**Market Field School COVID 19 Catch Up Premium**

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| 1. **Summary information** | | | | | | |
| **School** | | Market Field School and College | | | **Type of SEN** | MLD and Autism base |
| **Academic Year** | | 2020-21  (one off) | **Total Catch Up budget** | £88,800 | **Date of most recent review** | Oct 20 |
| **Total number of pupils** | | 370 | **Number of pupils eligible for funding** | 370 | **Date for next internal review of this strategy** | July 21 (as a review of how it was spent) |
| 1. **Barriers to future attainment** | | | | | | |
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| **RAG assessment identified concerns (both internal and external)** | | | | | | |
|  | Stability within the home – family breakdown/family coping with the needs of the child | | | | | |
|  | Mental Health | | | | | |
| **C.** | Social Interaction and Emotional Needs | | | | | |
| **D.** | Specific unmet medical needs – weight gain/toileting programmes not working | | | | | |
| **E.** | Bereavement linked to COVID-19 | | | | | |

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| **Intended outcomes** *(specific outcomes and how they will be measured)* | | | | | | | | | |
|  | Parents are able to provide their child with consistency in approach between school and home   * Parents are more confident at meeting the needs of their child | | | | | | | | |
|  | Pupils are able to engage effectively with learning experiences which ensures they are making strong progress. Pupils are supported to understand their own mental health and use strategies and approaches to cope with challenges.  Progress in this area will be measured through:   * Monitoring of pupils progress across different areas within the school day leading to interventions as appropriate * Monitoring of behaviour, attendance and exclusion * Pupil voice * SDQ | | | | | | | | |
|  | Pupils will demonstrate confidence in working in group and whole class situations. They will be able to participate in learning activities and will be able to engage in an ever increasing range of social interactions.  Progress in this area will be measured through:   * Lesson observations * SDQ * Progress against EHCP targets * Pupil voice | | | | | | | | |
|  | Pupils and their families are given all the tools they need to make informed decisions about food. Pupils are supported to make healthy food choices within school. Pupils are motivated to exercise and understand that exercise will support their weight loss or to maintain their weight.  Where pupils have a toileting programme, they will be making progress towards managing their toilet needs. | | | | | | | | |
|  | Pupils and their families are given the time they need to process a bereavement and are able to manage their emotions connected to this. | | | | | | | | |
| 1. **Planned expenditure** | | | | | | | | | |
| **Academic year** | | **2020-21** | | | | | | | |
| The headings enable you to show how you are using Catch up premium to make up for lost teaching time in a way which best suits the needs of your setting. | | | | | | | | | |
| 1. **Catch up for all** | | | | | | | | | |
| **Action** | | **Intended outcome** | | **What is the evidence & rationale for this choice?** | **How will you ensure it is implemented well?** | **Staff lead** | **When will you review implementation?** | | |
| Completion of SDQs for all pupils who are involved in interventions or who are likely to be (except those under EWMHS) | | To provide clear assessment of the needs of pupils  To identify strategies and/or interventions to support pupils at the earliest point  Trigger for referral as appropriate | | Standard assessment tool used by a range of professionals. The historical use of this tool has allowed for precise identification of pupils who need support. | Quality assurance of the use of SDQs  Monitoring the SDQ scores across the academic year to identify changes so appropriate provision can be implemented | SS | Termly | | |
| Targeted use of the AFL coordinator for class teams to improve classroom practice in relation to effective behaviour management | | Class teams are confident when managing challenging behaviour.  Pupils are able to engage in learning effectively and progress of pupils improve.  Reduction in challenging behaviour as there is greater understanding of pupil needs and appropriate strategies. | | Targeted support of evidenced based interventions/strategies (e.g. Essex steps) | Monitoring overtime of the impact on pupils being able to engage with learning  Reduction in challenging behaviour which interrupts learning  staff managing behaviour effectively during learning walks/lesson observations | SL | termly | | |
