivering full staff training on June 6 4-6pm with a focus on well being and the specific challenges facing us as a school. This work will continue to be led by UPS teacher who has chosen this as an annual appraisal target.
- Staff attendance rates remain above the Camden and National Average

| WSP 3: Behaviour,<br>Safety & Welfare   | Ensure effective & appropriate referral to school for long stay pupils           September 2017         1         2         3         4         5         6         7         8         9         10           July 2018         1         2         3         4         5         6         7         8         9         10 |  |  |     |                      |               |   |           |
|---|---|--|--|-----|----------------------|---------------|---|-----------|
| Strategic Intent  | Make learnin  | ng an integral part of children & young p                                      | people's   | sta | ıy in hospi          | ital          |   |           |
| Success Criteria  |   |  | Evide  | nce | 1                    |               |   |           |
| <ol> <li>sustained opportunities for learning on wards/schoolroom</li> <li>pupil needs identified and planned for in schoolroom sessions</li> <li>parents have greater understanding of school &amp; access to learning</li> <li>NHS staff have clear understanding of role of the school and of pupil's rights to education</li> </ol> |   |  | Database attendance records, feedback from wards<br>Staff feedback, case studies, parent/carer feedback, lesson outcomes<br>home school information on admission to school<br>Parent /carer feedback |     |                      |               |   |           |
| Impact Milestones   |   |  | 2017<br>RAG  |     | <b>R</b><br>June '18 | A<br>June '18 | <b>G</b><br>June '18                              | Comments  |
|   |   | quips them with the behaviours and<br>neir next stage of education and medical |  |     |                      |               |   |           |
| <ul> <li>Pupils are articulate<br/>to education within</li> </ul>   | -   | shtful conversations about their rights vironment                              |  |     |                      |               |   |           |
| • Learners understand the options available at transition points and set clear, ambitious and realistic plans for their future  |   | •  |  |     |                      |               |   |           |
| <ul> <li>The school's open of<br/>all aspects of pupil'</li> </ul>  |   | complex medical environment promotes   |  |     |                      |               |   |           |
| Funding & Resources   |   | Cost   | Governor Links   |     |                      |               |   | NHS links |
| Time for NHS/School leade<br>Comms officer- staff costs<br>School App development (   |   |  | Achievement & Curriculum<br>Lazzaro P,Jo Begent<br>Edward Green  |     |                      |               | Chief Nurse, CEO, Strategic<br>Safeguarding board |           |

| WSP 3: Behaviour, Safety & Welfare Ensure effective & appropriate referral to school   |  | Timescales   |
|--|--|--|
| for long stay pupils   |  |  |
| Actions (against success criteria)   |  |  |
| 1. Establish readiness for school assessment for MCU patients  | JF/DV/BC   | Completed  |
| 1. Extend research on impact regular inpatient schooling– evidence base for NHS  | BC/DV  | Ongoing  |
| 1. Benchmark approaches to school referral with other hospital settings  | JG   | Completed/ongoing  |
| 1. Re establish effective termly strategic meetings with NHS leadership  | JF   | Completed  |
| <ol><li>Increase accessibility to sharing hospital school admissions requirements</li></ol>  | JF/BC/TP   | Ongoing  |
| 2. Ensure school safeguarding policies are engaged with by NHS   | JF/BC/JG   | Completed  |
| <ol><li>Improve systems for engaging parents in pupils learning (MCU &amp; Rheumatology))</li></ol>  | JF/DV/BC   | Completed  |
| 4. Evaluate hospital induction and whether information sharing on school and rights to   | JF/TP/DV   | ongoing  |
| education are sufficiently prominent.  |  |  |
| Evaluation (updates Feb '18/April '18)   |  |  |
| <ul> <li>Focus on MCU* (Mildred Creak Unit tier 3-4 CAMHS inpatients) review of systems and efference of the systems with governor (JB) and lead consultant at GOSH – completed. Extended Have held three meetings together with leadership team.</li> <li>Increased contact with MCU parent/carers at point of admission-increased support from Introduction of school readiness assessment for MCU students – these take place on the Headteacher attending new strategic safeguarding board at GOSH</li> <li>Benchmarking with other hospital schools regarding complexity of referrals from ward</li> <li>Learning Disability Week – training and support for staff in understanding the social his</li> </ul> | ed meeting to He<br>m ward for Ment<br>the ward before<br>and most efficie | ead of Nursing on MCU – more effective approach.<br>tal Health Functioning in Education Assessment<br>the pupil joins school<br>ent approaches |
| <ul> <li>Makaton training for all staff and some NHS staff – this helps support understanding o</li> <li>New films about school shared with Trust for induction day. Met with new Head of Trainonline module about education should be thought about.</li> <li>Draft presentation written for Trust Board by Headteacher * see attached</li> <li>New non-executive board member Lady Amanda Ellingworth met with Headteacher. He positive link as a 'champion' for the school</li> <li>Contributed to IOE research study on Hospital Education</li> </ul>  | f referring childr<br>ining and Devel                                      | en with disabilities to school<br>opment at GOSH – agreed that perhaps a new   |

