Sydney Childrens Hospital School
Annual School Report 2013
School context

Sydney Childrens Hospital School (SCHS) is a K-12 school for Specific Purposes operating within Sydney Children’s Hospital Network (SCHN) and is a joint venture between the hospital and Department of Education and Communities (DEC). SCHS now works as a community of schools with The Children’s Hospital School Westmead (CHSW). The school services patients enrolled in both government and non-government schools. Meeting the challenges of equity, continuity and normality for hospitalised students is an important focus and is fundamental to ensuring success for all students in the school.

Staff

The staff consists of a principal, six full time teachers and one part time teacher, four School Learning Support officers, a part time School Administrative Officer and a School Administrative Manager. The school provides service in both a primary classroom (K-6), a high school classroom (7-12). In addition service also occurs in a classroom in the newly opened Saunders Unit and across wards; public, private and adult. All teaching staff meet the professional requirements for teaching in NSW public schools.

Principal’s message

Our main priorities at SCHS are to meet the teaching and learning needs of hospitalized students both in classes and on wards as well as addressing attendance within the context of this specialised setting. With an inclusive school culture, the emphasis is on developing positive relationships between all members of the school community. Working in partnerships, school staff, parents and hospital staff, engage and support students through quality personalised education programs that enhance learning outcomes. These programs support and promote students wellbeing whilst in hospital as well as during their transition to home schools.

In particular in 2013, targeted staff at the school worked to establish a new classroom for adolescent students with mental health problems in the Saunders Unit. The above priorities have been implemented in this unit and the class is running successfully.

I certify that the information in this report is the result of a rigorous school self-evaluation process and is a balanced and genuine account of the school’s achievements and areas for development.

Jill Meiners

Student information

It is a requirement that the reporting of information for all students be consistent with privacy and personal information policies.

We provide a caring and stimulating educational service for K-12 students, from all educational sectors, who are patients of Sydney Children’s Hospital (SCH). Students have an extensive range of medical conditions, including chronic illness, disease, psychological illness and injuries sustained from an accident. Length of stay varies depending on the nature of the student’s medical condition. The students remain enrolled in their census schools whilst attending the Hospital School. Personalised Learning Plans (PLPs) are developed for long term patients. These emphasise continuity of census school educational programs and peer relationships. Where possible, students are encouraged to attend classrooms. However, for those who are unable to come to school, a ward teaching service is provided. The school works with multidisciplinary teams and liaises with medical personnel in order to ensure that enhanced educational, health and attendance outcomes for students are met.

Student enrolment profile

SCHS is a dynamic school that services a huge student population across the school year. In 2013, 7259 individual services were provided to students in class and on the wards. The average number of students enrolled per week was 73. Students come from both government and non-government schools in metropolitan and country areas of NSW and other states. Approved international students may also attend. Students come from a wide range of cultural and socio-economic backgrounds and range in grades from Kindergarten to Year 12.

Management of non-attendance

In March 2003, the Government announced its commitment to publish primary class sizes in
annual school reports in order to provide parents with as much local information as possible.

Students attend school or are serviced on the wards once medical permission to do so is given. Class and ward rolls are kept. Individual student attendance sheets are also recorded. Short term attendance forms are sent every week from SCHS to census schools so that attendance can be monitored.

Workforce information

It is a requirement that the reporting of information for all staff must be consistent with privacy and personal information policies.

Workforce composition

<table>
<thead>
<tr>
<th>Position</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Principal</td>
<td>1.0</td>
</tr>
<tr>
<td>Classroom Teacher(s)</td>
<td>4.0</td>
</tr>
<tr>
<td>SSP Teacher Emotional Disabilities</td>
<td>2.0</td>
</tr>
<tr>
<td>SSP Teachers RFF</td>
<td>0.504</td>
</tr>
<tr>
<td>Teacher Librarian</td>
<td>0.2</td>
</tr>
<tr>
<td>School Administrative &amp; Support Staff</td>
<td>5.001</td>
</tr>
<tr>
<td>Total</td>
<td>12.705</td>
</tr>
</tbody>
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The Australian Education Regulation, 2013 requires schools to report on Aboriginal composition of their workforce.

One member of staff is of Aboriginal and Torres Strait Islander background.

Teacher qualifications

All teaching staff meet the professional requirements for teaching in NSW public schools.

