

Pupil Premium Strategy Statement

This statement details Cleaswell Hill school's use of pupil premium funding to help improve the attainment of our pupils identified as disadvantaged.

It outlines our pupil premium strategy, how we intend to spend the funding in this academic year and the outcomes for disadvantaged pupils last academic year.

Disadvantage is complex and multi-faceted, affecting pupils and families in diverse ways. It can be difficult to understand what socioeconomic disadvantage looks like and how it affects learning in our context.

The pupil premium label does not always capture the challenges our pupils' face.

We identify academic and non-academic challenges faced by disadvantaged pupils and have a tiered approach to interventions that can have a positive impact on their learning.

School overview

Detail	Data
Number of pupils in school	261
Proportion (%) of pupil premium eligible pupils	51.34% (compared to 25% national average) Free School Meals
Academic year that our current pupil premium strategy plan covers	2025-2026
Date this statement was published	December 2025
Date on which it will be reviewed	December 2026
Statement authorised by	Governing Body
Pupil Premium Leads	Jenny Smith
Data Lead	Jamie Wheadon
Governor Lead	Katie Kelly

Funding overview

Detail	Amount
Pupil premium funding allocation this academic year- Free School Meals	£146,455
Pupil premium funding allocation this academic year- Looked After Children	£5,980

Pupil premium funding allocation this academic year- Post Looked After Children	£10,520
Pupil premium funding allocation this academic year- Looked After Children (Other Local Authority's)	£1,495
Pupil premium funding allocation this academic year- Service Children	£1,050
Total budget for this academic year	£165,500

Part A: Pupil premium strategy plan

Statement of intent

At Cleaswell Hill School, we have high expectations and ambitions for all our pupils, including those eligible for pupil premium funding.

We prioritise building on our children's starting points and secure prior learning when designing and compiling our; curriculum and assessment, school implementation plans (whole school targets 2025-2026), Phase Development Plans, Y4 horizon working towards 5-Year Plan, and pupil premium strategy. All these school improvement documents echo each other and lie at the heart of our provision.

The pupil premium 2025-2026 priorities are part of a longer-term strategy to ensure evidence-based approaches for supporting and maximising progress for the most vulnerable learners in addition to our core provision. As a school, we have responsibility to use this funding to 'narrow the gap' for this specific cohort of learners.

The pupil premium funding will be used in different ways for different cohorts of learners depending on the individual priorities that have been identified. This is to build on the impact from the previous academic year.

Our focus is on a tiered model of activities that;

- support the high quality of specialist teaching
- provide targeted academic support based on robust diagnostic assessment of need
- helping pupils to access a broad and balanced curriculum considering non-academic barriers to success in school, such as attendance, behaviour and social and emotional support

Our external partnerships with the Local Authority, School Improvement Partner, Social Care, Health Services and other schools, confirms our monitoring and impact measures and our on-going commitment to ensuring all learners are progressing with challenging targets.

Evaluations confirm that learners who are eligible for pupil premium are not underachieving in comparison with their peers. This is due to our commitment to personalised learning around the holistic needs of the individual. However, we accept that without pupil premium grant (PPG) funding our disadvantaged cohort could fail to make expected progress.

Our pupil premium strategy aims to demonstrate how we diminish the gap between disadvantaged pupils and their peers, providing disadvantaged pupils with support to develop cultural capital.

Research published by the Education Endowment Foundation (EEF) shows that good teaching is the most important lever schools have to improve outcomes for disadvantaged pupils. Using the pupil premium to consolidate outstanding SEND pedagogy and teaching quality benefits all pupils and has a particularly positive impact on pupil premium pupils.

Due to this and the highly complex needs of our pupils, a high percentage of whom are in receipt of pupil premium funding (49%, compared to 25% nationally), we have taken the decision to direct the highest proportion of the funding towards high quality teaching and learning.

Through our highly personalised, ambitious curriculum, we offer pupils access to high quality teaching and learning, therapeutic input, focused interventions and an enriched curriculum that meets the needs of everyone.

Which gap are we narrowing?

Cleaswell Hill School wants to ensure the gap being narrowed is supporting meeting the aspirational aims identified in the Education Health and Care Plans for each learner. We prioritise pupils not only 'catching up' but 'keeping up'.

