

Dewi Jones Curriculum Statement

What is the curriculum aim/vision for this area?

- To remove the barriers to learning that have been forged during periods of significantly poor mental health and/or ongoing mental health difficulties.
- To encourage re-engagement with learning by reinstating confidence, building self-esteem and tackling anxiety.
- To build resilience to challenge and adversity.
- Enable pupils to re-engage with a peer group and educators, to enable them to be a socially aware group member.
- Create an education pathway that will lead to pupils being 'learning ready' on discharge.

What do we expect pupils to get from this?

- To feel confident to share open and honest dialogue around previous learning experiences in a secure pupil teacher relationship.
- To feel valued, with their voice heard, whilst be able to exhibit tolerance when views/ anxieties are challenged.
- To feel courageous, confident and safe to 'have a go' in a secure and supportive learning environment.
- To understand individual differences and be empathetic and tolerant of individual differences and needs of others.
- To achieve the level of independence necessary for sufficient functioning in a small group/ class situation.

How our curriculum is planned:

- Sequenced, holistic assessment of needs, to enable scaffolded, child centred planning.
- Collation of previous attainment levels and level of functioning in home school environment.
- Consultation with medical professionals, network and family regarding current level of mental health functioning.
- Relationship building to begin engagement process and ascertain level of anxiety around education.
- Engagement through staged, individualised planning based around personal interest, high interest enriched curriculum and exposure to sensory stimulating, practical activities.
- Assessment of needs through exposure to age appropriate National Curriculum materials, where possible, differentiating accordingly, and monitoring impact of mental health functioning on learning.
- Equipping with necessary coping strategies to manage this impact through supportive planning and scaffolded learning.

IMPLEMENTATION:

How does learning develop over the duration of the pupil's admission?

At the Dewi Jones we structure our curriculum based on the mental health presentation of the pupil and under guidance from our medical team. We aim to reflect the structure and challenges of the National Curriculum.

We endeavour to:

- Work closely with the medical teams (joining Multi-Disciplinary Team Meetings, Care Programme Approach Reviews, Core Team Planning Meetings, morning briefings, team training and reflection) to support patients psychologically and help provide a curriculum appropriate to the medical condition and phase of treatment.
- Provide child-centred, scaffolded work based on holistic assessment that equips pupils with coping strategies to manage an educational environment.
- Acknowledge the need for an engagement period, where necessary, where the initial focus is on high interest activities through exposure to project work, practical and creative lessons. This may also occur if academic work is not deemed appropriate, when medical presentation deems a child cognitively compromised.
- Complete a baseline test upon arrival where possible and appropriate. We try to provide reading, spelling and Mathematics assessment when deemed appropriate by teaching staff and in accordance with medical advice.
- Use assessment information provided by home school to provide a context for prior learning.
- Work closely with schools to provide work sent from home school, where advisable and appropriate, to enable pupils to keep up to date with their learning.
- Challenging content depending on the needs set by unit/home school, by medical team and mental health presentation of the pupil.
- Monitor our pupils closely over the duration of their admission to ensure they are experiencing the most appropriate curriculum for their phase of treatment and mental health presentation/functioning. (ERS, CPA reports)
- We assess to establish any gaps in learning, which may have occurred due to time missing in school, due to mental health.
- Create an education pathway that will lead to pupils being 'learning ready' on discharge.

What principles have guided our decision making in developing this curriculum? What is distinctive about our curriculum?

- Mental health functioning drives our curriculum. We work to remove the barriers to learning that may have been forged during periods of significantly poor mental health and /or ongoing mental health difficulties.
- Our curriculum is child centred and is specifically structured around the individual. Our assessment is holistic and ongoing to support the young person's needs. This directly informs the content of our curriculum.
- We strive to engage pupils through staged, individualised planning based around personal interest, high interest enriched curriculum and exposure to sensory stimulating, practical activities.

- We work closely with schools to provide work sent from home school where advisable and appropriate, to enable pupils to keep up to date with their learning.
- We work to create an education pathway for the future, providing experiences within our curriculum to develop confidence and experience.
- Our curriculum strives to identify and fill educational gaps, which may have occurred during time missing from school, due to poor mental health.

IMPACT:

What forms do assessments take? What is the purpose of assessment?