<table>
<thead>
<tr>
<th>Qualifications</th>
<th>% of staff</th>
</tr>
</thead>
<tbody>
<tr>
<td>Degree or Diploma</td>
<td>100%</td>
</tr>
<tr>
<td>Postgraduate</td>
<td>20%</td>
</tr>
<tr>
<td>NSW Institute of Teachers Accreditation</td>
<td>20%</td>
</tr>
</tbody>
</table>

Financial summary

This summary covers funds for operating costs and does not involve expenditure areas such as permanent salaries, building and major maintenance.

<table>
<thead>
<tr>
<th>Date of financial summary</th>
<th>30/11/2013</th>
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</thead>
<tbody>
<tr>
<td>Income</td>
<td>$</td>
</tr>
<tr>
<td>Balance brought forward</td>
<td>100,061.05</td>
</tr>
<tr>
<td>Global funds</td>
<td>89,723.00</td>
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<tr>
<td>Tied funds</td>
<td>52,035.83</td>
</tr>
<tr>
<td>School &amp; community sources</td>
<td>220.00</td>
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<tr>
<td>Interest</td>
<td>3,398.02</td>
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<tr>
<td>Trust receipts</td>
<td>0.00</td>
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<tr>
<td>Canteen</td>
<td>0.00</td>
</tr>
<tr>
<td>Total income</td>
<td>145,376.85</td>
</tr>
</tbody>
</table>

Expenditure

Teaching & learning

- Key learning areas: 8,722.87
- Excursions: 0.00
- Extracurricular dissections: 4,574.14

Library: 125.00

Training & development: 10,570.97

Tied funds: 33,273.75

Casual relief teachers: 9,250.31

Administration & office: 38,431.27

School-operated canteen: 0.00

Utilities: 3,340.47

Maintenance: 180.00

Trust accounts: 0.00

Capital programs: 29,643.00

Total expenditure: 0.00

Balance carried forward: 107,326.12

Further details concerning the statement can be obtained by contacting the school.

Significant programs and initiatives

Other achievements at SCHS have included continuing programs involving Aboriginal education and Multicultural education as well as

- **Building Partnership Program**, in which staff have observed and participated in PL initiatives in other DEC schools

- **Creative Arts** via ArtEx Workshops, when SCHS works closely with the Hospital Foundation. Each year a number of art programs, Art Ex, are held in conjunction with the Foundation. Local public schools are invited to join these projects where experienced artists come and lead workshops for the students who are both patients and non patients of the hospital.

- **Ongoing refining of Ward Services**.

A crucial role of the school is to deliver an educational service to children at the bedside. Throughout 2013 we have
worked on refining and improving the communication with all wards in order to ascertain the needs of each child every day. Daily ward lists are obtained from the hospital administration and teachers collect relevant information from each ward. This governs whether the child receives a bedside service or attends the classroom, or is in fact too unwell for any schooling. The result has been a smoother process involving the transfer of information from each ward to the school and as a result, a better educational delivery.

- **Development of Learning Support Team (LST) with a Coordinator.**

  LST is now an integral part of supporting students who attend DEC schools. All staff at SCHS are part of the LST. Communication regarding students is discussed in morning briefing meetings. The LST coordinator attends numerous medical team meetings in order to support the educational needs of targeted students.

- **Establishment of a new ED classroom within a secure ward.**

  Term 3 saw the opening of the new Child and Adolescent Mental Health Unit (Saunders Unit), and the establishment of a new classroom for students with an emotional disturbance (ED). This was achieved in collaboration with medical, allied health and education staff. The classroom caters for up to 7 students, and is staffed by one teacher, a School Learning Support Officer (SLSO), and a minimum of 1 nurse and/or medical staff member at all times. We offer students the opportunity to continue their education through making accommodations and adjustments to meet individual needs. Students are managed by a multi-disciplinary team with a strong emphasis on keeping students connected to their census schools, and by providing a smooth transition back to their school.

**National partnerships and significant Commonwealth initiatives**

**Interactive Roadmap for Diabetes Care in Schools**

This project aimed to develop a set of guidelines for teacher professional learning and the creation of an electronic interactive roadmap for Diabetes care in NSW. It also aims to support mainstream schools, teachers, students and parents to understand and respond to personalized learning and support needs of students living with Diabetes. It involved the creation a set of recommendations for the establishment of a standards framework and a best practice guide in the development of personalized support. The team has worked collaboratively with Sydney Children’s Hospital Network personnel to identify stakeholders across Education, Health and Non-Government Organisations such as Diabetes Australia as well as parents in order to utilize expertise to support students living with Diabetes in our schools. It is those students, in particular, who are at risk of disengaging from school.