Targets are identified in each learner's 'Personal Learning Intention Map' (PLIM) and are working towards narrowing gaps in the areas of;

- Communication and Interaction
- Cognition and Learning
- Social, Emotional and Mental Health
- Sensory and /or Physical Needs

What are we investing in for narrowing this gap?

- Targeted evidence-based academic interventions
- Therapeutic interventions including hydrotherapy, rebound therapy
- Educational visits and community-based learning
- Targeted support for parental engagement where the priorities will lead to a narrowing of gap through specific training and focused support
- Additional resources and specialist therapy sessions to support the development of communication and regulation
- Working with partnership organisations

Diagnosing need

School leaders take account of their in-depth understanding of any challenges that disadvantaged pupils are facing when developing the strategy. These can be identified using a wide range of internal data and information, including:

- Attendance data and levels of persistent absence
- Teacher feedback on pupils' levels of engagement and participation
- Pupil progress data
- Behaviour incidences and exclusions data
- Information on wellbeing, mental health and safeguarding
- Access to specialist technology
- Additional materials to access the curriculum offer

Monitoring progress

- School's monitoring and evaluation processes including subject moderation
- Data analysis including the triangulation process
- Critical scrutiny of pupil progress towards targets including PLIMs
- Lesson observations and learning walks
- SIP monitoring visits
- Governor monitoring visits
- External evaluation including peer evaluation from the LA and other schools

We use a variety of tools to assess secure learning, from commercially bought packages to our own internally developed assessment tools and include intervention to support pupil need as required. We try to strike an effective balance between using standardised assessment tools and teacher administered diagnostic assessments rooted in the classroom.

Staff focus, not only on what we have covered, but on what learning has been retained and can be applied by our pupils in a functional way. This academic year, our assessments have allowed us to identify the core challenges some pupils are facing, in addition to academic learning.

We also know from our internal qualitative data that we have increased need for social and emotional support for our pupils.

Staff follow school assessment and marking policies, using both summative and formative methods. This enables them to systematically check pupils' understanding, identify misconceptions and accurately provide next steps in learning.

The systems used at Cleaswell Hill benefit from the use of live assessments being made against the depth that an individual curriculum expectation is met. The depth of learning is determined by how fluent, generalised, maintained and independent a skill has become.

The inputted information allows for data to be collected on pupil attainment, progress and achievement, meaning variations in cohort performance can be monitored.

The now well-embedded use of Personal Learning Intention Maps (PLIMs) is highly significant in planning for and ensuring pupils' development towards Key Stage targets set out in their EHCP.

Careful consideration and close collaboration with parents/carers and significant others, ensures that aspirational SMART outcomes are set at the beginning of each term in the areas of communication and interaction, cognition and learning, social and emotional mental health, sensory and/or physical, and, from Year 9, preparation for adulthood.

This enables staff to scrutinise the proportion of targets that are met by individual pupils or cohorts.

Various stakeholders monitor the progress of pupils at Cleaswell Hill school termly and do this through; progress meetings, monitoring by and written reports to/from Governors, cross school moderation, comparative judgments and scrutinies, external challenge partners, plus School Improvement Partner visits. This ensures that the quality of provision offered to all learners, including pupil premium pupils, is of a high standard allowing them to make and, in some cases, exceed expected progress against sequential personal targets that prepares them for ongoing success.

Evidence-based practice

School draws upon evidence that specifically supports our pupil cohort. See below section 'Activity in this academic year' for examples.

At Cleaswell Hill, we also recognise that regardless of school context, high quality teaching is the most important lever that schools have to improve outcomes for all pupils.

We use the EEF's Teaching and Learning Toolkit to enable school leaders to explore principles for positive impact and mechanisms to mitigate potential negatives. School reflects on the toolkit to establish approaches that are likely to make a positive difference to pupils in school.

Using teacher research from class-based action research projects supports strategies used in relation to metacognition and pupil thinking. Teachers as researchers is used widely across school to impact on practice and pupil outcomes.

Occupational Therapy, Speech and Language Therapy, and Physiotherapy are included in our provision. Whilst also providing an array of other supportive interventions facilitated by professionals, such as Music Therapy delivered by Nordoff Robbins trained therapists. These specialist therapists work closely with the teaching and learning team to ensure that practice is embedded to support best outcomes for pupils.

