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**Ancora House School**

**Assessment, Recording & Reporting Policy**

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| **In Consultation With** | | |
| **Date Agreed** | **Name** | **Position** |
|  | Sian Thomas | Head |
|  | Marie Strain | Deputy Head |
|  |  |  |
|  |  | Teaching Staff |
| **Date for Review** |  |  |
|  |  |  |

**Context**

Ancora House School is a short term provision which aspires to provide a nurturing learning environment, which allows each learner to re-engage in their education journey, make progress from their starting points and successfully transition back to an appropriate school/college/alternative provision in their local community. Improving social and emotional well-being including developing positive, healthy forms of communication are as important as improving academic progress**.**

**Introduction**

Learners who attend Ancora House Short Stay School have generally had a disrupted experience of education, some for considerable periods of time; therefore reports of prior attainment may or may not be reliable in giving a comprehensive overview of their current performance. As a result, our focus is on developing a clear and accurate baseline assessment of learners’ knowledge, understanding and skills across the core curriculum, identifying the impact on learning of poor mental health and making use of this to inform teaching & learning to best meet individual needs.

As a school it is important that we recognise that there are a wide variety of factors that may have had a negative impact on our learner’s ability to fully access and make progress within the academic curriculum. For this reason, an equal importance is put on the assessment and monitoring of learner progress across a range of measures to inform the provision of suitable interventions to address individual needs which may be the barriers to academic success.

Learners arrive with us at various points in the academic year, with wide ranging needs and stay with us for differing lengths of time, we don’t apply a standardised approach to expectations of progress and attainment. Instead, we use assessment and professional judgement to identify need; to inform and monitor high quality, personalised teaching & learning and to celebrate success. Our person centred approach together with our sound understanding of the clinical needs of learners, creates an aspirational learning culture in which learners are able to gain the skills needed towards realising their individual potential.

**Addressing Barriers to Learning**

The one common factor linking all learners at Ancora House School is that they have previously experienced difficulties in successfully accessing education at another setting. The reasons for this can be varied and complex, as part of the induction process therefore, staff complete a number of assessments which extend beyond the curriculum in order to develop a deep understanding of the barriers to learning that each individual is experiencing. This in-depth understanding of learners allows for the provision of targeted intervention work which may be to address specific issues or to identify whether a learner needs to be placed on a specialist pathway e.g. application for EHCP. All of this information together with subsequent strategies and recommendations are included in the discharge summary sent to the home school/college during transition.

**Assessment**

Prior data, assessments and information from home school/college is sought initially to begin the process of building a picture of the learners recent functioning and importantly, their potential; in most instances this has been negatively impacted by poor health and/or absence from school. For this reason, we request each learner’s ‘last working at grade’ as well as their target grade, crucially demonstrating their functioning before becoming unwell. Teachers use this information together with that included in the Information Passport to begin the assessment process.

As part of the induction process, learners may undertake a selection of assessments both formal and informal which may include:

*Academic*

* Reading – to include reading age, comprehension, speed and fluency
* Single word reading
* Single word spelling
* DASH
* Visual Stress Test – where potential need identified
* Dyslexia screener

*Pastoral Measures*

* Strengths and Difficulties Questionnaire
* PASS Assessment
* ‘All about me’ personal learning profile

All learners are assessed on our RICH scale which measures the impact of mental health functioning in Education. Communication with adults, Relationships with peers and concentration are all areas identified by Health’s inspectorate the Quality Network for Inpatient Child and Adolescent Mental Health Services (QNIC), as being indicators for the learner’s mental health; these together with engagement and attendance levels are tracked throughout the learner’s time in Ancora House School. Targets are set regularly for each learner to support progress.

Results of all induction assessments are recorded on SIMS and are available to all staff to guide appropriate teaching and supportive strategies. The results of these assessments inform specific interventions to address need and monitored through the provision mapping. Where specific areas of need have been identified these are reassessed over time, in line with retest recommendations for the specific assessment tool.

For learners attending the in-patient setting at Ancora House, the Education team work closely with the clinical team to understand the presentation of each learner. The Psychology and Occupational Therapy teams use several clinical assessments including:

* WISC V
* Connors Questionnaire
* ADOS
* MOHOST

The Education Team provides a wealth of information to these assessment processes eg completing the Observation Profile for the ADOS assessment. We are then able to use the results and recommendations to develop interventions and strategies which are again communicated to the home school//college.

**Quality First Teaching**

Assessment across the curriculum remains the overall responsibility of the class teacher. In depth, ongoing assessment should be informative to the teacher, learner and parents/carers and allow for identification of achievement and ‘next steps’ which promote rapid and sustained progress. Teachers work individually with learners supporting them to identify gaps in knowledge, as well as areas of strength. Each learner’s success is celebrated and supportive interventions implemented when required; feedback to the learner is vital and is done in a supportive and constructive manner. Each learner’s progress is discussed in weekly team meetings where general academic and RICH targets are set. Progress is analysed and evaluated on a regular basis within departmental meetings which will feed into whole school and individual analysis of performance and identification of trends.

Using our internal data, targets for every learner are identified and form the foundations of their Personal Curriculum Plans (PCPs). Weekly case review meetings provide the forum for every learner’s plan to be reviewed; scrutiny of academic data; social and emotional progress, cognitive function; relationships with peers and adults and communication. In addition to the data we collate we consider parent/carer information; staff observations and clinical notes; in this way every learner’s curriculum addresses all aspects of their individual need.

***Formative Assessment***

Formative assessment should occur both formally and informally. On a lesson by lesson basis teaching will be targeted and differentiated according to need, with verbal feedback and marking of written work supporting learning.

Formative assessment is recorded formally on a half termly basis on SIMS. Learners should be assessed against the National Curriculum or relevant framework on a continuum stating whether they are at an Emerging, Developing, Secure or Mastered level for each outcome. This will then present a dynamic, personalised picture of where strengths and gaps lie in knowledge and/or skills within any given subject, providing a detailed insight into any disparity between levels of knowledge and skills and what are the priority areas for teaching & learning. For those learners at the House with complex mental health difficulties we use this system during the first half term:

**--** (indicates the learner is cognitively impaired due to severity of mental health)

**-** (indicates there are gaps in knowledge, skills and understanding)

**=** (indicates the learner is working at their last working at grade)

**+** (indicates the learner is working above their working at grade)

At the end of the each half term teachers assess using GCSE grades.

For Post 16 learners RICH, engagement and attendance are recorded and monitored in the same way.

Those learners who have not achieved grade 4 in GCSE English or Maths work with the teaching team to identify gaps in their knowledge and build on skills. Those following functional skills in maths, English and IT use the BKSB system.

The Post 16 transition worker obtains information from college or 6th form to assess need and encourage them to send through work through their Virtual Learning Platforms. Assignments are returned to the college for marking with pertinent observations around any difficulties faced by the learner and strategies used to overcome then. There is a sharp focus on ensuring a successful transition to the learners chosen destination.

***Summative Assessment***

For learners who are attending the Hub for the duration of Year 11, assessment data collection points are planned to take place 6 times per year, at the end of each half term. At each assessment point learners will be scored based on the relevant grading system E.g. GCSE, Functional Skills. These grades can be subdivided as a, b or c to indicate a level of security within this grade i.e. ‘a’ would suggest that there is an opportunity to move up into the next grade boundary, c that there is a danger of falling down into the grade below.

**External exams**

All learners who are at Ancora House School during examination time will be supported to prepare and sit their exams.

**Monitoring Progress**

Individual learner, group and cohort progress is monitored on a number of layers to ensure accountability and allow for the sharing of good practice.

***Class Level***

Individual teachers retain responsibility for monitoring the progress of learners within their subject area and ensuring that appropriate/stretching targets for progress from starting points are set for all; this is further monitored with teachers through the systematic process of lesson observations, work sampling and appraisal process.

***Departmental Level***

Half termly departmental meetings include monitoring of progress within a subject as a standing agenda item. Trends for progress over time for groups of learners are reported as good practice, however trends within the context of an in-patient service look different to a conventional education setting.

***Whole School Level***

Half termly, cross departmental progress reviews are held to allow discussion and comparison of progress over time for either individuals or groups of learners in both the House and the Hub. Maintaining a learning focus to these meetings allows for identification of trends, informing interventions that are required to address underlying causes of underperformance and for the sharing of successful strategies where performance is stronger in certain subjects.

Half termly analysis of whole school progress and attainment by SLT, who monitor for patterns within regular meetings. Identification of individual or groups of learners causing concern and appropriate strategies/interventions put in place via weekly team meetings where a RAG rated system identifies learners who need additional support or intervention. Identification of potential underperformance of individual teachers or departments and areas of need are addressed through appraisal.

***Management Committee***

Regular reporting of progress data to the Management Committee takes place within scheduled meetings. Members are encouraged to make use of the SIMS data and after data provided to look at both academic and pastoral progress and to utilise this to support and challenge school staff.

**Target Setting**

Class teachers are responsible for setting targets for individual learners within a subject area, and where applicable, indicating an expected level of attainment for the end of each academic year. Targets are expected to be challenging yet achievable, reflecting at least expected rates of progress for all learners. Where prior attainment data shows that progress has stalled or regressed before induction at Ancora House School, targets are expected to reflect better than expected rates of progress in order to re-establish the attainment trajectory for that learner, based on the potential they have previously shown.

For some learners, there are numerous gaps in learning; this coupled with the potential for relatively short admission times has driven our curriculum design.

