Elysium Children and Education

Bere Clinic School

Admissions, Discipline and Exclusion Policy

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Elysium Children and Education is committed to promoting equality in all its activities.
We aim to provide an environment free from discrimination and unfair treatment.

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Introduction

This document is produced for Bere Clinic School, a school within Elysium Children and Education.

Rationale

Bere Clinic School (BCS) aims to provide a safe place where children and young people can succeed in every way. Its aims to minimise disruption to our eating disorder in- patients' education. At BCS we encourage our children and young people to:

- Invest in themselves
- Invest in others
- Invest in their future

Admissions

Bere Clinic School will admit any young person subject to the agreement from the young person's LA or via private arrangement e.g. with NHS England or parents.

The service will be staffed to deliver an appropriate yet broad and balanced curriculum for the age range of which is registered with the Department for Education (DfE). Young people may be admitted over the year.

An admissions register and a record of attendance will be kept in line with DfE guidelines for all students. Students will only be entered onto the admissions register with the agreement of the hospital's Responsible Clinician who deems the young person to be medically able to access our provision. It is also acknowledged that a young person's mental health may fluctuate throughout their admission to hospital, and this may affect their attendance and provision of education at the on-site school. For example, if a young person is reviewed by the clinical team as physically compromised, they may be put onto bed rest and not able to access school.

Our School's Approach

All our staff are regularly assessed against School Standards and Framework Act 1998. All teachers and non-teaching staff have a contract with Elysium Education and Healthcare and are fully trained to meet safeguarding procedures.

Teaching session

The expectation is that young people attend all day every day unless funding has been refused by their local authority. The school day is approx. 4 hours and 30 minutes.

However, each case will be assessed individually alongside the clinical team. When a young person is put on bed rest by the clinical team, they will not be marked as ill (I) on the register if they have a medical intervention – such as NG tube feed it will be marked as M (Medical). However, once they have had the requisite time after this appointment the expectation is they come back into school and not return to the ward or their room. For various reasons, occasionally a young person is unable to come into school. In this case we will liaise closely with the Clinical team and if the young person is deemed well enough, appropriate tasks will be provided to complete independently on the ward. This is to recognise and facilitate the need for positive distraction to support their mental health and well-being whilst in isolation from their peers. However, we will avoid teaching on the wards so as not to develop any unhelpful patterns of behaviour.

Lessons during teaching sessions will be objective based and shared with individuals. In addition, subject teachers and the key worker may set additional targets which they will record on the ILP (Individual Learning Plan) when baseline assessments or teaching identifies any gaps in their subject or skills. A good example would be learning to read the time on a watch.

High Expectations

Bere Clinic School aims to promote and acknowledge a positive learning ethos and environment through our high expectations. These will be discussed and agreed with stakeholders including students and permeate throughout the service's culture and ethos.

Code of Behaviour/Discipline

- Staff and young people will arrive punctually for sessions and finish on time so that the timetable can run smoothly throughout the day.
- Young people will attend sessions at school as directed by their timetable level with the view to improve their engagement over the course of their admission.
- Young people will attend school and work to the best of their ability, as well as work with their key teachers to design their Individual Learning Plan (ILP), so that progress can be made.
- Staff and young people will work to the best of their abilities both individually and collaboratively so that the service provides a positive and rewarding educational experience.
- Good work and behaviour will be acknowledged and praised.
- Good efforts will be acknowledged and praised.
- Young people will receive the help and support of staff with their work, behaviour and relationships.
- All individuals, adults and young people, will respect one another's opinions and property.
- Equipment and resources will be properly used, cared for and shared equally by the young people.
- Learning areas will be left tidy at the end of each day.
- Staff and young people will wear appropriate clothing and footwear.

In the light of our service ethos, every effort will be made to discuss and resolve difficulties by understanding and working out strategies without imposing sanctions.

However, when necessary, the service will work in partnership with all stakeholders to implement sanctions for unacceptable behaviour.

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Student agreements

During patient induction, all students read and agree to our Acceptable Use Policy, Anti-Bullying Policy, Student Agreement, and Classroom Expectations (See appendix 1). These expectations and any consequences are discussed with the student to ensure they understand what they agree to. Students are also issued with a copy of the signed agreement as a reminder of what they have agreed to.

General expectations and anti-bullying pledge are displayed clearly in the classroom as an extra reminder.

Sanctions

The schoolwork in partnership with Bere Clinic Hospital in implementing sanctions and interventions for unacceptable/inappropriate behaviour. Expectations for behaviour which is conductive to learning is displayed in the classroom and sets out the basic expectations required from all students.