Challenges

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

Challenge number	Detail of challenge
1	100% of pupils at Cleaswell Hill have an Education Health and Care Plan. Within a specialist school setting, pupils face challenges; because attainment is low owing to each pupils complex learning disability/difficulty, those who attract pupil premium funding do not stand out as low attaining as they might in a mainstream setting. Pupils have significant learning difficulties and disabilities, often linked to wide-ranging cognition, communication, emotional, physical and sensory needs. Many pupils have undeveloped metacognitive skills which impacts on their ability to access learning. A high level of adult support is required to support access to learning. Pupils have a personalised, responsive curriculum comprised of multiple approaches, strategies and interventions. School is strong at identifying the barriers faced by pupils' in developing cultural capital. Existing provision is already specifically focused on needs and barriers to learning, therefore staff carefully consider what they are to provide additionally to disadvantaged pupils to increase the opportunities for them to achieve and progress. Although pupil premium funding is provided as a different grant from core funding, this financial split does not, nor should it, create an artificial separation from class teaching.
2	Communication difficulties: Communication is one of the most complex challenges in our setting. Pupils may be non-verbal, have limited language, or struggle with social interaction due to conditions like autism or developmental delay. These difficulties affect not only learning but also emotional wellbeing and relationships. Supporting communication requires a highly individualised approach — from using assistive technology and visual supports to embedding consistent strategies across the day. Staff must be skilled in interpreting subtle cues and creating environments where every pupil has a voice, even if that voice looks different from the norm.
3	Emotional Regulation difficulties and the need to be supported to stay safe, manage behaviour, navigate the day successfully and engage in learning.

	Some pupils have SEMH needs around attachment and trauma. Such children can find it difficult to regulate their behaviour in different situations and may lack the confidence and/or skills to fully engage in learning opportunities. Many pupils have sensory needs, which require high levels of therapeutic intervention. Without sufficient levels of high-quality therapy input, pupils face significant challenges in accessing all areas of learning.
4	Significant medical and health issues for some pupils, some of which are life limiting, including difficulties with mobility, motor skills, sight and hearing, in addition to conditions such as epilepsy and co-occurring conditions, ASD, ADHD and OCD. We realise that attendance may be erratic due to changing or challenging health circumstances.
5	Ongoing training needs for the dynamic staff team are essential to ensure they have a comprehensive understanding of the complexities of SEND and are appropriately skilled to undertake their role successfully. In our setting, where pupil needs are diverse and often highly individualised, CPD must be continuous, responsive, and embedded into the school culture. This includes regular training on medical needs as well as specific learning difficulties, neurodiversity, trauma-informed practice, communication strategies such as PECS or Makaton, and the use of assistive technologies. Moreover, CPD should also support staff wellbeing and resilience, recognising the emotional demands of working in a high-needs environment. A strategic, whole-school approach to professional development ensures that all staff are equipped with the knowledge, skills, and confidence to deliver high-quality, inclusive education.

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 outcomes	Success criteria
Improved attainment for disadvantaged pupils 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 2026-2027
Pupils can use a range of communication systems to aid their understanding and develop expressive communication skills	Through achievement of EHCP termly PLIM outcomes
Continue to improve access to learning for all pupils	Integrated therapies (evident in timetable/provision/outcomes) Partnership with parents/carers (parent view/impact on family life) and multi-agencies (minutes) Consult with Virtual School Head (LAC Lead/PEP's)

Continue to build on pupil readiness to learn for next stages of life and learning to ensure that pupils access opportunities beyond narrow academic outcomes	Metacognitive skills and tools taught explicitly (evident in learning walks and lesson observations/focus of teacher research and feedback/teachers confident in how pupils learn/SIP and Governors monitoring visits)
Continue to improve access to quality teaching	School leaders enable staff to deliver and sustain quality first teaching and learning for all pupils (Appraisal targets/process for all class-based staff) Professional Development Programme for teachers/Learning Leads uses approaches grounded in evidence (EEF, AET) Professional Development Programmes aimed at supporting Phase Leaders, HLTA's, ECT's, in addition to whole school professional development Teachers as researchers supports use of evidence-based contextualised classroom practice (Class-based action research projects completed and shared with Governing Body annually for the past 3 years)

Activity in this academic year

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

Teaching

Budgeted cost: £82,750

Activity	Evidence that supports this approach (See link above)	Challenge number(s) addressed
Improve attainment	High Quality Specialist Teaching. Embedding teacher-led research and metacognitive strategies. Collaborative planning and moderation to ensure consistency and challenge. New assessment platform introduced Sep 2025. Targeted Academic Support. Holistic Personalised Learning	1,2,3,4,5

	PLIMs: SMART targets across key EHCP areas. Yearly reviews with parents/carers and professionals. Integration of therapy goals into classroom practice.	
Access to learning-CPD for teachers on understanding how disadvantage impacts on learning	PP Strategy Statement Continuous professional development (CPD) tailored to SEND and therapeutic approaches. Trauma-informed practice and attachment theory. Inclusive teaching strategies for pupils with complex needs. Metacognition and self-regulation strategies. Diagnostic assessment to identify barriers to learning.	
Readiness to learn Enabling learning environments	DfE Engagement Model- statutory EEF Metacognition and Regulation Strategies Guidance Report Specialist Teaching and CPD CPD focused on understanding how disadvantage affects learning and how to adapt teaching accordingly. Teachers trained to embed therapeutic strategies into classroom routines. Use of metacognition and self-regulation strategies to help pupils manage their learning. Adapted Curriculum and Resources Highly personalised curriculum that reflects pupils' needs and interests. Use of specialist technology and adaptive materials to support access. Enrichment activities and community-based learning to build engagement and cultural capital.	1,2,3,4

	Assessment for Learning Live assessments tracking depth of learning (fluency, generalisation, independence). Formative and summative assessments used to identify misconceptions and next steps. Staff focus on retention and functional application of learning. Collaborative Practice Close collaboration between teaching staff and therapists to ensure environments support sensory, emotional, and physical regulation. External monitoring and moderation to ensure high standards and consistency.	
Supporting high quality teaching across all pathways Developing metacognition with impact- a long-lasting whole school culture of thinking (currently Y4 of class-based action research)	1.24 SEND Code of Practice Special educational provision is underpinned by high quality teaching and is compromised by anything less Utilising approaches grounded in evidence from cognitive and behavioural science Autism-aware practices support therapeutic educational approaches and strategies EEF mechanisms that make effective professional development EEF Toolkit -metacognition and self-regulation approaches in teaching ranks as first for learner impact	1,2,3,4,5

Targeted academic support

Budgeted cost: £41,375

Activity	Evidence that supports this approach	Challenge number(s) addressed
1:1, small group tuition for pupils in need of additional support, delivered in addition to,	Academic Mentor no longer DfE funded as part of National Tutoring programme, however school continues to support	1

and lined with, usual lessons.	this approach as part of the academic Interventions Programme. Interventions targeted at specific needs and knowledge gaps EEF One to One tuition/Teaching and Learning Toolkit EEF Small group tuition/ Teaching and Learning Toolkit	
Integrated Therapy Model	Through integrated therapy there is a shared understanding of the child's needs in all areas and a collaborative approach to target setting and the formulation of interventions and strategies to optimise pupil outcomes. Integrated therapy can include the therapist working within the classroom or working with the child in small groups or individual sessions. Integrated therapy facilitates the dissemination of therapeutic strategies within class-based learning. The therapist includes links to the curriculum within therapeutic programmes, which supports the child to generalise learning from one context to another, a concept that is hard for many children with SEND. Therapeutic approaches are integrated within the curriculum and the implementation of sessions, to optimise the child's communication and interaction, access to learning, sensory and emotional regulation, physical development and independence skills	1,2,3,5
SalT Outcomes jointly set between teachers and therapy team	Who has SLCN? Approximately 10% of all children have long-term speech, language and communication needs. Source: Law J, McBean, K, Rush, R. Communication skills in a population of primary school-aged children raised in an area of pronounced social disadvantage. International Journal of Language and Communication Disorders. 2011;46(6):657-64. At age five, 7.58% have a language disorder that isn't linked to another condition, referred to as developmental language disorder. A further 2.34% have a language disorder linked to or co-occurring with another biomedical condition,	1,2,3

	such as autism or hearing impairment (Norbury et al, 2016). In addition to this, conditions such as stammering and cleft lip and/or palate also result in speech, language and communication needs. Source: RCSLT (2018) Placing children and young people at the heart of delivering quality speech and language therapy: Guidance on principles, activities and outcomes In some areas of deprivation, more than 50% of children start school with SLCN. Source: Locke A, Ginsborg, J, Peers, I. Development and disadvantage: implications for the early years and beyond. International Journal of Language & Communication Disorders. 2002;37(1):3-15. 1 in 4 children who struggled with language at the age of 5 did not reach the expected standard in English at the end of primary school, compared with 1 in 25 children (at the age of 5) who had good language skills(13) Source: Hollo A, Wehby, J, Oliver, R. Unidentified language deficits in children with emotional and behavioural disorders: A meta-analysis. Council for Exceptional Children. 2014;80(2). 15% of pupils with identified SLCN achieved the expected standard in reading, writing and mathematics at the end of their primary school years compared with 61% of all pupils Source: Hollo A, Wehby, J, Oliver, R. Unidentified language deficits in children with emotional and behavioural disorders: A meta-analysis. Council for Exceptional Children. 2014;80(2). Only 20.3% of pupils with SLCN gained grade 4/C or above in English and Maths at GCSE, compared with 63.9% of all pupils Source: Department for Education. GCSE results 2017 Learning Disabilities: Around 1.5 million people in England have a learning disability.	
--	---	--

	Source: UK Parliament House of Commons Library (06 Apr 2023) Learning disabilities: policies to reduce inpatient care Up to 90% of people with learning disability have communication difficulties; with half having significant difficulties. Source: Kelly, A (2002) Working with people with a Learning Disability There are no reliable figures on the prevalence of dysphagia in people with learning disabilities. Figures range from 36% based on general speech and language therapy caseloads to 73% based on inpatient populations (Leslie, Crawford and Wilkinson, 2008). What is accepted is that the ALD population has a higher incidence of health problems including dysphagia than the general population (RCSLT CQ3, 2006; Death by Indifference, 2007; Valuing People Now, 2009). Autism: Over 163,041 pupils in the UK have autism. 70% of autistic children and young people are educated in mainstream schools. Autism is the most common type of special educational need (SEN) for children with education, health and care (EHC) plans – with a total of 92,576 pupils (in 2020). Source: The Autism Education Trust website (2023) 70–80% of children and adults with autism experience or have experienced mental health problems in their lifetime. Source: Ambitious About Autism (2017), Know Your Normal Social, Emotional and Mental Health: 81% of children with emotional and behavioural disorders also have unidentified SLCN. Source: Hollo A, Wehby, J, Oliver, R. Unidentified language deficits in children with emotional and behavioural disorders: A meta-analysis. Council for Exceptional Children. 2014;80(2). Children with vocabulary difficulties at age 5 are 3 times more likely to have mental health problems in adulthood	
--	---	--

	and twice as likely to be unemployed when they reach adulthood. Source: Law J, Rush, R, Parsons, S, Schoon, I. Modelling developmental language difficulties from school entry into adulthood: Literacy, mental health and employment outcomes. Journal of Speech, Language and Hearing Research. 2009;52:1401-16. Between 40 and 54% of children with behavioural difficulties have language impairment. Sources: van Daal, J., Verhoeven, L., van Balkom, H. (2007). Behaviour problems in children with language impairment. Journal of Child Psychology and Psychiatry, 48(11), 1139-1147. Maggio, V., Grañana, N.E., Richaudeau, A., Torres, S., Giannotti, A. & Suburo, A. M. (2014). Behavior problems in children with specific language impairment. Journal of Child Neurology, 29(2), 194-202. People with a primary communication impairment are at greater risk of a secondary mental health disorder, commonly anxiety or depression. Source: Botting, N., Durkin, K., Toseeb, U., Pickles, A., & Conti-Ramsden, G. (2016). Emotional health, support, and self-efficacy in young adults with a history of language impairment. British Journal of Developmental Psychology, 34, 538-554. Lifelong impact: 60% of young offenders have low language skills Source: Bryan K, Freer, J, Furlong, C. Language and communication difficulties in juvenile offenders. International Journal of Language and Communication Disorders. 2007;42:505- 20. The long-term negative impacts of language difficulties suggest that their associated costs to individuals, their families, and society across the life course are likely to be high(11) Source: Law J, Charlton, J, Asmussen, K. Language as a child wellbeing indicator. London: The Early Intervention Foundation,; 2017	
--	---	--

