

CCHS SEND Policy



Chelsea Community Hospital School

January 2021

This is a SEND Policy for Chelsea Community Hospital School which has been written in consultation with representatives from CCHS staff and governors.

School Background Information

We are a hospital school providing education for students and young people while they are in hospital. We also provide places for a number of students from our local community who cannot access mainstream school due to their medical conditions and/or mental health needs and resulting special educational needs and disabilities (SEND). CCHS is based across five NHS hospital sites and two private hospital sites. The NHS sites are Chelsea and Westminster Hospital, The Royal Brompton Hospital, St. Mary's Hospital, Lavender Walk Adolescent Unit and Collingham Child and Family Centre. The private sites are Harley Street Hospital and Portland Hospital. Students are taught across all key stages in both primary and secondary. All our sites are in central London, England.

Total No. of Students: Varying due to hospital admissions

Key Contacts

Named member of the SMT	Janette Steel (Head Teacher)
Co-SENDDCo	Sarah Pfützner
Co-SENDDCo	Nicola Frankcom
SENDD Specialist	Helen Williams
Lead Governor	Jackie Hudson
Named Person Responsible for Safeguarding	Amanda Thompson (Assistant Head)

Dissemination

Key information from this policy will be incorporated into the following documents where appropriate:

- School website
- Staff induction materials
- Governor induction materials
- SENDD Information Report
- Local Offer
- Student documentation
- Newsletters
- Staff meetings
- Parent events
- On request from the school office

Policy Implementation Date: January 2021

Policy Review Date: January 2022

Name: _____

Signature: _____

Introduction

Our special educational needs and disability (SEND) policy aims to:

- Set out how CCHS will support and make provision for pupils with SEND
- Explain the roles and responsibilities of everyone involved in providing for students with SEND

By nature of attending the hospital school all students present with SEND while they are accessing education with us. Working with students with SEND is therefore the core of everything we do. In all our interactions with our students we aim to remove barriers to their education through supporting, inspiring, empowering and celebrating them and their learning.

Legislation and Guidance

This policy has been updated in the light of the statutory SEND Code of Practice 0-25 January 2015 and the following legislation:

- Supporting students with medical conditions at school August 2017
- Mental health and behaviour in schools. Departmental advice for school staff March 2015
- Schools SEND Information Report Regulations 2014 The Special Education Needs and Disabilities Regulations 2014
- Statutory Guidance on Supporting students at school with Medical Conditions April 2014
- Children and Families Act 2014 (Part 3)
- The National Curriculum in England Key Stage 1 and 2 framework document September 2013
- Education for children with health needs who cannot attend school May 2013
- Ensuring a good education for children who cannot attend school because of health needs: Statutory guidance for local authorities January 2013
- OfSTED Students Missing Out on Education Report November 2013
- The Green Paper on Special Educational Needs and Disability July 2012
- Removing Barriers to Achievement: The Government's Strategy for SEND 2010
- Equality Act 2010
- Every Child Matters April 2005 & Special Educational Needs and Disability Act 2001
- Education Act 1996 (section 312)

Definition of Special Educational Needs and Disabilities

SEND Code of Practice 2015

A child or young person has SEND if they have a learning difficulty or disability which calls for special educational provision to be made for them.

A child of compulsory school age or a young person has a learning difficulty or disability if he or she:

- has a significantly greater difficulty in learning than the majority of others of the same age, or

CCHS SEND Policy

- has a disability which prevents or hinders him them from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.

The Code of Practice 2015 states that:

This definition includes sensory impairments such as those affecting sight or hearing, and long-term health conditions such as asthma, diabetes, epilepsy, and cancer. Children and young people with such conditions do not necessarily have SEN, but there is a significant overlap between disabled children and young people and those with SEN. Where a disabled child or young person requires special educational provision, they will also be covered by the SEN definition.

Equality Act 2010:

SEND is 'a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal day-to-day activities'.

Special educational provision means:

(1) "Special educational provision", for a child aged two or more or a young person, means educational or training provision that is additional to, or different from, that made generally for others of the same age in—

- (a) mainstream schools in England,
- (b) maintained nursery schools in England,
- (c) mainstream post-16 institutions in England, or
- (d) places in England at which relevant early years education is provided.

(2) "Special educational provision", for a child aged under two, means educational provision of any kind.

(3) "Health care provision" means the provision of health care services as part of the comprehensive health service in England continued under section 1(1) of the National Health Service Act 2006.

(4) "Social care provision" means the provision made by a local authority in the exercise of its social services functions.

(5) Health care provision or social care provision which educates or trains a child or young person is to be treated as special educational provision (instead of health care provision or social care provision).

(6) This section applies for the purposes of this Part.

Children and Families Act 2014 (c. 6)

INFORMATION ABOUT THE SCHOOL'S SPECIAL EDUCATION PROVISION:

Objectives

a) To enable all children of school age to have access to a broad and balanced curriculum including the National Curriculum.

- b) To ensure all members of staff have training in a wide variety of special educational needs through a well-planned in-service programme.
- c) To ensure that special needs equipment and resources are included in financial planning through the development plan.
- d) To liaise with other schools and relevant professionals to enable us to write appropriate individual education plans and effectively support staff.
- e) To work closely with parents, carers and children to enable us to understand the needs of their child.
- f) For students who are registered on School Support, or have an Education, Health and Care Plan (EHCP), we will ensure that school staff will contribute to the implementation and review of Individual Plans and annual reviews of EHCPs where appropriate.

Roles and Responsibilities

All teachers at the hospital school are teachers of children with special educational needs.

The headteacher, Janette Steel, will work with the SENDCos and SEND governor to determine the strategic development of the SEND policy and provision in the school. She has overall responsibility for the provision and progress of learners with SEND.

The SENDCos, Sarah Pfützner and Nicola Frankcom, will work with the headteacher and SEND governor on the strategic development for the SEND policy and provision. They will have day-to-day responsibility for the operation of the SEND policy; advising on a graduated approach to SEND support and providing professional guidance to staff, parents and other agencies to ensure that students with SEND receive appropriate support and high-quality teaching.

The SEND governor helps awareness of SEND issues at the governing board meetings, monitors the quality and effectiveness of SEND provision in the school and work with the headteacher and SENDCos to determine the strategic development of the SEND policy and provision in the school.

The site co-ordinator is responsible for working with the SENDCos to ensure that the SEND policy is followed on their site.

Class teachers and learning support staff are responsible for the progress and development of every student in their class. They are to work with the SENDCos to review student progress, decide on any changes to the provision and to provide relevant data and reports to support individual student EHCPs.

How Students with Special Educational Needs Are Included Within the School As A Whole.

We believe that students with SEND should have equal access to the curriculum in an inclusive setting unless the student's needs dictate otherwise. Some students (e.g. those experiencing a psychotic breakdown) may find the classroom environment over stimulating and we can then arrange for them to work elsewhere. In other cases, students who are bed-bound due to their medical needs will require teaching by their bedside. However, over the course of treatment our aim is, where possible,

for all students to be fully integrated into the classroom environment and working on tasks which are differentiated for their need and ability.

As much as possible a student with SEND is taught in groups and the teacher differentiates planning to include the specific needs of the student with SEND. At times the student may work 1:1 on specific ILP targets.

Teachers collaborate with medical and multi-disciplinary teams on how best to make the classrooms assessable for each student. This ensures that the school can adapt to student's medical and sensory needs on an individual basis. Social and emotion support is provided by our learning mentors who work closely with our community students to develop their confidence and resilience so that they can be included in school.

Admissions Arrangements:

Chelsea & Westminster, Royal Brompton and St. Mary's Hospitals: Many admissions are unplanned and teaching staff meet with ward managers or nursing staff each morning to gain as much information as possible about each student's special needs. There is a multidisciplinary team who work closely together to plan admissions for long stay admissions. The key teacher will liaise with the student's school on a regular basis. Priority is given to students who have long-term and recurrent admissions, or those an EHCP - where there are regular meetings with the student's home school and consistent education plans in place that ensure continuity of educational provision.

Collingham Child & Family Unit: Teachers are involved in planning pre-admissions and education for every student. There is an initial consultation meeting with the referrer, the student and the family, and the multi-disciplinary team in the community. We ask that these meetings always involve a representative from education in the community – teacher, educational psychologist, SEND Officer, etc. Goals are set before admission with the family, referrer and home school. Teachers gather information from schools, educational psychologists and the Local Education Authority's (LEA) prior to admission.

During an admission, key teachers provide an educational perspective of the student and are closely involved in the planning for a student's onward placement whether this is to the original school or a new setting. This involves liaising with mainstream schools, special schools/units, social care and local authorities (see Reintegration Policy for further information).

Community Students: Statutory guidance for local authorities January 2013 refers to ensuring a good education for children who cannot attend school because of health needs. All children and young people resident in the Royal Borough of Kensington and Chelsea and the London Borough of Westminster who have a medical or mental health problem that prevents them from attending school will be taught at home. At present home tuition consists of two sessions, two hours in length, per week. Students who require home tuition require a referral from their paediatric or psychiatric consultant. As of September 2017, in line with the CCHS Safeguarding Policy, CCHS will notify a pupil's home school and the local authority of the commencement and termination of home tuition.

Students who are medically and emotionally able to attend a specialist provision (but not their home school) and who have been referred by their medical or psychiatric consultant may be offered a Community Student placement to be taught in the classroom in Chelsea & Westminster. These

students will have had long term difficulties in attending local, mainstream schools as a result of their medical or mental health needs. Community student placements are interim and subject to continuous review. Where possible community students should remain dual enrolled with their local, mainstream school. It is important that duty of care for the student is shared between CCHS and the home school throughout their placement in CCHS. As of September 2017, in line with the CCHS Safeguarding Policy, CCHS will notify a pupil's home school and the local authority of the commencement and termination of the dual enrolled status. The key teacher is responsible for contacting the student's previous school, assessing and implementing an educational plan and supporting a student's onward placement.

Lavender Walk: Admissions are usually made on an emergency basis and agreed by the lead psychiatric consultant and members of the MDT. Once admitted a key teacher is assigned to that student. During an admission, teachers provide an educational perspective and are closely involved in the planning for a student's onward placement whether this is to the original school or a new setting. This involves liaising with mainstream schools, special schools/units, social care and local authorities.

Portland and Harley Street Hospitals: Many admissions are planned but occasionally some are some unplanned admissions in Portland and Harley Street Hospitals. In Portland Hospital, teaching staff meet with the multidisciplinary team (MDT) in a weekly rehab meeting to discuss and plan for new admissions. The MDT meet fortnightly to goal set and review for individual pupils and plan for discharge. In Harley Street Hospital, admissions are discussed at fortnightly Oncology psychosocial meetings. There is a daily handover from play team and nursing around children's needs.

SEND Specialism and Any Special Units:

Brompton Hospital is a tertiary referral hospital which deals with acute and chronic conditions of the heart and lungs. Many of the children at the Brompton will be in mainstream schools receiving additional support because of medical conditions. Whilst in hospital these student's special needs are exacerbated. Many of these children and young people will have life limiting conditions and this will have an impact on every aspect of their development. The Royal Brompton Hospital is the only centre in the UK that provides care for patients with Cystic Fibrosis from birth through to the end of life, so many of the students will transfer to adult care on the Foulis Ward at 16 years approximately, with continued support from CCHS.

Chelsea & Westminster admits many children who have severe and multiple learning difficulties, as well as physical difficulties. Some students have spina bifida, cerebral palsy, developmental delays, Crohn's disease and gastro-intestinal difficulties. There are also CAMHS related cases referred from the Accident & Emergency Department. There is a burns unit which takes cases from a wide catchment area. Chelsea & Westminster also works with Facing the World, a charity that treats children with facial tumours from all over the world.

Collingham Child & Family Unit admits children between the ages of 7-13 years with a wide range of psychiatric and emotional and behavioural difficulties (e.g. post-traumatic stress disorder, anorexia, depression, psychosis, ASD, ADHD, etc.).

Harley Street Hospital has an 18-bed ward for children with oncology, cardiology, neurosurgical, spinal and thoracic conditions who need medical and surgical treatment. There is a dedicated

chemotherapy day unit. There is also a purpose-built unit with a dedicated suite of rooms for children with haemato-oncological conditions including bone marrow and stem cell transplantation.

Lavender Walk admits adolescents between the ages of 13-18 years with a wide range of psychiatric and emotional and behavioural difficulties (e.g. post-traumatic stress disorder, anorexia, depression, anxiety, psychosis, ASD, ADHD, etc.).

Portland Hospital is a private hospital with three paediatric wards. Many of the admissions relate to long term rehab related to a brain injury. A high proportion of the students have profound and multiple learning difficulties (PMLD).

St. Mary's has two inpatient paediatric wards, Grand Union Ward and Great Western Ward, and a Paediatric Intensive Care Unit. Grand Union has four bone marrow units and an infectious diseases cubicle where children are in isolation for long periods. Many of the children have neurological problems and a high percentage of children have PMLD.

Identification and Assessment Arrangements; Review Procedures:

Many students with SEND who attend the school have had their needs identified in their home school. However, needs may be exacerbated by being in hospital, some may not have been fully assessed and others may appear as a result of the student's illness or treatment. In line with the Code of Practice we aim for early identification of students with SEND. To achieve this, we make full use of information from parents/carers, home – schools, LEA's and complete our own assessment of long-term students (see below our graduated approach to SEND). Our philosophy is to involve students and their families in their assessment and ILPs.

Chelsea & Westminster, Brompton and St. Mary's Hospitals: It is important to monitor students who are admitted acutely or short-term and whose stay is then extended, so that CCHS can, as soon as possible, liaise with the student's home school in order to find out about any additional health or educational issues. There is a legal requirement that educational continuity is ensured for children whose stay in hospital is greater than 15 days. CCHS aims to do this within 10 working days. Parents are entitled to a multi-disciplinary review every six months.

Identification and assessment arrangements for long term and recurrent students will usually start with a liaison telephone call to the student's home school which helps us to plan in advance for their stay in hospital. A student's ILP or curriculum plan should be in place as soon as possible.

Collingham Child & Family Unit: Assessments are carried out in the first three weeks of an admission. Assessment focuses on the levels achieved in the core curriculum subjects, approaches to learning, behaviour and social skills, communication and perceptual and motor skills. The student's ability is discussed with the student, parents/carers, home school and other members of the multi-disciplinary team. A review of a student's psychological, social and educational needs is held every 6 weeks.

Harley Street Hospital: Teachers assess students within the first two weeks of their admission. EAL accessible assessments are used if the child is from overseas. Teachers write an individual learning plan for pupils who are long term which are reviewed every 6 weeks.

Lavender Walk: Assessments are carried out where possible in the first three weeks of an admission. Assessment is carried out by individual teachers in their individual subject areas. They then feedback their assessments to the key teacher. In addition to collating this information the key teacher assesses the young person's approach to learning, behaviour, social and communication skills. The student's ability is discussed with the student, parents/carers, home school and other members of the multi-disciplinary team. A review of a student's needs is held every 6 weeks.

Portland Hospitals: Assessments are carried out in conjunction with the MDT in the first two weeks of an admission. An initial report is written in conjunction with the rehabilitation team. The team set GAS goals together and meet fortnightly to discuss progress and new goals to be implemented for the following 2 weeks.

All Sites: At all sites ILP's are reviewed every 6 weeks or more frequently if necessary. Specialist teachers are available to move among each of the sites to support teachers in their assessment of students with complex needs.

Arrangements for Providing Access For Students With SEND To A Balanced And Broadly Based Curriculum, Including The National Curriculum.

We aim to provide a broad and balanced curriculum differentiated to reflect student's individual needs and abilities. We provide a range of activities which ensure success for all students in addition to providing activities which are challenging and enable students to take risks and extend their learning. To this end our planning includes clear learning objectives for activities which are often "open-ended" i.e. for which there are several possible outcomes rather than a predetermined "correct answer". We also have teachers and learning assistants who have additional training in special needs in order to support those children who have profound and multiple learning difficulties.

ILP's can be used to structure a student learning provision in any area of the curriculum or to structure their access generally across all curriculum areas.

Arrangements For Partnerships With Parents:

All Sites provide opportunities for parents to discuss their child's learning in a confidential setting.

Chelsea & Westminster, Brompton Hospital, St. Mary's Hospital, Great Portland and Harley Street Hospitals: Parents are welcome to accompany their children to class and remain with them until they and their children feel that this is not necessary. Parents are invited to discuss with staff any concerns that they may have about their child's education. All parents and home schools of long term students receive a detailed report at discharge. We have developed a well-resourced information web site about medical and mental health problems www.wellatschool.org which provides parents with advice on support students with SEND and medical needs in school. Due to the recurring nature of students in the Brompton Hospital, the MDT make referrals to work with parents and students experiencing difficulties accessing education through, out-patient, local community teams, cardiac and respiratory specialist home care teams.

Collingham Child & Family Unit and Lavender Walk Adolescent Unit: Parents are met initially at admission to talk about their concerns for their child's education and their knowledge about their child is shared with the key teacher. All parents can meet their child's key teacher and/or the Assistant Head

on a weekly basis. If there are strong issues about school (e.g. school refusal), the teacher will be involved in all stages of admission. There are weekly parent's group run by the MDT at both Collingham and Lavender Walk. Where appropriate families will also be offered family therapy sessions.

Arrangements for consulting young people

Young people are involved in the decision making in their learning as much as possible. This includes the development and review of their ILPs with their key teachers. Key teachers build trusting and open relationships that given students the confidence to discuss their learning with them.