**Disciplinary Literacy**

Metacognition and the 16 Habits of Mind have underpinned our curriculum for some time, our curriculum is a knowledge and skills based curriculum. We believe one of the most valuable gifts we can offer learners in our setting is the experience of disciplinary literacy; disciplinary literacy develops skills of critical thinking, independent thinking and learning within and between specific subject areas. It provides the fundamental skillset for learning.

Permeating through our assemblies; tutorials; whole class work and interventions, the skills of reading, writing, thinking and discussing individually and collaboratively promote sometimes small but significant incremental progress.

Targets are regularly scrutinised and reviewed for suitability by Senior Leadership Team.

**Moderation of Assessment**

It is important that there are opportunities for staff to moderate assessment decisions that are being made, particularly in the early stages of embedding new systems following the removal of national curriculum levels & changes to the GCSE assessment framework. Departmental meetings will allow for staff within a subject area to compare standards of work and corresponding assessment details. Moderation is further strengthened by the development of departmental links across House and Hub allowing for comparison of standards against age related expectations and in the context of a learner’s mental health and well-being.

Teachers are encouraged to use their professional judgement and detailed knowledge of individual learners to make assessment decisions without being reliant on testing. There may be times however when it is appropriate to use tests as a tool for moderating and standardising assessment decisions.

**Reporting**

Ancora House School Short Stay School are committed to involving parents/carers as much as possible in their children’s education. There is often daily contact with families which allow for the reporting of any emerging issues or educational needs – this is a two way process and parents are encouraged to communicate any concerns they may have at any time.

Teachers will report to parents/carers formally on learner achievement and progress 6 times per year, for Hub learners completing their education with 3 written reports and 3 planned parental progress reviews. Written reports will be produced providing parents with an overview of assessment and attendance information alongside written comments from staff.

To ensure successful transition, the team produce an Education Discharge Summary which contains in-depth pertinent information about academic and pastoral progress and areas for development, barriers to learning and strategies which allow learning to happen, SEN information and overall support still required by the learner. This document is emailed to the home school/college

**Appendix The Impact of Mental Health on functioning in Education ( RIC, RICH)**

The student moves along a continuum from a position of high impact of mental health towards a state of wellness and readiness to learn.

Incrementally, the momentum of change is larger as the student moves towards recovery and gains insight, resilience and confidence.

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|  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| A  **C**ommunication with adults | **Avoids communication** both verbal and non-verbal  (including eye  Contact) | Responds non verbally with **nods/shrugs** | Responds **verbally to closed** questions from  staff | Will expand responses to limited questions **(not just yes/no)** | Will respond with **extended** answers to open questions. | Will tentatively engage in  **Conversation**  With staff | Will engage in conversation with staff on a **1:1 basis** listening and  responding  appropriately | Will engage in conversation with staff in a **group** listening and  responding  appropriately | **At ease** in a group setting listening and responding  appropriately | Will **initiate** and take part in an **extended**  conversation with staff |
| B  **R**elationships with peers | **No relationship** with peers is evident | Will give non-verbal response to peer if **prompted** | Interactions with peers is largely negative/  unhelpful  (**derogatory comments/**  **Swearing**) | Voluntary non-  Verbal interaction with at least one peer **(smile, laugh, eye contact, sharing)** | Will speak to peer when **necessary**  (Instruction from teacher/ pass the glue) | **Addresses the group but not an individual peer** | **Initiates** positive verbal interaction with peer | Positive interactions with peers in a **group setting** | **Initiates extended** conversations with peers in group setting | Demonstrates **empathy and good listening skills** when participating in group conversations |
| C  **I**mpact of Mental Health difficulty on ability to concentrate | Unable to participate in lessons – **stays on the ward or at home** | Is able to concentrate on **therapeutic/distraction** activities for **short** periods | Stays in class **for most of the lesson** concentrating on **therapeutic** activities | Is able to engage in **subject specific activities** | Is able to complete some **academic work** (not in subject classroom) | Is able to be in **subject classroom** concentrating for short periods on **academic work with support**  (10 mins) | Is able to be in subject classroom concentrating for short periods on academic work **with support**  **(Full session))** | Is able to concentrate sufficiently to **start and complete** short academic tasks **independently** | Able to concentrate **all lesson working independently** | Is able to work **proactively taking ownership** of learning |
| E  **H**ope for the future | Actively attempting suicide. Sees no future. | Regularly verbalising or displaying an intent to commit suicide. Struggles to visualise a future. | Sometimes verbalising or displaying an intent to commit suicide. Struggles to visualise a future. | No suicidal ideation expressed, but sense of hopelessness pervasive. | Is able to think about future plans at times, although struggles to formalise ideas. | Sometimes expresses hope for the future. Is sometimes able to contribute to planning of next steps. | Sometimes expresses hope for the future and is actively putting plans in place with help from staff. | Regularly expresses hope for the future and is actively putting positive plans in place. | Has a sense of hope and time is spent actively working towards a positive future. | Has hope for the future and displays a sense of well-being. Actively engaged in life. |