	This academic year 98.8% of students at Cleanswell have an identified SLCN.	
Rebound Therapy Pupils maintain physical skills through targeted intervention	Rebound therapy improves both high and low muscle tone as well as cardiovascular fitness. It is appropriate for children who have a lack of awareness of body position, reduced sensation and problems with posture	1,2,3,4
Hydrotherapy Pupils maintain physical skills through targeted intervention	Hydrotherapy has scientific evidence-based positive effect on various systems of the body	1,2,3,4
Improving the literacy/oracy of pupils through; Targeted reading intervention Staff CPD on early literacy approaches Literacy Leads work collaboratively with teachers to advise on specific literacy support Investment in IT support for written output	2025 - Launch of written output session for all core learners daily. Phonics EEF - Effectively teaching a systematic phonics programme. Teaching pupils a comprehensive set of letter sound relationships for reading and sound letter relationships for spelling. 'New Essential Letters and Sounds' Phonics (introduced in 2021) Launch Pad to Literacy DfE approved Reading comprehension strategies EEF Oral language intervention EEF Teaching pupils strategies for developing and monitoring their reading comprehension- DfE approved EEF's Teaching and Learning Toolkit; 'Promising Project' list	1,2

Wider strategies

Budgeted cost: £41,375

Activity	Evidence that supports this approach	Challenge number(s) addressed
----------	--------------------------------------	-------------------------------

Relational practice- Cleanswell Code NAPPI trained staff Consistent Approach Plans (PBS) Multi-agency discussion focussing on the supportive grid for a responsive approach, analysis and action plan (RAAR) Reduced number of behaviour incidents	Trauma informed practice (toolkit) EEF Behaviour and Intervention- moderate impact/low cost Following the principles of Positive Behaviour Support (PBS), training seeks to understand the cause of the distress enabling staff to be proactive in using primary prevention strategies. Accredited by BILD	1,2,3,5
Music Therapist from Nordoff Robbins 1 day a week group and individual sessions	Nordoff Robbins reports that from a survey 92% of pupils who had music therapy said that it improved their mental health. A report (May 2020) from the National Clearinghouse on Autism Evidence and Practice lists Music Therapy as evidence- based practice for children under music- mediated interventions. The findings of the Cochrane Database of Systems Reviews provides evidence that music therapy can help children with ASD to improve their skills in primary outcome areas that constitute the core of the condition, including social interaction, verbal communication, initiating behaviour, and social- emotional reciprocity.	1,2,3
The Graduated Approach to Mental Health and Wellbeing is reviewed to include appropriate support for changing cohorts in addition to a universal offer. This is referred to as 'Getting Support' and includes programs and approaches used to support early intervention for Mental Health. Trained Senior Mental Health Lead in post.	Promoting children and young people's mental health and wellbeing- a whole school approach, Children and young people's mental health coalition, HM Government (2021)	1,2,3

Graduated response to Mental Health and Wellbeing		
Breakfast provided for all pupils daily by Magic Breakfast	World Health Organisation 36% of pupils in the UK have breakfast every morning. Without breakfast, pupils suffer from lack of concentration resulting in poor academic performance and psycho-social functioning (anxiety, depression, hyperactivity) EEF Trial of Magic Breakfast in 106 schools found that providing a universal free breakfast had an impact of 2 additional months progress on children's outcomes at KS 1 & 2. Children are more likely to learn effectively when they have had a healthy breakfast.	1,2,3,4
Holistic Curriculum to include non-academic experiences Lunch and After School Clubs Costs of cultural trips and visits In school activities, including drama, dance and securing greater engagement in music education Pupils increase their cultural capital and can share their experiences and develop lifelong learning and social skills	As well as being valuable for wider development outcomes, arts participation can have a positive impact on education performance when interventions are linked to academic targets EEF Arts participation/Teaching and Learning Toolkit EEF Life Skills and enrichment; 'By character, we mean a set of attitudes, skills and behaviours- such as confidence, social skills, motivation and resilience- that are thought to underpin success in school and beyond. These are also referred to as 'social and emotional skills', 'non-cognitive skills' or 'essential life skills'. Evidence in the EEF Toolkit literature review on non-cognitive skills suggests the overall impact of enrichment activities on academic achievement tends to be positive.	1
Parent Support/Links with families	EEF Working with parents to support children's learning guidance report October 2021: provide practical strategies to support learning at home;	1,6