Community students that are assigned a learning mentor have an opportunity to meet with them as regularly as required to discuss how they are managing in school.

Community students and students at Collingham and Lavender Walk have the opportunity to meet as a group and discuss their concerns and/needs at a weekly discussion groups.

Students for whom an EHCP needs assessment request is being made or who are being assessed for an EHCP by their local authority will be encouraged and supported to participate as fully as possible and to voice their views. Where appropriate, students will be encouraged to attend all or some of their review meetings, including meetings related to statutory assessment, to express their aspirations about their future education.

Arrangements for supporting children and young people looked after by the authority and have SEND

Teachers will support looked after students with SEND by following the statutory guidelines for local authorities (2010). Key teachers will attend PEP (personal education plan) meetings and support their implementation in the classroom. Key teachers will liaise with virtual heads from the student's home local authority to ensure that they are up-to-date on their educational progress.

Arrangements For Co-ordinating Provision for Students with SEND:

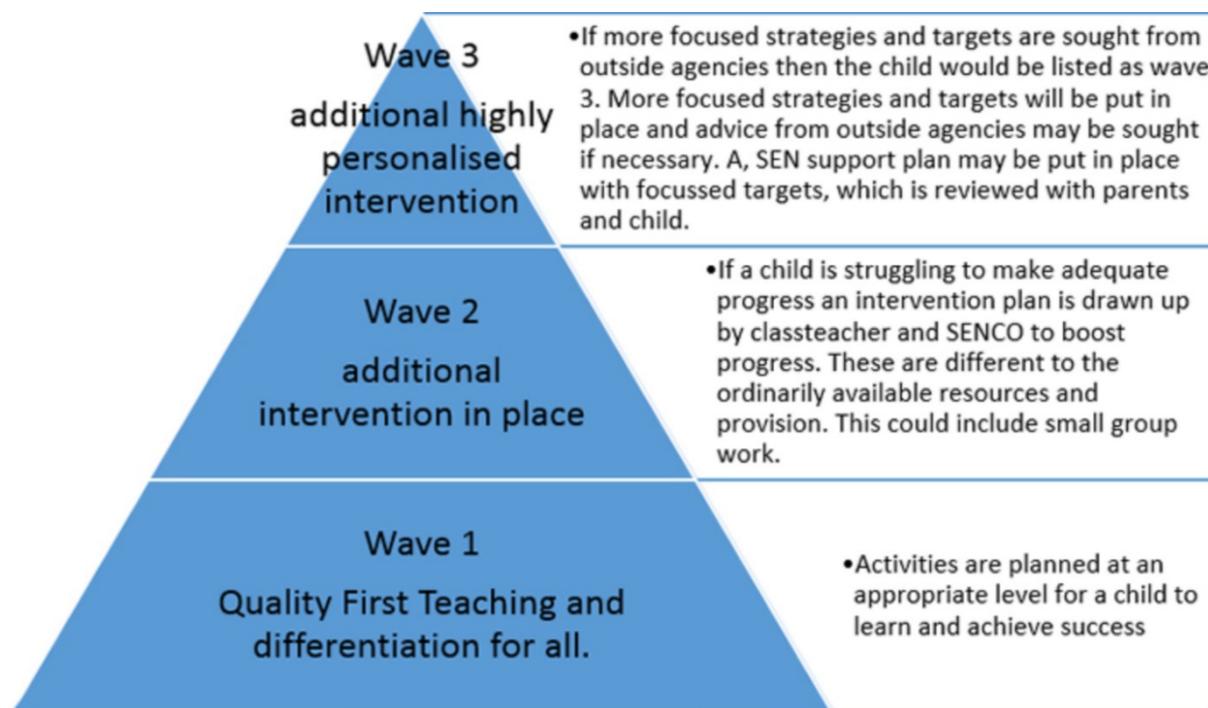
As mentioned above, each student with SEND has a key teacher identified to liaise closely with parents/carers, home school and staff from other disciplines. The key teacher is responsible for collating all relevant information for long term (any admission over 10 working days) and recurrent children. Information is recorded on an individual student's profiles in the CCHS database. The key teacher is responsible for ensuring that other members of staff are aware of the student's special educational needs.

Having acquired copies of ECHPs and Individual Learning Plans (ILPs), the key teacher is responsible for implementing these and writing subsequent ILP's. The Senior Management Team (SMT) is responsible for ensuring the ILP's are carried out.