In light of our school care values and the nature of our students attending school, every effort will be made to discuss and resolve difficulties by understanding and working out strategies without imposing sanctions. We will work closely both within the school and hospital team to identify behaviours and intervene in a positive and supportive manner before they escalate.

Examples of sanctions include but are not limited to; they will be expected to make appropriate reparation or acknowledgement for unacceptable behaviour including making an apology, clearing up any mess, or replacing a broken object. In rare circumstances they may need to be separated or have a time out from the class for a period of time. This may be a relatively short period of 15 minutes or may be a longer period of a day.

We are mindful that fluctuating mental health and medical progress will have an impact on a young person. Therefore, disruptive or unacceptable behaviour can be a result of fluctuating mental health and their stage of recovery. Examples of interventions that may be made is when a young person is finding it difficult to (or refusing) to leave the school room for an appointment and this causes inadvertent disruption to the rest of the class, we will liaise with the clinical team and Hospital Director, then with the young person to agree clear boundaries and targets to help them attend both school and medical appointments. This may mean that work is set for them to complete on the ward, while they await their appointment to avoid them being put into a position of refusal, disrupting other young people and still accessing schoolwork. They will then work towards coming back into the room and resuming being collected.

In exceptional circumstances parents will be involved in agreeing a sanction in addition to the decisions taken by the multi-disciplinary team at the Hospital.

There are a variety of mechanisms available with early intervention always our aim. Where students are having difficulty conforming to the expected standards of behaviour various strategies and systems may be employed to help them improve.

This sanction does not constitute Exclusion as defined by the DfE.

- To complete work for a specified time during the daily programme.
- To do work during free time.
- To miss an activity within the programme.

Exclusions

Bere Clinic School will not exclude any young person from its provision except as a last resort. Where possible early intervention and support with the clinical team is the preferred path of resolution for unacceptable behaviour. We do recognise that in some extenuating circumstances, permanent exclusion may be the only course of action left to the service. However, this will be in consultation with the clinical team and or hospital director. An internal review will be conducted following any permanent exclusion to determine any lessons learnt.

A young person may be temporarily excluded from an **environment** if their behaviour is unsafe. The young person would be invited back once they had agreed and demonstrated that they can and will behave safely. The young person would still be offered work on the ward until they rejoin the classroom.

Record Keeping

A written record of sanctions and interventions will be kept in the behaviour log in the centralised system. This will be monitored by the Head Teacher and a termly report created for the Management Committee.

Risk Assessment and Management of Risk

Prior to attending the service, all young people will be risk assessed by stakeholders to ensure that they are able to attend the service safely without being at risk of causing severe disruption and/or of harming themselves or others.

Appropriate levels of staff supervision will be kept in order to address any behavioural management issues as they arise.

We will:

- assess risks related to individuals, situations and environments upon arrival and as they arise throughout their admission within the school and clinic. Individual risk assessments are live documents which are reviewed regularly or updated if an incident occurs and / or the level of risk changes. All teaching staff are required to read risk assessments and be familiar with any changes to individual risks and strategies to manage or support.

- make judgements about the interventions and sanctions required to manage behaviour and ensure the safety of the environment for all those present.

- When assessing risk for activities such as trips or practicals on site, we will lean towards positive risk where we identify the activity as one which is a motivational factor in their recovery, or it is a skills gap which has been identified and needs addressing.

Serious Incidents

An incident during a session could cause serious disruption and distress and may result in injury or damage to property. Serious incidents include for example:

- Physical assault of young person or staff member
- Young person requiring physical intervention
- Behaviour which results in the environment becoming unsafe
- Young person being asked to leave school classroom by teaching staff but refusing to comply with request
- Serious or sustained verbal assault of young person or staff member
- Young person seeking to take, not give back or misuse items
- Damage caused deliberately to property or equipment
- Inappropriate use of IT/access to internet

Managing Serious Incidents

Bere Clinic School strives to create a calm and safe environment in order to minimise the risk of challenging behaviour and serious incidents. All staff are trained in skills to help them to defuse situations before behaviour becomes challenging and will attempt to de-escalate situations before an incident can arise. However, it is acknowledged that some forms of challenging behaviour, such as those listed above as serious incidents, could arise from time to time and if they do, appropriate and considered action would be taken to resolve the situation. There are clear communication systems in place for staff to follow should behaviour become of concern during a session. This provides consistency in our approach and a transparent framework for all to work within. Please refer to Elysium Children and Education's Promoting Positive Behaviour Policy for more information.