- Our assessments are varied, to gain different types of information about the learner.
- To identify any gaps missing from the learner's knowledge, enabling staff to plan meaningful and helpful learning experiences.
- We contribute to holistic, ongoing assessment, shared by the multi-disciplinary team at the unit (CPA, CT, MDT and handovers). We attend meetings to share and gain a wide range of knowledge about the pupil.
- We write CPA reports every 6 weeks to share with the MDT, families, pupils and other agencies involved in the case.
- We use the ERS to monitor and assess pupils. We are able to track mental health functioning and academic progress over a period of time.
- IDL reading/spelling tests, KS3 Maths test. Moderation of writing to help standardize results (KS1 and KS2 moderation, KS3/4 moderation with ACE).
- We write our own classroom targets, which the pupils work towards daily. Where appropriate, we use and contribute to EHCP plans to help target particular skills identified.

How do we know if we have a successful curriculum?

- Pupil voice, staff voice, parental voice.
- Daily feedback sessions in Pozpoints.
- Learning walks and lesson observations.
- Scrutiny of student work.
- Self-evaluation and external moderation via links with other mainstream schools in the authority.
- Successful transitions back to home school from hospital or to a new educational facility.
- Evaluation of engagement in education and the impact on mental health, provided by healthcare team.

CURRICULUM CONTENT

How our curriculum is planned:

- The aim, in the first instance, is to complete work associated with age related expectations (SEND pupils according to EHCP, home school advice, cognitive assessment) in accordance with the sequencing of the curriculum from a pupil's home school.
- We recognise this may need to be a long term aim and the sequencing of provision depends upon the psychological presentation of the learners and has to be sensitive to health care/mental health needs.

- We attend meetings (MDTs & CPAs) and speak to medical professionals, which enables us to plan for individuals with particular medical conditions and mental health needs. Some pupils will experience an alternative curriculum provision, which may include a therapeutic element.
- Core provision in English, Maths and Science is covered through one to one and small group teaching (where possible), and supplemented by cross curricular project work to enable learners to access in a variety of ways suitable for their phase of treatment and psychological needs.
- We teach cross-curricular projects, with engagement at the heart of each learning experience. The curriculum is enhanced and enriched through:
- **Community Based Projects** - Our curriculum is rich in opportunities to access and develop 'cultural capital' knowledge and information provided to us by our strong community links. Some of these include: -Liverpool Museums, Everyman Theatre, Philharmonic Orchestra, Everton in the Community, Sefton food banks, Plaza Community Cinema and Knowsley Safari Park amongst others.
- **Education Visits** – The curriculum is complimented by our weekly educational visits and trips to Liverpool Museums. We are able to choose from a long list of sessions, which may correspond to events on the calendar, such as Remembrance Day. On other occasions, we aim to cover periods of History that may have been missed during long period of absence in school. These may include: Egyptians, Romans and Stone Age. 'Cultural capital' is a strong theme during trips, with comprehensive tours and sessions booked in about the History of Liverpool. A particular favourite is the Old Dock tour, arranged through the Maritime Museum.
- **Community Tasks** - We have developed our own series of community tasks, especially designed for pupils who may have difficulties entering the classroom. These range in distance from the area around the unit, using local community links, up to Liverpool Town Centre. Some of our projects include road safety, food bank, save Rimrose Valley Park and how to use a library. We are always looking to develop opportunities in the local area and are keen to include elements of the National Curriculum where possible.
- **Sports Group** - Physical exercise in the curriculum is a core element both in group and individual planning due to the effect physical exercise has on promoting good physical and mental health. Timetabled lessons are taught twice weekly, taking place on the unit, in the outdoor area and in the local sport's hall. Individual plans also incorporate physical exercise for therapeutic purposes linked to OT recommendations.
- **Cookery** – Cookery promotes knowledge of healthy choices and the impact of diet on good physical and mental health. It allows practical experience and widens accessibility for those struggling to engage in formal learning.
- **Art** – Art is taught as a discrete lesson with a focus on a variety of artistic techniques and processes and exposes the pupils to the work of different artists and artistic movements throughout history. Creativity is promoted throughout the curriculum during therapeutic activities and pupils are encouraged to complete Art work as part of their daily planning.