ILP's are renewed every 6 weeks or more frequently if necessary, and monitored termly at each site by SMT. On-going training in setting objectives is planned in our in-service training programme.

Graduated approach to SEND

As outlined by the SEND Code of Practice, all students receive a graduated response to support a student’s learning – Quality First Teaching, Targeted SEND Support and Specialist Support.



Wave 1 Quality First Teaching – Teaching from the student’s key teacher which includes differentiation and individualised planning to meet the student’s needs.

Wave 2 Targeted SEND Support – Key teachers may need to identify more targeted SEND Support for a student. This takes the form of a four-part graduated approach to understanding and supporting a student’s needs - Assess, Plan, Do, Review. This includes assessing the student’s needs, planning the appropriate intervention, providing the intervention and reviewing the impact of the intervention on the student’s learning (see diagram below). Targeted SEND Support can include 1:1 teaching, small group interventions and mentoring. It is the key teacher’s responsibility to liaise with the student’s home school (for any admission over 10 working days) and to be informed of any targeted SEND support a student is accessing in their home school. Where possible the teacher and the SENDCo will endeavour to ensure that the student can continue to access this intervention during their time at CCHS.



Fig 2. NASEND SEND Support and the Graduated Approach, 2014

Wave 3 Specialist Support – In situations where the student’s needs require more targeted support the SENDCo can seek more specialist advice. This is support can include educational psychology, clinical psychology, speech and language therapy, occupational therapy, sensory advisory teachers and CAMHS support. Due to the nature of the hospital environment and the dual enrolment of many of our students this support is firstly accessed through the student’s home school and/or the health services. In this situation the SENDCo will liaise with the home school SENDCo to ensure that the student accesses these services while admitted to hospital. Where this is not possible or where it is deemed appropriate (i.e. to train staff, to support a student from the community and/or to adapt our school environment) this will be sourced directly by the CCHS SENDCo. Some students will access these services through a Statement of SEND or an Education, Health and Care Plan (EHCP).

Examples of Support Offered at CCHS

	Quality First Teaching	Targeted SEND Support	Specialist Support
Cognition and Learning	Differentiated Planning <ul style="list-style-type: none"> • ILPs • Individualised reports for home schools (after 10 working day admission) • Assessment for Learning • Peer and Self-Assessment • Modelling of Activities • Use of Support Staff • Concrete, practical and visual resources • Specialist Teachers – PMLD, SEMH, ASD experienced teachers, art, music, yoga and PE. • Curriculum enhancement workshops – Jessie’s Fund 	English and Maths intervention – small group and 1:1 teaching. <ul style="list-style-type: none"> • Units of Sound computer phonic programme • 1:1 reading development • Visual resources for routines, rewards and managing workload • ICT Software: Number and Wordshark, Communication in Print, ipads, cause and 	Referrals made to specialist agencies where required (e.g. educational psychology). <ul style="list-style-type: none"> • EHCP specific programmes

CCHS SEND Policy

	<p>music workshops, Wigmore Hall music workshops, Museum of Childhood, Chicken Shed, etc.</p> <ul style="list-style-type: none"> • Arts Award qualifications • Project qualifications • All teachers training in alternative SEND curriculum (e.g. The Engagement Model, Northern Ireland PMLD curriculum, Makaton) 	<p>effect games, switches and switch linked toys</p>	
Communication and Interaction	<p>Communication friendly classrooms (e.g. widgitonline labels and visual timetables)</p> <ul style="list-style-type: none"> • Speaking and listening tasks integrated into lessons 	<p>Individualised visual cues and prompts</p> <ul style="list-style-type: none"> • Social stories • Black Sheep language development resources • PECs use • ACC devices • Switch use • Speech and language therapy programmes as outlined by the students' SALT 	<p>Speech and Language Therapist within the MDT (Collingham and Portland Hospital)</p> <ul style="list-style-type: none"> • Referrals made to hospital and LA speech and language where required • EHCP specific programmes
Social and Emotional Mental Health	<p>All teachers provide a nurturing learning environment</p> <ul style="list-style-type: none"> • Therapy Dog (site dependent) • Discussion groups • Drama and role play • Social skills groups (Collingham site) • Social and Emotional skill resources • Whole school training in SEMH • Whole school behaviour policy 	<p>Learning Mentors (Community Students)</p> <ul style="list-style-type: none"> • Art Therapy (site dependent) • Review meetings and joint planning for needs with CAMHS professionals • School reintegration support • Individualised behaviour plans and reward systems • Social stories 	<p>Referrals made to hospital and LA psychology and safeguarding teams</p> <ul style="list-style-type: none"> • EHCP specific programmes
Sensory and Physical	<p>Horse-riding (Collingham site)</p> <ul style="list-style-type: none"> • Specialist PE and yoga teachers • Wheelchair and bed assessable classrooms • Assistive technology (e.g. laptops, readers, sloping boards, pencil grips, ipad holders, etc.) 	<p>Occupational therapy programmes as outlined by the students' OT service</p> <ul style="list-style-type: none"> • OT resources (e.g. wobble seats, trampets, etc.) • Healthcare planning • Medical care support in the school environment 	<p>Referrals made to hospital and LA physiotherapy and occupational teams where possible</p> <ul style="list-style-type: none"> • EHCP specific programmes