| WSP 4: LEADERSHIP  | To further develop the role of our leadership teams, including Governance, to ensure all members are able to lead withaspirational vision and can demonstrate their impact on teaching and learning.September 201712345678910July 201812345678910 |  |  |             |                      |                                |   |                   |  |  |  |  |  |
|--|---|--|--|-------------|----------------------|--------------------------------|---|-------------------|--|--|--|--|--|
| Strategic Intent   | gic Intent Provide personalised, challenging, enjoyable & inn   |  |  |             |                      | ovative learning opportunities |   |                   |  |  |  |  |  |
| Success Criteria   |   |  | Evide  | nce         | 9                    |                                |   |                   |  |  |  |  |  |
| 1. Whole School Priorities (WSPs) are achieved   |   |  | Revie  | w c         | of school in         | nproveme                       | ent plan d  | and SEF           |  |  |  |  |  |
| 2. Staff & stakeholder   | understanding   | of our leadership structure & roles                          | Feedb  | расі        | k from NHS           | S, governo                     | ors, staff  |                   |  |  |  |  |  |
| 3. Outstanding educat  | ion delivered th  | roughout our provision                                       | Evalu  | atio        | on of SIP, S         | EF review                      | ıs, profes  | sional dialogues  |  |  |  |  |  |
| <ol><li>Staff retention and satisfaction high</li></ol>  |   |  |  |             |                      |                                |   | management report |  |  |  |  |  |
| 5. Continuity of outstanding Governance secured  |   | Gover  | rna  | nce audits, | minutes,             | , feedbac                      | k   |                   |  |  |  |  |  |
| Impact Milestones  |   |  | 2017<br>RAG  |             | <b>R</b><br>June '18 | <b>A</b><br>June '18           | <b>G</b><br>June '18  | Comments          |  |  |  |  |  |
|  |   | senior leaders and understand hospital and pupils nationally |  |             |                      |                                |   |                   |  |  |  |  |  |
| • Leaders create a clir<br>innovative ways right   |   | ll staff are motivated and take risks in                     |  |             |                      |                                |   |                   |  |  |  |  |  |
| All Leaders are unco   | ompromising in  | their ambition   |  |             |                      |                                | $\Rightarrow$   |                   |  |  |  |  |  |
| • Pupils are listened to and feel safe. Staff work effectively with all partners (health & education) to respond swiftly where pupils are vulnerable |   |  |  |             |                      |                                |   |                   |  |  |  |  |  |
| Funding & Resources  |   | Cost   | Governo  | or L        | inks                 |                                |   | NHS links         |  |  |  |  |  |
| Leadership training courses<br>CPP<br>Time off site –room bookin<br>HT supervision/coaching<br>Leadership Scale costs (new                           | gs  |  | Personnel Committee<br>Finance Committee<br>Alan Farkas, Lizzie Yauner |             |                      |                                | Trust Board, CEO, Chief Nurse,<br>Strategic Safeguarding board,<br>Head of Training & Development |                   |  |  |  |  |  |

| WSP 4: LEADERSHIP   |                      | Timescales                                 |  |  |  |  |  |
|---|----------------------|--|--|--|--|--|--|
| Actions (against success criteria)  |                      |  |  |  |  |  |  |
| 1. Develop systems for reviewing WSPs in new SLT/ELT meetings   | JF                   | Ongoing                                    |  |  |  |  |  |
| <ol> <li>Identify leadership training through individual appraisal (ELT/SLT)</li> <li>Establish and embed development of Assistant Head roles</li> </ol>                                      | appraisal<br>JF/SLT  | Ongoing<br>Completed                       |  |  |  |  |  |
| 3. Engage in Camden or National Peer Review process –focus on leadership  | JF/JG                | Ongoing - nationally                       |  |  |  |  |  |
| 4. Consider & plan for development of middle leadership roles (existing & new)  | JF/SLT               | ongoing                                    |  |  |  |  |  |
| 5. Establish appointments process/panel for new Chair of GB   | JF/DB                | completed                                  |  |  |  |  |  |
| 5. Review effectiveness of Governor visits and impact on pupil achievement  | JF/DB                | ongoing                                    |  |  |  |  |  |
| Evaluation (updates Feb '18/April '18)  |                      |  |  |  |  |  |  |
| Extended Leadership Team embedded in new roles  |                      |  |  |  |  |  |  |
| • SLT & ELT meetings have focused in identifying impact of roles, GDPR compliance,  |                      |  |  |  |  |  |  |
| Head teacher invited by LGA (Local Government Association) to participate on a SI   | END peer review in \ | Worcestershire and in June 2018 invited by |  |  |  |  |  |
| Worcestershire to review their medical needs provision in particular  |                      |  |  |  |  |  |  |
| <ul> <li>Governing Body change in Chairperson carefully considered and succession plans i</li> <li>Current review of governor committees and skills gaps such as marketing and com</li> </ul> | =                    |  |  |  |  |  |  |
| <ul> <li>Governor (LY) visit to meet with all of ELT 6 months into post</li> </ul>  | 1115                 |  |  |  |  |  |  |
| <ul> <li>On-going identification of training needs for leadership teams such as managing c</li> </ul>   | hallenaina converso  | ations, coachina staff, strateaic plannina |  |  |  |  |  |
| <ul> <li>Assistant Heads each confident in deputising on a termly basis – meeting the need</li> </ul>   |                      |  |  |  |  |  |  |
| • Two staff surveys for curriculum and well being June/July   |                      |  |  |  |  |  |  |
| • Leadership team facilitating extraordinary support for pupils in need eg GCSE invig   | ilation errors at ho | me for child with complex medical needs    |  |  |  |  |  |
| • Curriculum planning – 5 year draft in plan and all UPR staff challenged to lead on j  | focus weeks to enga  | age staff across school/settings           |  |  |  |  |  |