

## **SCHOOL BACKGROUND & INFORMATION**

Thank you for enquiring about working at our Hospital School; we hope the information presented here gives you a flavour of our history and the way in which we work. You will also find plenty more examples of our work on our website <http://www.gosh.camden.sch.uk>

The Children's Hospital School at Great Ormond Street and UCH is a group 4 foundation, special, hospital school, teaching school-aged pupils up to nineteen years plus, as well as children under five with Statements of Special Educational Need. Children of all abilities and all nationalities are taught.

### **Aims**

We aim to provide an **enriching and enjoyable experience** for all our pupils, which ensures **normality** through education, and helps to prevent anxiety about school. Where appropriate, we will provide **continuity** of education within the framework of the National Curriculum. Education and play are an intrinsic part of each child's medical treatment.

In September 2009, the School was able to expand its services to meet the needs of younger pupils and out-patients when we opened a **new Children and Families Activity Centre** adjacent to the schoolroom at GOSH.

### **OFSTED**

The School was inspected most recently in February 2014 when we were judged "Outstanding" in all areas under the leadership of the new Headteacher who joined the school in September 2011.

This is the third consecutive inspection for which the school has received an Outstanding report.

### **Accreditation**

The School's achievements have included:

- Arts Council's Gold Arts Mark
- Camden's OSCA for Outstanding Service to the Community
- The Chance to Shine, Special Recognition Award for Educating through Cricket
- The eLearning Foundation's Home Access Award – Highly Commended
- The International Schools Award
- Fair Trade Award
- National Inclusion Mark
- National Healthy Schools Award

## The Hospital Trusts

Great Ormond Street Hospital is a tertiary referral paediatric-only centre: it only accepts patients referred by other consultants from other hospitals all over the UK and indeed the world. The pupils therefore have a huge range of severe medical and/or psychological conditions and hence special needs, although not always in the normally accepted educational sense.

University College Hospital is a tertiary and secondary referral (more local) adult and children's hospital. There are two floors, where adolescents (T12 floor) and younger children (T11 floor) are treated and taught.

## Premises

The school premises at GOSH are located in the hospital's Southwood Building and comprise several multi purpose offices, a fully equipped kitchen for staff and an open plan schoolroom adaptable for use by pupils of all keys stages and for staff and governors. In addition, we have a small, outside patio area for play and teaching on fine days. There is an offsite storage room.

The Activity Centre comprises: a fully equipped kitchen for staff and other users such as Scouts, Youth Group and Radio Lollipop; a Den with multi-media resources and Xbox installations; a multi-purpose play area; a nappy changing facility; one Centre office and one office shared by other groups.

The two purpose-built schoolrooms at University College Hospital are very well equipped, with one office within each schoolroom area, and are within easy reach of the paediatric wards. GOSH and UCH are linked with a Wide Area Network.

Teaching at GOSH and UH is carried out :

- in the main schoolroom area, or adjacent Centre, Southwood Building, ground floor (GOSH)
- in the purpose built schoolrooms on T11 and T12 (UCH)
- at the bedside, in cubicles (GOSH and UCH)
- in transplant suites (GOSH)
- at The National Hospital for Neurology and Neurosurgery (part of UCLH Trust), by request.

## Governors

As a Foundation School, the Governors are the employers of all our staff. Governors play a crucial role in planning the strategic direction of the School's work and in monitoring its effectiveness.

Currently, we have thirteen governors comprising the Headteacher, one staff governor, two parent governors, three partnership governors, one Local Authority appointed governor and five co-opted governors including another staff governor.

The Governors meet once per term for the full Governing Body meeting plus once a term for the sub-committees – Achievement and Curriculum, Pay and Personnel and Finance and Premises. In addition, they visit regularly according to our Governors' Visits Policy.

### **Staff**

There are 36 staff across both sites with a range of experience and skills. Please find attached a copy of the staffing structure, which we are happy to discuss if you are invited to visit the school for interview.

### **The Extended School Year**

As part of the Extended School Year our Activity Centre is open for 49 weeks of the year. Some staff employed in the Activity Centre are contracted to work 52 weeks per annum to ensure we run activities during the school holidays. There are occasionally opportunities for teachers and support staff to work in the holidays and then take time off in lieu during the school year.

