

## Poplar Adolescent Unit Education Provision

# Transition Policy

Accepted by the Management Committee:

September 2020

**Review Date** 

September 2024

### Transition/Re-Integration Policy

#### Introduction

This policy draws on: 'Keeping children safe in education', (DfE September 2020); 'Supporting pupils at school with medical problems' (DfE, September 2014) and 'Mental health and behaviour in schools' (DfE, March 2015), and also Essex County Council's (ECC) policies and procedures on Equality and Diversity. The Unit's Equal Opportunities Policy states a commitment to ensure that learners or staff are not discriminated against on the grounds of sex, race, disability or marital status.

#### **Transition**

Transition in this case refers to the process of becoming an inpatient on Poplar Ward, the separation from family and friends, the issues created by mental health problems and the resulting feelings of apprehension. We aim to minimise unease by providing reading materials at induction that have been designed with the young person in mind. These will serve to inform the person of practical concerns and expectations in a simple but attractive format. During the 5 day initial assessment process, the young person is able to visit the education centre if they wish. They will meet with the Executive Head as a matter of routine, filling out student-friendly questionnaires, forms and discussing their strengths, issues and personal interests. At this point they are assigned a "key teacher" who will oversee their educational and pastoral needs while in hospital, maintaining outside links and providing a first contact with queries. We aim to pair the person with a member of staff that has experience within a similar background, or who seems compatible in personality type.

We recognise that the reintegration for students and their returning school can be an anxious time. Schools are now required to approach mental health as any other medical issue and there needs to be a care plan in place for the students return. They also need to have a policy in place regarding their approach to providing for mental health needs and their entitlement to education. See 'Mental health and behaviour in schools' (DfE, 2015).

- Home schools and colleges require a comprehensive handover to ensure they are aware of the issues that surround the student, (see Appendix A 'Reintegration Support Plan / Checklist').
- DFE guidelines allow for no school work during the first 15 days of a hospital
  admission if they are unfit to do so. We aim to contact the school as soon as
  possible after admission and to share with them the assessment of when it is
  appropriate to begin to re-engage with learning. Schools are encouraged to send
  work usually through their named liaison person, though its completion much
  depends on the mental health of the individual.
- Schools and colleges appreciate detailed feedback on what work the student needs and has completed.
- Different institutions vary greatly in their experience and confidence of providing support during reintegration.

- Schools and colleges require 'joined-up' approaches to organising part-time timetables during reintegration.
- Schools and colleges frequently request more access to support and guidance especially post-discharge.

#### **Reintegration:**

From the first contact by a member of the Poplar Education team, re-integration back to the home school is in the forefront of our mind.

When a youngster comes into class at Poplar it is important to check whether the contact in school is someone they feel knows them. When the youngster has not been in school, the key teacher makes the judgement as to the likelihood of the contact being supportive of the pupil. The aim is to plan a carefully managed return to school with minimised stress or disruption.

Contact with the 'home' school by telephone, email and by attendance at CPA reviews is maintained throughout the young person's admission. Assessments and background information including grades and histories are gathered by the Poplar Education team which helps inform the wider multi-disciplinary team in the hospital. CPA meetings review progress and may lead to a recommendation of a return to school and/or community. It is essential that school or college staff attend the CPA meeting to be fully appraised of the current health of the young person, actions and recommendations. It is also their opportunity to seek advice or explanation on whether additional support arrangements may be necessary if reintegration is proposed.

#### At the meeting:

- All relevant disciplines review their work and progress with the young person including a current mental state assessment.
- The young person, with their family or carers report on their progress.
- Care plans, devised with the young person and key nursing staff, are reviewed. These
  contain the strategies and management techniques used to support the young
  person.
- Education staff report on progress using a 'One Plan' format that includes a review of the Individual Education Plan (IEP).
- Throughout the young person's admission staff from the school or college are
  encouraged to visit the hospital either during the day in Education time or during normal
  visiting hours. This helps ensure that the home school remains in mind for the young
  person and the young person believes the school continues to hold him or her in mind
  also. Schools and colleges might, when appropriate provide tutors or other support.
- Medical clearance to attend school from a ward doctor is always obtained and on request, may be in writing.
- Local authority and Trust procedures for providing transport are followed and funding is increasingly difficult to obtain, especially for post-16 young people. Parents and carers

are informed of this at the start of admission and warned that their facilitation of transport to and from school may be the only option available.

