

Pupil premium strategy statement

This statement details St Giles' use of pupil premium (and recovery premium for the 2021 to 2022 academic year) funding to help improve the attainment of our disadvantaged pupils.

It outlines our pupil premium strategy, how we intend to spend the funding in this academic year and the effect that last year's spending of pupil premium had within our school.

School overview

Detail	Data
School name	St Giles School
Number of pupils in school	108 12 part time Nursery Pupils
Proportion (%) of pupil premium eligible pupils	39.8%
Academic year/years that our current pupil premium strategy plan covers 3 years.	2021 - 2024
Date this statement was published	December 2021
Date on which it will be reviewed	July 2022
Statement authorised by	K.L.Lewis - Headteacher
Pupil premium lead	K.L.Lewis - Headteacher
Governor / Trustee lead	Michael Swadling

Funding overview

Detail	Amount
Pupil premium funding allocation this academic year	£49, 470
Recovery premium funding allocation this academic year	£12, 760
Pupil premium funding carried forward from previous years	£0
Total budget for this academic year	£62, 230

Part A: Pupil premium strategy plan

Statement of intent

Our aim is to use pupil premium funding to help us achieve and sustain positive outcomes for our disadvantaged pupils. Whilst socio-economic disadvantage is not always the primary challenge our pupils face, we do see a variance in outcomes for disadvantaged pupils across the school when compared to their peers.

In 2020-21 disadvantaged pupils:

- Academic attainment – Disadvantaged pupils made 22% less progress than their peers in maths,
- Attendance – Continuing issues for disadvantaged pupils who have complex medical needs that impact on attendance and learning progression.
- Physical and Sensory Wellbeing - issues such as difficulties with housing impact on physical wellbeing and wider aspects of development for some disadvantaged pupils that particularly impact on pupils with PMLD and SLD/ MLD pupils with complex medical and physical needs.

At the heart of our approach is high-quality teaching focussed on areas that disadvantaged pupils require it most, targeted support based on robust diagnostic assessment of need, and helping pupils to access a broad and balanced curriculum.

Although our strategy is focused on the needs of disadvantaged pupils, it will benefit all pupils in our school where funding is spent on whole-school approaches, such as high-quality teaching. Implicit in the intended outcomes detailed below, is the intention that outcomes for non-disadvantaged pupils will be improved alongside progress for their disadvantaged peers.

We will also provide disadvantaged pupils with support to develop independent life and social skills and continue to ensure that high-quality work experience, careers guidance and further and higher education guidance is available to all.

Our strategy is integral to wider school plans for education recovery, notably through engagement with the National Tutoring Programme for pupils that have been worst affected, including non-disadvantaged pupils.

Our strategy will be driven by the needs and strengths of each young person, based on formal and informal assessments, not assumptions or labels. This will help us to ensure that we offer them the relevant skills and experience they require to be prepared for adulthood.

Challenges

This details the key challenges to achievement that we have identified among our disadvantaged pupils.

Challenge number	Detail of challenge
1	Our assessments show that disadvantaged pupils generally make less progress from their starting points in maths.

2	Monitoring of attendance and conversations with pupils and their families, shows that there is a group of disadvantaged pupils with complex medical conditions who are experiencing issues with attendance. In some cases, where pupils are unable to attend school for medical reasons, parents struggle to meet their needs at home.
3	Physical and sensory wellbeing of pupils. Conversations with pupils and their families suggest that some disadvantaged pupils require extra support within school due to issues such as housing that impacted on their routines, communication and ability to access physical and sensory EHCP outcomes at home. Pupils with profound and multiple learning difficulties (PMLD) are particularly affected by this and made less progress than other pupils last year.

Intended outcomes

This explains the outcomes we are aiming for **by the end of our current strategy plan**, and how we will measure whether they have been achieved.

Intended outcome	Success criteria
Improved attainment for disadvantaged pupils in maths, relative to their starting points as identified through baseline assessments.	Through achievement of improved performance, as demonstrated by our end of year assessments at the end of our strategy in 2024/25.
Improved attendance for disadvantaged pupils with complex medical conditions.	Through achievement of improved attendance, as demonstrated by monitoring attendance over time from 2021-22 until the end of our strategy in 2024/25.
Improved achievement of physical and sensory EHCP outcomes for pupils with complex physical and medical needs including PMLD pupils .	Through achievement of physical and sensory EHCP outcomes for pupils with complex physical and medical needs including PMLD pupils, as demonstrated by our end of year assessments at the end of our strategy in 2024/25. Also achievement of EHC plan termly outcomes, observations and discussions with pupils and their families.