It is acknowledged that, from time to time, physical interventions may be required to help manage serious incidents and challenging behaviour. Unless at risk or immediate and severe harm, no physical interventions are carried out by school members of staff, but rather, by members of the hospital team who are appropriately trained. Our practice will involve the least restrictive forms of physical intervention required to maintain safety and order, including various methods of de-escalation. Physical intervention will not be used as a sanction or punishment for negative behaviour.

It is acknowledged that a serious incident could take place off-site, such as on an educational outing. The same processes and procedures will apply and, if necessary, the help of the emergency services may be sought. Serious Incidents are categorised using the Elysium Healthcare Severity Matrix.

Reporting/Recording Serious Incidents and Physical Interventions

All serious incidents and physical interventions will be properly documented and investigated in order to increase safety and to improve procedures and practice whenever possible. All serious incidents will be analysed to identify antecedents and whether anything could be done differently in similar circumstances in the future, including updating/ refining school policies and procedures.

Mobile phones

Are not allowed in the school room. Students should not have access to phones in the school day if the purpose is to message people, be on games or social media sites. However, we do acknowledge that students bring them with them out of habit, if so, they are told to put them on the side when they come in and not use them. If a student is caught using them during school time without permission, then their phone will be removed and returned at the end of the school day.

There are rare occasions when a mobile phone is permissible which is a change to previous years. This is due to the introduction of 2 – step verification logins, especially with sixth form. In addition, when making college applications these can be completed on the school laptop, but the application has to have their personal email address on. Therefore, they occasionally need to access their personal emails in order to continue their application. This is assessed on an individual basis and must be with permission from a teacher.

In line with the hospital policy no cameras are allowed to be enabled on the phone. If we become aware that a young person is in breach of this then it is reported to the hospital who have a policy regarding mobile phone access whilst on the ward.

Monitoring and Review

This policy will be monitored and reviewed (as appropriate) every two years, and any edits be made in consultation with the Management Committee.

Appendix 1 – Student Agreement

Welcome to Bere Clinic School.

The entire teaching team are committed to working with you, the MDT, your family and your home school to ensure as little disruption to your education as possible while in hospital. We will provide a learning space where you can feel safe, respected and valued, enabling you to learn and develop within boundaries that are healthy for you.

Our school is open during normal term time Monday to Friday 9.00 – 3.00. Attendance in education is a legal requirement for anyone under the age of 18. However, you will be excused from attending particular sessions for the following reasons:

- You have an individual medical or therapeutic appointment
- You have an external medical appointment
- You are requested to attend the MDT feedback
- You are on pre-arranged Section 17 leave
- The doctor has said you are too unwell to attend

As teachers, we agree to:

- Care for your safety, well-being and health during your time in education at the hospital
- Support you to achieve your full potential as a valued member of the group
- Liaise with your home school/college to provide you with appropriate work in line with your current year group and ability
- Work with you to maintain your studies whilst in hospital
- Encourage you to work to the best of your ability and be sympathetic to the effect your illness/medication may have on your learning
- Encourage high standards of behaviour in the classroom at all times by building positive relationships and developing a sense of responsibility
- Keep the classroom environment in good order
- Reasonably provide you with adequate resources and equipment, purchasing specific items from the school budget when necessary
- Liaise with your home school/college and parents (where applicable) to plan school re-integration when you are well enough to attend

Signature _____ (Teacher) Date _____

As a student, I will follow the learner agreement which includes:

- Respecting the authority of the teaching staff
- Arriving at lessons on time and maintaining a high level of attendance (when well enough)
- Working to the best of my ability on my class work and completing any work set
- Not disrupting lessons or distracting others: allowing teachers to teach and learners to learn
- Respecting the classroom environment, including books, computers, equipment and resources

Signature _____ (Student) Date _____

Home School Contact

In order to plan an individual education programme that meets your needs, we will need to contact your school or college to obtain your student information such as your learner number, your last school report or attainment levels and to obtain subject information in order that you can continue your school work here in the hospital school. With this information, we will then have a much better starting point from which to plan your individualised timetable and learning plan.

Your consent is required for us to contact your home school or college to obtain this information at the beginning and at regular intervals during your admission to ensure that you keep up to date with your home school or college studies in preparation for re-integration back to mainstream education. We will also contact your home school with updates on your academic progress and general wellbeing with a view to seeing when you might return to school to make this transition as smooth as possible. On occasion we may be asked by the Local Education Authority for information regarding progress, attainment and achievement as well.