Increased attendance Provision of training, information, advice and guidance for parents/carers Increased opportunities for parents/carers to engage with their child's learning and wider life of the school community, including; Play-Stay events, Tapestry, contribution to target setting and use of facilities (hydrotherapy pool) out of school hours Education Early Help Assessment Worker allocated to school Positive impact of School link made with North of Tyne Combined Authority Poverty Prevention Programme School Ping to communicate with parents	tailor school communications to encourage positive dialogue about learning; offer more sustained and intensive support where needed Survey conducted by Newcastle University students on parental engagement analysed by school with shared outcomes on parental preference Increase in support offered and available for families Enhanced system of communication with parents/carers.	
Published equality information and updated equality objectives	Public Sector Equality Duty Data from 2021 Health Related Behaviours Questionnaire- increased vulnerability in children who identify as LGB. 62% of LGB pupils (Y11) had deliberately hurt themselves compared with 36% in total population. 20% of pupils (Y9) who identify as LGB stated they never feel good about themselves compared to 11% overall. (to be revisited every 4 years, due 2026) Children and Young People's Strategic Partnership focus in 2023	

	Youth Cabinet and Youth Parliament focus in 2023	
--	--	--

Part B: Review of the previous academic year

Outcomes for disadvantaged pupils

Quality Teaching

We have analysed the educational performance of our school's disadvantaged pupils during the previous academic year, drawing on summative and formative assessment data.

We have also analysed our disadvantaged pupils' wider developmental outcomes, drawing on our own assessments and observations.

The PLIM data for 24-25 shows that Pupil Premium children met 77% of their EHCP targets. Based on this information, the performance of our disadvantaged pupils met expectations, and we are, at present, on track to achieve outcomes we set out to achieve by 2026-2027, as stated in Intended Outcomes section above.

Although there was a slight decrease in the percentage of PLIM targets in comparison to previous years, there was an increased focus and analysis on the quality and impact of approaches delivered throughout the academic year.

Our evaluation of the approaches delivered last academic year indicates that:

- There has been a noted increase in integrated therapies throughout school, supported by our in-house therapy team
- Positive Behaviour Support Cloud (PBS) effectively tracks and monitors behavioural incidents – promoting green scale activities to support learning, engagement and regulation
- Pupils demonstrate improved intelligent learning behaviours through the Cleaswell Code – ready, respectful, safe
- Metacognitive skills and tools are taught explicitly with an increased focus whole school through CPD targets to enhance pedagogy by ensuring that teachers stay current with the latest teaching methods, technologies, and research findings
- The Engagement model is embedded in school to support educational outcomes for learners working below that of the national curriculum who are not engaged in subject specific study
- Professional Development Programme uses approaches grounded in evidence (EEF, AET) to ensure consistency and quality of teaching across the curriculum
- Our new assessment system allows data input, analysis and reflection to identify tightly focused improvement priorities. All staff can quickly identify and respond to potential

gaps in learning and use their time effectively to plan, resource and teach outstanding lessons.

We have reviewed our strategy plan and made changes to how we intend to use some of our budget this academic year. The further information section below provides more details.

Further information (optional)

Increase in pupil numbers from 194 (2021) to 208 (2022) to 230 (2023) 253 (2024) 261 (2025)

Increase in percentage of pupil premium pupils from 46% (2021) to 49% (2022) 51.73% (2023) to 52% (2024). Slight decrease in 2025 to 51.34%

Increase in free school meals in school from 40% (2021) to 46% (2022) 49.13% (2023) 51% (2024) 51.34% (2025)

Increase in national average free school meals from 20.6% (2021) to 22.5% (2022) 23.8% (2023) 25% (2024 and 2025)

Pupil premium attendance figures 77.76% (2021) 89.75% (2022) 89.24% (2023) 88.75% (2024) 86.80 (2025)

Non-pupil premium attendance figures 83% (2021) 91.64% (2022) 91.93% (2023) 92.21% (2024) 90.94 (2025)

This strategy was written with support from;

- The EEF Guide to the Pupil Premium, September 2025
- EEF 'Menu of Approaches' evidence brief September 2025
- EEF Tiered Approach to Pupil Premium Spending September 2025
- EEF Discussion prompts for Governors to support an effective strategy September 2025
- Research Schools Network, 'Using evidence to improve pupil premium outcomes' Benchmarking and Reflection Tool
- Unity research School, 'addressing educational disadvantage from strategy to the classroom, October 2022
- Evaluating your pupil premium strategy, Durrington research School, June 2022
- Schools Alliance for Excellence, 'Addressing educational disadvantage...from mitigation to success', June 2022
- Supporting Disadvantaged Pupils in Northumberland
- Northern Health Science Alliance (NHSA) N8 Research Partnership, 'Child of the North'
- The Cost of having fun at school
- NEU guide, 'Turning the Page on Poverty'