



Encouraging Engagement: A Graduated Approach: Southampton Hospital School

Vision and Values	Core expectations
At SHS, attendance is engagement with, and belonging to, a community of learning. We make attendance possible when ill health might otherwise make education impossible. Re-engagement can be transformational, restoring routine, identity, confidence and hope. We combine compassionate understanding with high expectations and work closely with pupils, families, health professionals, local authorities and home schools to identify and remove barriers. Attendance, engagement and reintegration are monitored intelligently so effective strategies are recognised, sustained and shared. Success is not simply an attendance percentage. It is a pupil increasingly willing and able to engage, attend and belong, culminating wherever possible in sustainable reintegration or transition.	• Leaders and staff know pupils' attendance histories and barriers, act promptly on changes and use attendance and engagement evidence to inform tailored support. • Expectations are communicated clearly, supportively and consistently to pupils, families and partners, with timely multi-agency action where required. • Reasonable adjustments and interventions are well chosen, reviewed and adapted to changing medical, emotional and SEND needs. • Reintegration and longer-term outcomes are evaluated so the school understands which approaches have sustained impact beyond SHS.

Southampton Hospital School has established a culture where children and young people can successfully re-engage with education, often following significant periods of absence caused by physical illness, mental ill health, anxiety, trauma or complex special educational needs. Our approach is rooted in the belief that, within our context, attendance is not simply a percentage or numerical outcome; attendance is engagement with, and belonging to, a community of learning. For many pupils, the act of attending education, whether on a ward, within outreach provision or back in their home school, represents a significant achievement and an important step towards recovery, resilience and future opportunity. Attendance is viewed not merely as a statistic but as a reflection of belonging, participation and hope. We make attendance possible when ill health might otherwise make education impossible.

We recognise that re-engagement with education can be life-changing and transformational. Many pupils arrive having experienced disrupted educational journeys, significant gaps in learning, reduced confidence, school-based anxiety and a diminished sense of belonging. Through highly personalised, relational and trauma-informed practice, we support children to reconnect with learning, rebuild positive educational identities and regain aspirations for the future. Our work seeks not only to improve attendance but also to strengthen pupils' sense of self-worth, motivation and belief in their ability to succeed.

A unique feature of our provision is the position we occupy between pupils, their home schools and the hospital environment. We work hard to ensure that children retain a strong sense of belonging to their previous educational setting whilst simultaneously developing a meaningful connection to Southampton Hospital School. This dual sense of belonging reduces the risk of disconnection from education and supports more successful transitions both during and following periods of illness. Pupils and families frequently report feeling remembered, valued and included by both educational communities throughout their admission and recovery.

Attendance: Removing Barriers and Securing Reintegration

Leaders, staff, families and partner agencies share a common understanding that attendance and engagement are intrinsically linked and vitally important. Our graduated and highly personalised approach recognises that progress towards sustained attendance is often non-linear. Staff work collaboratively with families, healthcare professionals and home schools to identify barriers to attendance, implementing tailored interventions that build confidence, promote emotional safety and create sustainable engagement with learning. As a result, attendance tracking within our outreach provision demonstrates marked improvements for the majority of pupils, leading to successful reintegration into mainstream or specialist educational settings. The tracking used for these children is also applied to children within the hospital for whom school attendance is a challenge.



All pupils

- We aspire to high standards of attendance from all pupils and parents, and build a culture where all can, and want to, be in school and ready to learn. We monitor and record attendance through the completion of admission and attendance registers and use data to identify patterns of poor attendance at individual and cohort level to ensure that everyone is working together to identify barriers and resolve issues.

Inpatients

- We work closely with pupils, parents, medical professionals within the hospital and relevant external agencies to encourage full time attendance either at bedside or in one of our classrooms. Where part time timetables are necessary to allow for health needs, we will always treat this as temporary and increase the education offer as quickly as we can whilst remaining sensitive to their individual needs. We will work closely with pupils' home schools prior to discharge, to ensure attendance continues. This can include contributing to reintegration plans and the writing of IHCPs.

Outreach

- Our outreach pupils all carry a history of low attendance at their own schools, due to their medical condition. We work closely with the School Attendance Support Team and other external agencies around the child to promote regular attendance both with our teachers and with their own schools through carefully planned reintegration programmes.

SHS Graduated Response to Supporting and Improving Engagement and Attendance:

Universal support: all pupils

- ✓ On admission or referral, adults quickly establish warm relationships with children and parents
- ✓ Teachers and leaders work closely with the medical teams or referring schools to gain information, including health status and attendance histories, to enable timetables and curriculum offers to be quickly and effectively tailored
- ✓ IHCPs are created for all pupils on admission to ensure health is not a barrier to attendance
- ✓ Children are welcomed every session to ensure they feel known and valued
- ✓ The classrooms provide a safe physical and emotional space for learning
- ✓ Where children are unable to access classrooms, the teaching is taken to bedside or to children's homes and safe spaces
- ✓ Strong relationships and open communication are formed with parents
- ✓ Incentives and rewards are given for attending the classroom or engaging with learning
- ✓ The Attendance Lead and Headteacher will scrutinise attendance data regularly to look for patterns, trends, and concerns.
- ✓ Engagement is tracked regularly on the Pupil Profile

Early Intervention Support: Pupils who display initial reluctance to attend**Inpatients:**

- ✓ If children are initially reluctant to access teaching in the hospital, teachers will return regularly with incentives (games, rewards etc) to encourage attendance. Teachers will also work alongside hospital staff (OT, SALT, Play Specialists) to create learning conditions that enable children to feel happy and comfortable
- ✓ Timetables will be created to ensure medical needs and planned procedures are taken fully into account (e.g. poor sleep patterns, pain, medication side effects, regular medical and therapeutic interventions). Medical professionals and parents will always be consulted.
- ✓ Lesson times will be altered and amended as necessary and possible, to allow for the maximum number of teaching hours to be achieved
- ✓ ELSA and TIS Practitioner support (eg Ideal School activity)
- ✓ Teachers will exercise professional curiosity at all times and share all relevant information as necessary to ensure the safety and wellbeing of the child. This will be in accordance with the SHS Safeguarding and Child Protection Policy.
- ✓ Children may be placed on the Engagement Pathway

Outreach:

- ✓ If children at home are initially reluctant to engage with teaching sessions, teachers will continue to arrive at the agreed times, unless a health or social care professional advises that this is not in the child's best interests
- ✓ Teachers will exercise professional curiosity at all times and share all relevant information as necessary to ensure the safety and wellbeing of the child. This will be in accordance with the SHS Safeguarding and Child Protection Policy.
- ✓ Lesson times and durations may be altered and amended as necessary to allow for the maximum number of teaching hours to be achieved
- ✓ A graduated exposure plan will be created in agreement with the pupil, their family, school and any relevant external services
- ✓ A change in teaching environment will be considered to encourage attendance and engagement
- ✓ Temporary offer of remote or blended learning
- ✓ Providing social stories
- ✓ ELSA and TIS Practitioner support (eg Ideal School activity)
- ✓ Children may be placed on the Engagement Pathway

Targeted additional support: pupils who continue not to attend or whose attendance with SHS falls or remains irregular during admission**Inpatients:**

- ✓ Liaising closely with children's schools to share information pertaining to possible barriers to attendance
- ✓ SENDCO led assessment to identify any previously unidentified educational needs that might be negatively affecting attendance and engagement
- ✓ Teachers will invite parents into teaching spaces alongside their child for early teaching sessions
- ✓ Liaison with the medical team around the child to discuss attendance and formulate plans to encourage and support young people and their families



- ✓ Teaching staff and leaders attend MDT meetings and ward rounds to discuss strategies to increase attendance
- ✓ Inviting parents to meet with teaching staff to identify barriers and encourage attendance
- ✓ Inviting trusted adults from pupils' own schools to visit pupils and support them in the learning environment
- ✓ Children may be placed on the Engagement Pathway or Therapeutic Pathway

Outreach:

- ✓ Liaising closely with children's schools to share information pertaining to possible barriers to attendance, previous patterns of attendance, previous school safeguarding concerns etc
- ✓ SENDCO led assessment to identify any previously unidentified educational needs that might be negatively affecting attendance and engagement
- ✓ Concerns shared with Educational Support and/or SEND Services and a plan agreed
- ✓ Children may be placed on the Engagement Pathway or Therapeutic Pathway

Targeted intensive additional support: pupils who do not attend

Outreach:

- ✓ Continue to liaise closely with children's schools to share information pertaining to possible barriers to attendance, previous patterns of attendance, previous school safeguarding concerns etc.
- ✓ SENDCO led assessment to identify any previously unidentified educational needs that might be negatively affecting attendance and engagement
- ✓ Concerns shared with Educational Support and/or SEND Services and a plan agreed
- ✓ Referral to Child Missing Education Services and or/ Children Resource Service
- ✓ Children may be placed on the Engagement Pathway or Therapeutic Pathway