Every four to six weeks all students have a Care Plan Approach (CPA) meeting where all members of the MDT are present and external agencies including the student's home school, are also invited to join. This allows all parties to clearly see the progress and planning in place towards discharge.

Please sign below if you happy for us to do this.

Yours sincerely

Sarah Taylor

Headteacher

_____

I consent to the hospital teachers contacting relevant members of staff at my home school/college and information to be passed to the LEA for education purposes during my in-patient admission to Bere Clinic School.

Name of Student: _____ DoB _____

Name of School/College: _____

Student Signature _____ Date _____

Acceptable Use

Students are able to use the school computers and access the internet in school time if available but only on the following conditions. Access will be temporarily suspended if the following rules are not adhered to and permanently revoked if problems are persistent:

School and home computers may be used:

- For creation and storage of school / college work
- For contact with home school via email, school portal or other remote learning
- For academic or artistic research
- For careers research
- To access online courses **previously agreed to by the head teacher**
- To watch educational videos or films **previously agreed to by the head teacher**
- For any other academic purposes **previously agreed to by the head teacher**

During school time school and home computers may **not** be used:

- To access email for personal correspondence (e.g. with friends and family)
- To attempt to access social media
- To play games other than those with a specific educational purpose
- To complete research or activities for other aspects of hospital life (e.g. finding recipes) unless under considerable time constraints and it is **agreed to by the head teacher**
- To attempt to access illegal or immoral websites
- To post or send any messages or images using obscene, offensive or violent language or attempting to incite hatred
- For anything else deemed inappropriate by the teaching or clinical staff

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Mobile phones and or music devices

Mobile phones and/or Ipods should not be brought into and used in the classroom.

If mobile phones or music devices are brought into school during the school day they will be confiscated and returned at the end of the school day.

Students may not use mobile phones or other devices to take photographs in the classroom; this is to respect patient confidentiality. If you feel you need to take a picture (e.g. to take a photo of some work to send to your home school), please speak to your teacher or the Head teacher in order to arrange scanning or photographing the work via other means.

If you have any questions about any of the above conditions, please discuss with the Headteacher.

I understand the above conditions and agree to adhere to the expectations.

I understand the consequences if I do not follow these expectations.

Signature _____ Date _____

Bullying

Bullying both in person and online will not be tolerated in the school or anywhere in the hospital. We have a zero-tolerance attitude to bullying. Anyone suspected of or witnessed bullying will be educated separately from other students while an investigation takes place. Any instances of bullying will be discussed and managed by the MDT; parents and the registered manager will be informed of any bullying incidents, investigations and outcomes.

In the interest of ruling out suspicion of bullying, we ask that students **do not whisper** in the classroom. If you have something to say that is appropriate to share in the classroom, it should be said loud enough for the teacher and other patients to hear. If you have something to say to a teacher but do not wish to say in front of other patients, please ask for a quiet word or write a note.

If you witness, suspect or are a victim of bullying in school or elsewhere in the hospital you **can report this to either school or hospital staff**. If you would prefer, you can report instances of bullying anonymously using the form found on the information wall in the classroom. If you wish to access these outside of school time, let a member of staff know that you would like to pick something up from the classroom. **This form can be returned to either school or hospital staff.**

Further information can be found in the school's and the hospital's Anti-bullying Policy. If you have any questions or worries, please ask the Headteacher or Deputy.

I understand that bullying will not be tolerated in school or in the hospital.

I understand the consequences of any bullying in school and in the hospital.

I understand how to report bullying.

I understand that I should not whisper in the classroom and the reason for this.

Signature _____ Date _____

Classroom Expectations

Our classroom is a safe space where we encourage patients to concentrate on their academic studies and many find it to be a good escape from hospital life. Discussion of eating disorder, meal plans, care planning requests etc. may be difficult for other patients to hear and it does not contribute to the ethos of school being a place to concentrate on something else. It also shows disrespect of patient confidentiality to ask each other questions, even if someone appears willing to discuss it.

I understand I should not discuss aspects of my or any other patient's treatment during education.

I understand I should concentrate on academic, or therapeutic (distraction) activities as opposed to work for treatment (e.g. looking up recipes etc.) unless time constraints are an issue and I have permission from the Headteacher to spend time on this.

I will discuss queries or frustrations about my care in private with the nursing team, MDT and/or the patient advocate as opposed to in the classroom with other patients.

Signature _____ Date _____

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