EHCP Arrangements

Education Health and Care Plans (EHCPs) are plans for children and young people aged up to 25 who need more support than is available through special educational needs support. EHCPs identify educational, health and social needs and set out the additional support to meet those needs. Requests can be made by the young person (once over 16), a parent and/or a school or Post-16 provision.

CCHS endeavours to support all students and their families through the EHCP process through providing reports, professional advice forms, attending planning meetings and advising the student and their family within the timescales of the statutory assessment process.

CCHS endeavours to enable parents, children and young people to communicate their views as accurately as possible for example by offering ICT support, support with reading and writing and offering the use of augmented communication aids e.g. signing and/or symbols.

Where a student is dual enrolled it is the legal obligation of the home school to lead on requesting an EHCP needs assessment. Although any professional can make a request for an EHCP needs assessment, CCHS will not lead a request for an EHCP needs assessment on the grounds that this will prevent parents from having the right to appeal to the SEND Tribunal if the request is turned down.

CCHS will support any parent, or young person over the age of 16, who wishes to make their own request for an EHCP needs assessment, facilitating the completion of the request form and supporting the child or young person to express their views as part of the process. CCHS will liaise with other professionals, at the request of parents or the young person, to gather additional information and reports to support the request application.

If a local authority decides to proceed with an EHCP needs assessment, CCHS will communicate regularly with the parents and the young person (or child as appropriate) to enable as much active participation as possible. CCHS will provide professional advice in the format and timescale specified by the Local Education Authority. CCHS will liaise closely with the SEND Keyworker from the Local Education Authority, where requested by the parent or young person, to facilitate the Draft EHCP Planning Meeting. CCHS will communicate with the Educational Psychologist from the Local Education Authority and make provision for assessment, if possible, within a schoolroom at CCHS.

If a local authority decides not to proceed with an EHCP needs assessment or decides not to issue an EHCP, CCHS will support the parents or young person by offering impartial advice relating to mediation with the local authority, seeking support from parent partnership organisations and their rights regarding making an appeal to the First-tier Tribunal (SEND and Disability).

CCHS will be actively involved in the annual review process for all the Community Students with EHCPs, hosting these meetings on school premises as appropriate.

The School's Arrangements For SEND In-Service Training.

CCHS places a great deal of emphasis on in-service training. Priority areas for training are identified through the SEND team's assessment of the SEND provision, performance management procedures and whole staff audits. Two to three main areas of SEND are focused on each year in order for staff to feel more confident at working with a wide range of special needs. Our training programme covers a

wide range of SEND including SEMH, MAKATON, PMLD, communication strategies, supporting EHCP applications and working with children who have learning difficulties.

Staff members with areas of expertise (e.g. Sarah Pfützner – ASD, Nicola Frankcom – EHCP, Amanda Thompson – Emotional and Behavioural Needs, Helen Williams – PMLD and acquired brain injury, Charlotte Thorpe – MAKATON) will present in-service training throughout the academic year. We endeavour to develop all staff expertise in SEND and will support to develop their CPD interests in this area. Areas of SEND training that require an expert from the community will be funded through the SEND budget.

SEND policy and procedures are presented to all new staff in the induction handbook. New staff will have the opportunity to liaise with Sarah Pfützner and/or Nicola Frankcom to discuss our SEND provision. Mentoring teachers in supporting students with SEND will be provided where necessary.

Use Made of Teachers and Facilities From Outside The School Including Support Services.

CCHS works with a multi-disciplinary team on each site. The Brompton Hospital, Chelsea & Westminster Hospital and St. Mary's Hospital have daily handovers from the nurses on the wards as well as regular meetings with the psychologists on site. Teachers in on all sites meet and work alongside the multi-disciplinary team daily. This includes nurses, psychiatrists, family therapists, psychologists, occupational therapists, and speech and language therapists in order to have a holistic view of the student.