| Targeted use of Dyslexia Screening to identify children who are not making progress but no reason can be pinpointed for why. Likely to present as more high functioning cognitively. | | To ensure that no child falls through the gap and all children have been given the opportunity to make progress with all barriers to success explored. | | Targeted support of evidence based interventions. | Targeted offer, planning scrutiny to ensure the recommendations by the Dyslexia centre are being met. | RW | termly | | |
| 1. **Targeted support** | | | | | | | | | |
| **Action** | | **Intended outcome** | | **What is the evidence & rationale for this choice?** | **How will you ensure it is implemented well?** | **Staff lead** | **When will you review implementation?** | | |
| Intervention programmes targeted at pupils according to need | | | | | | | | | |
| Drawing and talking group sessions | | Pupils will develop   * a greater understanding of their emotions * increase their self-esteem * develop more effective group work skills * improve self regulation   It also provides an opportunity to monitor pupils for their readiness to engage in 1:1 sessions | | An evidenced based intervention which allows:   * pupils to focus on the activity of drawing before starting on the talking * group discussions around a wider range of emotions and allow pupils to normalise them | Use of SDQs to track progress | SS | At the end of each 10 week programme | | |
| Drawing and talking and Creative therapy 1:1 sessions  (Focused due to a specific ACES) | | As above in a 1:1 setting, however, personalised to the needs of the pupils | | Evidenced based intervention | Use of SDQs to track progress | SS | Termly or when appropriate to he individual | | |
| Resilience groups  Including the development of more staff to implement 6 week school based programmes. These are in addition to the 8 week sessions run jointly with EWMHS | | Pupils will be able to:   * Identify anxieties and understand them * Use strategies to help them deal with different situations effectively | | School based evidence of impact. | Use of personal targets and EWMHS tracking | SS | Every 6 weeks for in house groups. Progress measured against individual targets  Every 8 weeks for joint EWMHS sessions | | |
| Implementation of individual behaviour plans for targeted pupils | | Provision precisely meets the needs of pupils.  Pupils are able to engage effectively with learning opportunities, consequently progress accelerates.  Staff confidently meet the needs of pupils | | There is strong evidence where pupil needs are well met that the incidences of challenging behaviour reduce. This can be seen in the monitoring of behaviour overtime | Termly monitoring of behaviour plans  Informal monitoring of behaviour so plans are reviewed as soon as there are changes for a pupils | SL | Termly monitoring by ATL coordinator | | |
| Use of specific toileting or weight loss programmes | | Specific programmes to support children with weight loss or toileting, targeted where it is needed. | | Evidence collected from teaching staff on the return to school by pupils. | Personalised approach – may be linked to weigh ins or feedback from the continence nurse. | KE | Monitoring programmes for individual pupils. | | |
| 1. **Other approaches (including links to personal, social and emotional wellbeing)** | | | | | | | | | |
| **Action** | | **Intended outcome** | | **What is the evidence & rationale for this choice?** | **How will you ensure it is implemented well?** | **Staff lead** | **When will you review implementation?** | | |
| Parent workshops   * Speech and Language * Social stories * Essex STEPS for parents   (including a specialised version for the autism bases)  \*these may be online for the time being. | | Parents are able to provide their child with consistency in approach between school and home  Parents are more confident at meeting the needs of their child | | Evidence based programmes  Parents who have engaged with these programmes historically have highlighted how this has had a positive impact on home life. | Parental feedback  Through the EHCP process | SS/LB | After each parent course through parental feedback | | |
| **Planned use of expenditure 2020-21** | | | | | | | | | |
| **Area of focus** | | | **Resources** | | | | | **Amount** | **Lead** |
| 1:1 support | | | Targeted use of support staff | | | | | £14 000 | GS |
| Well- being programmes | | | Therapist support | | | | | £32 000 | SS |
| Curriculum programmes | | | RSHE programme building on resilience and mental health | | | | | £2 200 | RW |
| Dyslexia Catch Up | | | Dyslexia screening tests and resources | | | | | £5000 | RW |
| Weight loss/toileting | | | Specific resources linked to weight loss or toileting programmes | | | | | £2000 | KE |
| **Total** | | | | | | | | **£55,500** |  |

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| 1. **Review of expenditure** | | | |
| **Academic Year** | **2020-21** | | |
| 1. **Quality of teaching for all** | | | |
| **Action** | | **Impact** | **Evidence base** |
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| **Action** | | **Impact** | **Evidence base** |
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