As a community of schools, both CHSW and SCHS have worked together to develop this program.

**School planning and evaluation 2012—2014**

**School evaluation processes**

NSW public schools conduct evaluations to support the effective implementation of the school plan. The processes used include:

- The review of School Improvement Plan in 2013. As a whole staff team, we evaluated what had been achieved, what was still to be completed and identified areas that needed to change.

- As a result of ongoing communication with the hospital, some lobbying for the re-establishment for the employment of an Aboriginal Liaison Officer within the hospital occurred. As part of the process the principal attended Aboriginal Education Consultative Group meetings as well as meetings with Association for the Wellbeing of Children in Healthcare (AWCH). Engagement in discussions with Francene Eades, Aboriginal Health Management Advisor, also occurred. This has resulted in the future re-establishment of this position.

- Due to the establishment of a LST coordinator, smoother processes and consistency in terms of communication
School planning 2012—2014: progress in 2013

School priority 1
Effective delivery of Literacy and Numeracy Learning Programs for all students.

Outcome for 2012–2014
To engage all students through innovative teaching practice and effective use of technology as a learning tool.

2013 Targets to achieve this outcome include:
- To identify and promote strategies for developing effective teaching practices to maintain student outcomes.
- Teacher Professional Learning (TPL), numeracy and literacy for HS teachers.
- To incorporate curriculum exchange as part of TPL programs.

Strategies to achieve these targets include:
- Development of PLPs via Primary Team and High School team.
- Embed Literacy and Numeracy programs in all PLPs.
- Strengthening teachers skills and understandings about quality literacy and numeracy teaching and learning, (for e.g. Reading to Learn R2L, Catch p Literacy, Multilit awareness and Count Me in Too).

Evidence of progress towards outcomes in 2013:
- Establishment of electronic student roles and records have allowed for more timely development of PLPs and tracking of student progress.
- Incorporation of the use of technology such as ipads and Connected Classrooms into literacy and numeracy teaching programs
- Workshops for staff were conducted in the use of Multilit, Literacy and Numeracy continuum
- All staff were introduced to the new English syllabus

Strategies to achieve these outcomes in 2014
- Continued focus on the incorporation of new and existing technologies into all school learning programs
- Continued use of electronic student rolls and records with further extension into student tracking from year to year with communication of this data back to their census school
- Further professional development for staff on the Literacy Continuum and new curriculum documents

School priority 2
Engagement and attainment

Outcome for 2012–2014
Identify and promote strategies for developing effective teaching practices to maintain student outcomes.

2013 Targets to achieve this outcome include:
- To strengthen and expand partnerships with other organisations, agencies, parents and community groups to enable and maintain pedagogical skills of teachers
- To develop effective transition programs
- To develop the Partnership program with local schools for siblings

Strategies to achieve these targets include:
- Students are engaged in their learning through use of innovative practice and use of technology as a learning tool
- Students are engaged in their learning through the use of quality learning tasks
- Increase use of Connected Classrooms and link with other specialist teachers
- Teacher Professional Learning (TPL) Transition programs via Staff
Development day to develop transition plan processes

- Partnership with local schools for sibling enrolment

Evidence of progress towards outcomes in 2013:

- Teachers have incorporated the use of technology such as iPads and Connected Classrooms into literacy and numeracy teaching programs.
- The Sibling Partnership Program with local schools continues to meet the needs of siblings of hospitalized students. Inclusion in this program is managed by the Principal on a case by case process.
- Through ongoing mentoring and coaching that incorporated the AITSL standards, it was identified by teachers that they required opportunities to observe their peers deliver lessons and be observed in lesson delivery in order to improve quality learning tasks.
- Clarification was sought regarding the content of transition processes from the hospital school. Information around student outcome achievements and the teaching strategies used was provided to census schools as part of student transition process via the appropriate health team.

Strategies to achieve these outcomes in 2014:

- Consultation with the Education Director will need to occur around the timeframes of attendance for the Siblings Program.
- Investigation into the process of transitioning hospitalized students back to census schools needs to occur in the advent of Local Schools Local Decision and role of the Principal as expert in this process.
- Establishment of a lesson study program will occur that allows teachers to observe and be observed during the delivery of lessons. Teachers will also have the opportunity to participate in debriefing and feedback sessions so they can discuss what they have observed and learnt about quality learning tasks.
- Continued focus on the incorporation of new and existing technologies into all school learning programs.