### **Admissions**

The School operates a system of priorities with long-stay and recurring pupils given the most time and the highest priority. We may also teach siblings of long-stay patients who are unable to attend their home schools for at least two weeks.

The Admissions Policy of the Activity Centre includes provision for siblings and day patients. Children in a Reception class are taught by us and may, at the discretion of staff, be left unaccompanied. In addition, the Activity Centre provides play facilities for accompanied under-fives.

The staff and the Governing Body regularly review the Admissions Policy alongside the changing demands within the NHS Trusts.

### **School Roll**

The School has 180 planned places for pupils but the actual roll fluctuates daily. Each teacher is responsible for:

- teaching all school-aged pupils according to our Admissions Policies
- ascertaining the special educational needs of pupils on the wards and in the schoolroom according to our Special Educational Needs Policy



- encouraging mobile pupils to attend schoolroom activities, so that children wherever possible have the advantage of working alongside peers and so that the ward teacher's time can be devoted to those pupils who are immobile and/or in isolation
- ensuring that those unable to join a group easily still have the opportunity to come to the schoolroom, with the extra support of the ward teacher, parent or ward staff, whichever is the most appropriate.

### Pupils' Hours

Children can attend the School for a full day if they are well enough.

A sample **KS1/2 schoolroom** timetable is:

10 a.m. - 11 a.m.	literacy/ numeracy/science
11 a.m. - 12 noon	topic/core subject work
2 p.m. - 2.45 p.m.	personalised learning
2.45 p.m. - 3.30 p.m.	foundation subjects, DT and art

The Activity Centre is open to all children and families from 10 a.m.- 12.30 p.m. and 2 p.m. - 4.30 p.m. (3:30pm on Wednesdays).

For children who are too unwell to attend the schoolroom, or who must stay in isolation for medical reasons, teaching on the wards takes place any time between 9.45 a.m. and 3.30 p.m.

The length of teaching time each individual pupil receives is variable and depends on many factors including

- medical / psychological condition
- length of stay
- pupil's special educational needs, including exam requirements
- type of ward
- teacher availability etc.

Mobile pupils who are able to attend the main schoolrooms are able to take advantage of full-time schooling, although in practice attendance is interrupted and often constrained by medical needs, which must always take priority.

Pupils on the wards are usually taught for up to an hour each day, however if their health permits this may be increased.

### The Curriculum

The School is not legally obliged to follow the National Curriculum but certainly makes every attempt to do so and recognises the importance of keeping abreast of curriculum developments to be consistent with our core aims.



Long-stay and recurring pupils are prioritised and a Personal Education Plan is devised to ensure, if possible, they maintain their education to the highest possible standards.

We recognise the educational and therapeutic value of free and focused play, and do try to make learning fun and enjoyable. Technology is often used as an ideal way of introducing or developing activities, which might otherwise be too daunting for a sick child. Similarly, educational games, maths puzzles, model-making etc can all be good “ice-breakers” and if worked with skilfully can be a means of developing literacy and numeracy etc. We liaise with the Play Departments in both GOSH & UCH; it is their role to provide all types of play for inpatients, leaving the School to concentrate on education. There are, naturally, areas of overlap, particularly for the younger child.

Literacy and numeracy lessons are vital and are timetabled at the start of the morning and afternoon in the main GOSH schoolroom for Key Stage 1/2 pupils. For pupils on the wards this will be a priority too, although we also attach great importance to an enriched, creative curriculum that will engage and motivate our pupils. Many schoolroom sessions are video linked to pupils based on the wards.

Key Stage 3/4 pupils are taught core and foundation subjects by subject specialists and their timetable also allows for a daily, personalised learning session. Young people are encouraged to complete their home schoolwork and maintain links with teachers and peers via their online Managed Learning Environment (MLE) or equivalent.

There is a strong emphasis on digital literacy and technology across the curriculum. Our pupils have access to the very latest technology e.g. iPads, iPods, laptops, interactive whiteboards and plasma screens, video- conferencing, and an excellent range of age-appropriate, motivating online resources and software including the latest appropriate apps.

Personal, Social, Health, Education (PSHE) and Citizenship Education are vital in supporting the psychosocial needs of our pupils and to help them develop resilience and self-confidence. Every attempt is made to take the planned work onto the wards, perhaps by encouraging pupils to write for the School magazine/ website or blog or by taking a schoolroom-based pupil's work onto the ward for bed-bound pupils.

In the Centre we use the EYFS Framework to ensure that children receive a quality experience that not only provides an enriching/exciting play opportunity but also supports development and learning. Children and young people, outside school hours, (or day patients) may access the Den with its Xbox facilities. In addition, parents and carers can book the Sensory Room for children and young people with special educational needs.

## Special Educational Needs and Disabilities (SEND)

The School aims to meet the needs of all children with special educational needs and disabilities. All teaching staff can potentially work with all pupils. We ensure access to our curriculum, plan for all long-stay/recurring pupils and incorporate foundation and extension plans for the diversity and continuum of need. We also have specialists for pupils with, for example, visual/ sensory impairment, moderate/severe/ profound/ social/ emotional needs etc.

The Staff and Governors review the School's Special Educational Needs Policy, Equality and Accessibility Plans annually.

## Tracking Pupil Progress

The School has developed a bespoke Pupil Information System (database), which records essential pupil information, for example, work plans, objectives, outcomes and next steps. The database holds Summative Reports and communication streams with a pupil's family/home school as well as with other professionals and agencies. This information conforms to the requirements of the Data Protection Act.

The database is central to our work as it enables the School to track pupils' progress efficiently and effectively. It has been commended by OFSTED and shared as best practice on the National Strategies website and amongst other Hospital School settings.

## Planning and Assessment

Teaching staff plan for the unknown and short-term plans are in place so as to be prepared for most eventualities. Assessment is undertaken, whenever possible and when appropriate, by liaising with parents and Home Schools but informal teacher assessment and access to online assessment tools is also ongoing.

We have specialist staff able to assess specific educational needs e.g. pupils with Profound and Multiple Learning Difficulties and Specific Learning Difficulties, e.g. dyslexia.

## Staff Training

Staff are encouraged to attend courses regularly to keep at the forefront of both mainstream and special needs' developments. Courses are planned according to the specific needs identified in the School Improvement Plan. Teachers feedback information at staff meetings and complete written evaluations. We evaluate the long-term impact on the School and Centre of training, courses and visits undertaken. We have a programme of regular, mandatory, Safeguarding training.



## Home / School Links

We work hard at developing good, professional relations and communications with parents. We are fortunate in having direct, often daily, contacts with parents who are encouraged by us, and the hospital, to stay with their children, if appropriate. We often work in partnership with parents: at times parents will wait for the teacher to arrive in order that they may have a break, secure in the knowledge that their children are receiving safe, non-invasive educational attention. Sometimes pupils with special educational needs are taught while a parent is present so that the teacher can benefit from the expertise and advice of the person who knows the pupil best. Parents are invaluable in helping us make the rapid assessment of a pupil's needs.

Parents are often the best link with the pupil's home school: recurring pupils are encouraged to bring work into hospital with them; parents can collect schoolwork or ask for work to be emailed to us for access in hospital. We will always ask parents' permission to contact the home school when continuity of work is necessary. Our Communications officer then contacts the home school and information is logged. We attach great importance to obtaining a speedy assessment and current, relevant curriculum plans from home schools. Occasionally it is necessary for relevant staff to visit the 'home school' to ensure continuity or assess the suitability of new placements or to ensure successful reintegration.

We actively disseminate advice and support to mainstream schools through national and international conferences, mentoring, online support groups, email groups and school visits.

## Visitors

The School regularly welcomes professionals from around the world as well as from local and national links made by staff which helps us benchmark our practise. There is also a real emphasis on bringing the outside world inside the hospital and we have excellent links with museums, theatres, businesses and creative organisations who add to our curriculum throughout the year.

**Thank you for your interest in our School and we hope you have found this information helpful.**