Support for Staff: CCHS provides support for staff professional development through a range of internally and externally provided in-service training. A holistic view of staff support is taken, aimed at helping staff manage the levels and types of stress faced when working in a hospital setting.

Regular meetings are held to discuss cases and support staff in supporting students. A reflexologist visits the school once a week to support staff. Some sites provide staff psychological support sessions which include the teaching team.

The Education Authority provides counselling via the Occupational Health Team. This type of support for staff is important in ensuring that they are able to work effectively with often very vulnerable children.

Allocation of Resources to and Amongst Students with SEND:

The allocation of resources is determined by the needs of the student and the information we have about how these have been best met in the past. For long term students this will lead to the identification of objectives and specific targets in the ILP. The resource implications of these are noted on the student's ILP.

Differentiating tasks for those with SEND is part of the planning in each curriculum area. Regular meetings at each site provide an opportunity for staff to discuss their weekly plans and decide on the allocation and sharing of particular resources.

CCHS has facilities for internet on each ward and can use video conferencing for students who are unable to come to the class thereby enabling them to have access to the curriculum. The introduction

of iPads and Microsoft Teams has simplified this access for all students to education, home school and the outside world.

Specialist SEND teachers are available to support across all sites. Specialist teachers in have been appointed in the areas of ASD, behaviour management, PMLD, SEMH, acquired brain injuries and MAKATON. Sarah Pfützner has completed a MSc in Special and Inclusive Education and the mandatory National SENDCo Award training. Nicola Frankcom has also completed the National SENDCo Award training.

Links With Other Mainstream Schools and Special Schools, Including Arrangements When Students Change Or Leave School:

If it is thought to be appropriate and helpful we observe students in their home school prior to admission. Throughout a long-term admission, we have regular links with student's home-schools. This is particularly important at discharge and when students are changing schools. At Collingham we aim to have a plan for integrating each student back into school – either their original home school or a new placement. This is developed with the parents / carers and school (See our Reintegration Policy).

After an admission of 10 or more working days a detailed report is sent to the parents / carers and home school.

We have a careers advisor and learning mentors on the staff to further support young people after they leave hospital.

Links With Health & Social Services, Educational Welfare Services And Any Voluntary Organisations:

Teachers work as part of the multi-disciplinary team at all sites, as well as working as consultants in the community to a wide variety of disciplines. There are regular multidisciplinary meetings to exchange information and plan for students with SEND.

We have strong links with social services on all sites and we contact voluntary organisations around particular issues when required.

Arrangements For Considering Complaints About Special Educational Provision Within The School.

CCHS has been working closely with various trusts to look at enabling parents and children to feel sufficiently safe and confident to make complaints and other views known. The Complaints Policy is reviewed regularly and there are signs/information regarding complaints procedures at all sites. In addition, the Complaints Procedure Policy is available on the school website.

Parents are welcome to visit school sites to discuss issues relating to their child's progress. The SEND policy is available at all school sites and on the school website. Students and parents are invited to give feedback of their time at the hospital school through our website www.cchs.org.uk

Local Offer

CCHS's SEND offer is to provide students with SEND who are patients in one of the hospital sites with access to appropriate, inclusive and stimulating education for their individual needs. CCHS also

supports students who are unwell due to physical and/or mental health needs who cannot access school in RBKC and Westminster community.

The Kensington and Chelsea and Westminster SEND local education authority's local offer is available at:

<https://fisd.westminster.gov.uk/kb5/westminster/fis/service.page?id=HW3loS8sZy0&localofferchannel=0>

Criteria For Evaluating The Success Of The Schools SEND Policy.

At the end of each long-term admission the key teacher and SENDCo meet to discuss the provision made for the student and any implications this may have for changing our identification, assessment and renew procedures.

Parents are asked to review the education provided to their child during their time in hospital. The SEND team evaluate the SEND in-service training at the end of each term through surveys and reflection groups. Issues that arise which have implications for changing the SEND policy are discussed with the Head Teacher and senior management.

Monitoring and review:

The governing body will monitor this policy to ensure that our students are taught according to the best available practise. It will be reviewed on a regular basis.

Monitoring will continue through the academic year by the SMT, site co-ordinators and the performance management process. It will also happen through ILPs and student tracking.

Sarah Pfützner

January 2021