Activity in this academic year

This details how we intend to spend our pupil premium (and recovery premium funding) **this academic year** to address the challenges listed above.

Teaching (for example, CPD, recruitment and retention)

Budgeted cost: £ 5000

Activity	Evidence that supports this approach	Challenge number(s) addressed
The TLR post holder for Maths will engage with support from the Local Authority and the Specialist Learning Partnership to develop the quality of maths teaching and resources for MLD and SLD learners through CPD.	The DfE non-statutory guidance has been produced in conjunction with the National Centre for Excellence in the Teaching of Mathematics, drawing on evidence-based approaches: Maths guidance KS 1 and 2.pdf (publishing.service.gov.uk) Teaching mathematics at key stage 3 - GOV.UK (www.gov.uk) There is strong evidence that teachers' pedagogical and content knowledge within specific sub-jects has a significant impact on pupil outcomes:	1

Targeted academic support (for example, tutoring, one-to-one support structured interventions)

Budgeted cost: £ 20,743

Activity	Evidence that supports this approach	Challenge number(s) addressed
Providing school-led tutoring for pupils in mathematics. A significant proportion of the pupils who receive tutoring will be disadvantaged.	Tuition targeted at specific needs and knowledge gaps can be an effective method to support low attaining pupils or those falling behind, both one-to-one: One to one tuition EEF (educationendowmentfoundation.org.uk)	1

Wider strategies (for example, related to attendance, behaviour, wellbeing)

Budgeted cost: £ 36, 486

Activity	Evidence that supports this approach	Challenge number(s) addressed
Support for parental engagement to develop confidence for medically complex pupils attending and transitioning into school, supporting parents and carers if their child does need to be at home for medical reasons.	Parental engagement has a large and positive impact on children’s learning. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/182508/DFE-RR156.pdf	2
Providing targeted support to pupils to support them to achieve their Physical and Sensory EHCP outcomes.	Use of elements of the MOVE programme to support pupils https://www.enhamtrust.org.uk/what-is-move	3

Total budgeted cost: £ £62, 230

Part B: Review of outcomes in the previous academic year

Pupil premium strategy outcomes

This details the impact that our pupil premium activity had on pupils in the 2020 to 2021 academic year.

There have been challenges this year for all pupils due to missed learning and some difficulties tracking progress throughout the year due to the Covid 19 pandemic. Despite this, pupil progress has continued to be tracked across the school through ongoing formative assessment. Timelines have been updated to track progress towards Education and Health Care Plan outcomes and progress data analysed in the Autumn and Summer terms.

Our internal assessments during 2020/21 indicated that disadvantaged pupils made less progress in maths than their peers: however, pupils for whom the school receives pupil premium have made better progress than non-pupil premium learners in reading and writing and less progress in maths. Pupil premium pupils who follow a non-subject specific curriculum made better progress than non-pupil premium pupils. PMLD pupils generally made less progress than SLD and MLD pupils.

Our assessments and observations suggested that for many pupils, being out of school, and challenges around access to support were detrimental to behaviour, wellbeing and mental health to varying degrees. Observations and conversations with families indicate that there have also been issues for some disadvantaged pupils with attendance, accessing support to meet their physical and sensory EHCP outcomes and engagement although these issues were shared by their peers.

We used pupil premium funding to help provide wellbeing support and targeted interventions. Targeted support for pupils. An experienced member of staff provided access support to pupils, staff and therapists across the school to ensure pupils had specialist equipment in place to support their access to the curriculum. This member of staff also offered targeted support to pupils with Augmentative and Alternative Communication.

The Family Support Advisor offered a range of support to vulnerable children and their families and to support transition. The teaching assistant for Emotional Literacy supported mental health and emotional literacy to enable pupils to access learning. This was offered remotely where pupils were unable to access school.

Music Therapy was used to support early communication and mental health both within school and remotely.