Professional learning

During 2013, SCH staff has joined with CHS staff for collaborative Professional Development. Professional learning has continued with the Team Leadership for School Improvement Program and will be completed by the end of 2013. This will support self-reflection, and continuous improvement and best practice in the workplace. Staff have undertaken mandatory DEC and SCH training and completed Online Special Education Courses. Collaborative development and knowledge of Personalised Learning Plans and reports is continually evolving in this complex setting. Modules for the New Australian Curriculum have expanded the capacity of all teaching staff. One new scheme teacher has finalised accreditation with the NSW Institute of Teachers. SAS staff have attended sessions in Career Planning.

Parent/caregiver, student, and teacher satisfaction

In 2013, SCHS sought the opinions of parents, students and teachers about the school. These are two letters which were received from parents:

To All those associated with the Sydney Children’s Hospital School,

I just like to inform you of my daughter Sally. She recently spent 3 & a half weeks at the Sydney Children’s Hospital, ward C3 South.

Although unable to attend every day, all day, Sally for the first time in her life came back to the ward (home) beaming that she had had a wonderful & enjoyable time at school.

As most parents would know, children see school as a chore. However, Sally always came back to her bed having had immense fun & looking forward to the next time she could get back down to school.
Hospital in most cases is not what anyone would relate to as an enjoyable time. Whilst there are adequate resources & an amazing nursing & medical staff supporting the kids, for our sick daughter to have that glimmer of fun and enjoyment in what was a largely emotionally draining period, you have my & my wife’s sincere thanks and appreciation for the work you do.

For our daughter to have any time that can be considered “enjoyable”, in an environment that represents pain, anger, fear, tears and emotion, you indeed do a fabulous job.

Please thank all those associated with the Hospital School, administration, teaching & the management; it brought that little ray of happiness into a little 10 year old girl’s hospital stay that was otherwise clouded for fun.

Thank you all, your efforts are very much appreciated.

Respiratory patient Parent

We are from Canberra and have been in Sydney for nearly 5 months while our daughter underwent treatment as she has leukemia. The teachers at the hospital school have been fantastic in helping us throughout our daughters’ chemotherapy treatment.

Leanne would come to the ward on a daily basis to do school work with Lara (who is in year 7). She was always happy, positive and energetic which was infectious. This was essential for Lara who would sometimes be down and/or ill due to her side effects of the chemotherapy. Leanne also liaised with Lara’s teacher to get work sent to Lara, which was a huge to relief to us as it was something that we did not have to worry about. Lara was able to complete the assignments that were sent to her and continue the fundamentals of what her other classmates were learning.

Not only did the teachers help with Lara, but thanks to Jill and her team, we were also able to have our other two children stay with us as they were able to continue their education at the hospital school. Rosie and Cassie liaised with Kaitlyn and Cody’s teachers in Canberra to ensure that when they were at the hospital school, they were still doing work from the curriculum in Canberra. Kaitlyn (who is in year 10) was able to maintain her grades and complete all assignments, while Cody (who is in year 1) was able to complete all of his set assessment tasks.

If it wasn’t for the school and especially the fantastic teachers at this school, we would not have been able to have our family together while our daughter underwent treatment. I cannot thank or rate the team highly enough.

Cancer patient Parent

- A suggestion from parents was that the SCHS investigate ways they can assist the census school remain engaged in the learning programs of their students whilst in hospital. Some parents found that the census school was slow to respond to requests for information on student’s current learning programs.
- Teachers reported that a satisfying part of their role is working both in the classroom and with individual students on the wards.
- Teachers stated that working with the individual students on the wards allowed for a strong relationship to develop between teacher and student and allows a rapport to be developed with the parents / caregivers. They found that it also allowed for positive professional relationships to be developed with the hospital staff members.
- It was identified that some professional learning based on the roles and responsibilities of teachers in a hospital setting needs to be delivered in 2014.

About this report

In preparing this report, the self-evaluation committee has gathered information from evaluations conducted during the year and analysed other information about the school’s practices and student learning outcomes. The self-evaluation committee and school planning committee have determined targets for the school’s future development.

Jill Meiners Principal
Nicole Alexander Teacher
Leanne Farrugia Teacher
Rosemary Kingsford Teacher
Daniel Watson Teacher
School contact information

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Parents can find more information about Annual School Reports, how to interpret information in the report and have the opportunity to provide feedback about the report at: