



Pupil Premium Strategy Statement 2023-24

This statement details our school's use of pupil premium (and recovery premium for the 2021 to 2022 academic year) funding to help improve the attainment of our disadvantaged pupils.

It outlines our pupil premium strategy, how we intend to spend the funding in this academic year and the effect that spending of pupil premium had within our school in previous years.

School overview

Detail	Data
School name	Southampton Hospital School
Number of pupils in school	60
Proportion (%) of pupil premium eligible pupils	Unknown
Academic year/years that our current pupil premium strategy plan covers (3 year plans are recommended)	2021-2022
Date this statement was published	16 th December 2022
Date on which it will be reviewed	1 st September 2024
Statement authorised by	Nell Giles, Headteacher
Pupil premium lead	Nell Giles, Headteacher
Governor / Trustee lead	Larry Bartel, Chair

Funding overview

Detail	Amount
Pupil premium funding allocation this academic year	£0
Recovery premium funding allocation this academic year	£0
Pupil premium funding carried forward from previous years (enter £0 if not applicable)	£0
Total budget for this academic year If your school is an academy in a trust that pools this funding, state the amount available to your school this academic year	£0

Part A: Pupil premium strategy plan

Statement of intent

Pupils at Southampton Hospital School are admitted on a temporary dual registered basis and are referred to us for educational provision during a time of ill health. This often means they have missed substantial periods of school prior to, and during, their registration with us. Our vision and intent is centered around ensuring access to high quality, enriching education for all pupils, regardless of background or individual challenges. The focus of our pupil premium strategy is to support all disadvantaged pupils to make excellent progress from their individual starting points, for whatever the duration of their stay with us might be.

We work within a truly multi-disciplinary setting, and in conjunction with other health and social care providers, we fully consider the challenges faced by vulnerable pupils, such as those who have a serious mental or physical health condition, and those with care plans, social workers and early help plans.

High-quality 1:1 or small group teaching is central to our approach, with a focus on areas in which disadvantaged pupils require the most support. As our children are often unable to attend our provision full time due to their health needs, our focus is often on the core subjects of English, maths and science, as well as upon RSE, RHE and PSHE, subjects that will help to secure their wellbeing and improve their ability to function independently once they have left us and returned to their usual educational setting. The high quality delivery of a bespoke and personalised curriculum is proven to have the greatest impact on closing the disadvantage attainment gap and at the same time will benefit every pupil in our school. A keen focus on metacognition and self-regulated learning within lessons has also been proved to increase levels of engagement and attainment in all pupils, especially when delivered in a highly personalised way. Implicit in the intended outcomes detailed below, is the intention that all pupils' attainment will be sustained and improved, as all of our students are disadvantaged to some degree by their health circumstances.

Our strategy is also integral to wider plans for education recovery post Covid, as the period of national lockdown and the move to remote learning has disadvantaged the vast majority of our cohort further still, either by compounding existing anxieties around school attendance, resulting in shielding for medical reasons or distancing students further still from their educational settings and peers.

Our approach will be responsive to common challenges and individual needs, rooted in robust diagnostic assessment, carried out rapidly by highly qualified and experienced teachers. To ensure our approach is effective we will:

- ensure disadvantaged pupils are challenged in the work set
- ensure all young people have access to high quality 1:1 or small group teaching
- ensure that children's needs are assessed rapidly and accurately, and used to inform and create bespoke learning packages which develop children's learning rapidly and addresses gaps and misconceptions
- ensure children are supported emotionally and helped to successfully reengage with learning and reintegrate back into their own schools

Challenges

This details the key challenges to achievement that we have identified among our disadvantaged pupils.

Challenge number	Detail of challenge
1	Long term absences from school mean that the gap between disadvantaged pupils and their peers has often become substantial. This is widely reported by pupils, parents, medical professionals and schools on admission and is evidenced through teacher led initial assessments with new pupils.
2	Our assessments and observations indicate that the education and wellbeing of many of our disadvantaged pupils have been impacted by national lockdown and partial school closures to a greater extent than for other pupils. These findings are supported by national studies.
3	Our initial assessments and interviews with children, parents and schools have revealed that engagement with remote learning has been challenging for many of our disadvantaged children due to a number of factors, including lack of parental confidence in supporting children, lack of access to ICT equipment and a difficulty in accessing work due to cognitive impairments created by ill health
4	Our observations, admission data and attendance data shows that our disadvantaged children are finding it more difficult to reintegrate back into school than their non-disadvantaged peers. This has been further compounded by national lockdowns and partial school closures.

Intended outcomes

This explains the outcomes we are aiming for **by the end of our current strategy plan**, and how we will measure whether they have been achieved.

Intended outcome	Success criteria
To reduce the gap in attainment between disadvantaged students and their peers on their return to school	Assessments, observations and data will indicate significantly improved outcomes for disadvantaged students from their individual start points. This will be evident in their engagement within lessons, relationships with teaching staff, work sampling, learning walks, reporting, termly pupil progress meetings and pupil and parental feedback.
To re-establish positive learning behaviours with all students who have high levels of absence from school, or have been electively home educated	Students will be engaged in learning and using metacognition and self-regulated learning to ensure greater independence and motivation. This will be evident in their engagement within lessons, relationships with teaching staff, work sampling, learning walks, reporting, termly pupil progress meetings and pupil and parental feedback.
To achieve and sustain improved wellbeing for all pupils in our school, particularly our disadvantaged pupils.	Sustained levels of wellbeing will be evidenced through levels of engagement and attendance increasing during their stay. It will also be apparent in the success of school reintegration plans and engagement with bespoke PSHE and RHSE targets. Stakeholder feedback will also show levels of wellbeing are sustained throughout their admission and on return to their usual educational setting.

To enable disadvantaged children to reintegrate back into their own schools successfully within a shorter period of time	Disadvantaged students will reintegrate into their usual educational setting as rapidly and successfully as their non-disadvantaged peers.
To enable disadvantaged pupils to access and achieve recognised qualifications	Disadvantaged students at risk of not attaining qualifications will have access to appropriate career pathways and qualifications, including GCSEs, Functional Skills and Entry Level Certificates.

Activity in this academic year

This details how we intend to spend our pupil premium (and recovery premium funding) **this academic year** to address the challenges listed above.

Teaching (for example, CPD, recruitment and retention)

Budgeted cost: £0

Activity	Evidence that supports this approach	Challenge number(s) addressed

Targeted academic support (for example, tutoring, one-to-one support structured interventions)

Budgeted cost: £ 0

Activity	Evidence that supports this approach	Challenge number(s) addressed

Wider strategies (for example, related to attendance, behaviour, wellbeing)

Budgeted cost: £0

Activity	Evidence that supports this approach	Challenge number(s) addressed

Total budgeted cost: £ 0

Part B: Review of outcomes in the previous academic year

Pupil premium strategy outcomes

This details the impact that our pupil premium activity had on pupils in the 2021 to 2022 academic year, when the school was last in receipt of pupil premium funding.

We have analysed the performance of our school's disadvantaged pupils during the 2021/22 academic year, using a programme of focused work sampling, moderation, lesson observations and learning walks, as well as our own internal assessments.

We have no statutory performance data due to our context and status as an Alternative Provision.

To help us gauge the performance of our disadvantaged pupils we compared our results to those for disadvantaged and non-disadvantaged pupils within our cohort. We also looked at these comparisons using pre-pandemic work samples for 2019, in order to assess how the performance of our disadvantaged pupils has changed during this period.

Our analysis during this academic year has substantiated the supposition that the education and wellbeing of many of our disadvantaged pupils has been negatively impacted by national lockdown and partial school closures to a greater extent than for other pupils. Many of our students had to shield for longer periods of time than more advantaged students, plus their pre-existing anxieties around school attendance were compounded by fears around infection control issues. This continues to impact on pupils' wellbeing and educational outcomes, long after lockdown restrictions had lifted. Long term absences from school mean that the gap between disadvantaged pupils and their peers has often become substantial.

The continuing hospital regulations surrounding infection control measures (including close contacts having to suspend their hospital admission and spend isolation periods at home) further added to this issue of missed learning.

This inevitably means that the risk of the attainment gap between our disadvantaged pupils and non-disadvantaged pupils continuing to grow, both within their own school contexts and ours, remains very real and thus has informed many of our interventions and approaches. This is reflective of national figures and demonstrates the additional impact of COVID-19 on disadvantaged pupils.

In terms of notable successes in counteracting this, the TLC intervention was targeted towards inpatients who were sent home for periods of time to isolate after being identified as contacts of Covid. This allowed them to remain engaged with learning, even when not in their own school or in ours. We were also able to use this intervention with GCSE students who were unable to access their own schools due to being in hospital or unable to leave the home due to worsening mental health barriers towards attending school.

Our strong focus on metacognition and self-regulated learning has impacted positively on all pupils as evidenced in external inspection reports, moderation, lesson visits and teacher progress meetings. Academic outcomes in English, Maths and Science for disadvantaged and non-disadvantaged pupils is higher than in previous years due to the success of this approach. Internal stakeholder feedback also reveals a positive trend in terms of pupils' improved attendance, wellbeing and engagement once back in their home schools. Of all of these, wellbeing is the most improved, followed by attendance and engagement. This also indicates the success of staff CPD in trauma informed practice, allowing targeted support to be provided for those most affected by the pandemic, illness and social care issues.

Absence among disadvantaged pupils was 5% higher than their peers. There were 9 occasions of an unauthorised absence for non-disadvantaged pupils, but 34 occasions of unauthorised absence amongst disadvantaged pupils (specifically those in receipt of pupil premium funding in their home

schools). We recognise this gap is too large which is why raising the attendance of our disadvantaged is a focus for the coming year. This attendance figure represents their attendance at SHS, not at their home schools. 96.5 % of home schools reported an increase or maintenance in attendance rates 6 weeks after discharge.

Overall, these results indicate that educational and welfare outcomes for pupils disadvantaged by a number of factors have been positively impacted and, at the very least, cushioned by these interventions and focus areas. We have reviewed our strategy plan and, although no further funding will be received for the 2023-2024 academic year, we will continue to employ and refine our strategies in order to improve outcomes for all pupils, retaining a string focus on those experiencing the greatest degree of disadvantage.

Externally provided programmes

Please include the names of any non-DfE programmes that you purchased in the previous academic year. This will help the Department for Education identify which ones are popular in England

Programme	Provider
N/A	N/A

Service pupil premium funding (optional)

For schools that receive this funding, you may wish to provide the following information:

Measure	Details
How did you spend your service pupil premium allocation last academic year?	N/A
What was the impact of that spending on service pupil premium eligible pupils?	N/A