- The first visit to the home school normally takes the form of a meeting with the contact member of staff at the school, the young person, a member of the Poplar Education team and parents or carers. At the first meeting the young person's timetable is used to identify subjects and times which may be suitable for the next step. It is also vital that the school should be supported in working with the young person, and that any extra needs can be identified and sought as soon as possible.
- Other professionals such as a Social Worker, an Education Welfare Officer and a Connexions Adviser may also be involved.
- The aim is to achieve gradual increasing attendance during re-integration. For some young people a full time return to school occurs after the first visit. In the majority of cases this will occur in a scaled way. Where very specific timetabling issues occur, an agreed written outline is useful.
- Support within the school needs to be clear to both the staff in school and the young person. It may, for example, be necessary to identify a quiet place to go to if managing in class becomes too difficult.
- <a href="http://www.rcpsych.ac.uk/expertadvice/youthinfo/mhgpfactsheetsindex.aspx">http://www.rcpsych.ac.uk/expertadvice/youthinfo/mhgpfactsheetsindex.aspx</a> is a good source of general advice for school staff and parents/carers. Specific advice and strategies are given during CPA meetings to help with management of young people.
- Where school placements have broken down or there is no school place advice is sought from the local authorities' admission/hard to place/education access departments.
- When pupils' Special Educational Needs are not being or will not be able to be met from the current school provision then advice is sought from the Educational Psychology Services.
- During the admission support from the hospital is always available by phone (01702 538114). Medical staff can advise on how best to manage risk.
- Post discharge, the Care Co-ordinator within the local Tier 3 Community teams, ensures
  appropriate support is available. Support arrangements from the Emotional wellbeing
  and mental health service (EWMHS) are still being developed but currently include a
  telephone help-line (0300 300 1600) to access advice and community service support.

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#### Appendix A Reintegration Support Plan / Checklist

#### On admission

- Information letters/booklet to parents/carers and home school/college
- Identifying contact person(s) with whom to liaise for free flow of school work and information.

#### Five day CPA – to 1st Full-time CPA

- 'One Page Profile' completed with young person as part of the One Planning process. Includes:
  - o Barriers to learning
  - Strategies used to overcome barriers
  - Strengths
  - Aspirations
- Structured conversation completed with parents/carers and home school/college.
- CRM notes sent to parents/carers and school/college where required.

#### **CPA** - Treatment

- CPA meeting attended by school staff. Includes:
  - o Reasons for admission.
  - Current mental state assessment.
  - Multi-disciplinary Team, young person, family or carers report on progress.
  - Care plans, devised with the young person and key nursing staff, are reviewed.
     These contain the strategies and management techniques used to support the young person.
  - Education staff report on progress using a 'One Plan' format that includes a review of the Individual Education Plan (IEP).
  - Readiness for return to community and/or discharge.
- CPA report sent to schools.
- CRM / CPA recommends re-integration. This is discussed with school.
- Discuss with young person how much do they want peers and staff to know about their experience; how much pressure can they withstand in class situations e.g. answering questions; what do they want to do at break time.
- Planning meeting / first visit.
- Reintegration timetable established.
- Means of transportation determined.
- Good communication between school and Poplar regarding success of reintegration.
- School is aware of intended discharge date.
- School has received advice on general strategies.
- School has attended CPAs and is aware of specific strategies and Care Plans relating directly to the young person.
- Young person is reintegrated.
- 6 week evaluation/progress tracking undertaken with school.