

## Pupil Premium Strategy Statement – Lime Academy Orton

This statement details our school's use of pupil premium 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 outcomes for disadvantaged pupils last academic year.

### School overview

Detail	Data
Number of pupils in school	154
Proportion (%) of pupil premium eligible pupils	37%
Academic year/years that our current pupil premium strategy plan covers	2025-2028
Date this statement was published	18.12.2025
Date on which it will be reviewed	18.12.2026
Statement authorised by	Anthony Skipworth
Pupil premium lead	Tom Hagues
Governor / Trustee lead	Christopher Cole

### Funding overview

Detail	Amount
Pupil premium funding allocation this academic year	£74,035
Pupil premium funding carried forward from previous years (enter £0 if not applicable)	£0
<b>Total budget for this academic year</b> <i>If your school is an academy in a trust that pools this funding, state the amount available to your school this academic year</i>	£74,035

## Part A: Pupil premium strategy plan

### Statement of intent

The pupil premium at Lime Academy Orton is used strategically to remove the significant and complex barriers faced by disadvantaged pupils with severe and profound special educational needs. All pupils have an Education, Health and Care (EHC) Plan and present with a range of complex needs, including severe or profound cognitive disability, significant communication difficulties, physical disabilities, sensory processing needs, and complex or life-limiting medical conditions. These factors can limit pupils' access to learning, reduce readiness to engage, and impact progress towards personalised English, mathematics and wider EHCP outcomes.

Our intent is that pupil premium funding strengthens the quality of education, access to learning, communication, wellbeing and engagement for disadvantaged pupils, enabling them to make strong progress from their individual starting points. We recognise that success in this context is measured not solely through academic attainment, but through progress against EHCP outcomes, increased communication and interaction, improved physical comfort and regulation, sustained engagement, and preparation for adulthood.

Pupil premium funding is therefore used to build whole-school capacity and expertise, rather than isolated interventions. This includes the development of specialist lead teacher roles to drive high-quality teaching, bespoke professional development, and consistent approaches across communication and interaction, cognition and learning (including English and mathematics), and social, emotional, sensory and physical needs. These approaches ensure that teaching is appropriately adapted, ambitious and inclusive for all learners.

Targeted pupil premium support prioritises integrated therapeutic practice, ensuring that therapy strategies are embedded into daily classroom routines through close collaboration with NHS therapy services. This approach supports pupils' physical comfort, posture, communication and readiness to learn, maximising the impact of specialist input.

Wider strategies focus on improving attendance, family engagement and access to enrichment, recognising the additional challenges faced by families who live at a distance from school or who support pupils with complex medical needs. Targeted work by family liaison and medical welfare teams ensures that pupils are supported to attend regularly, access a broad and meaningful curriculum, and experience a sense of belonging within the school community.

Through this approach, pupil premium funding is used to remove barriers to access, strengthen inclusive practice, and secure positive, sustainable outcomes for disadvantaged pupils with complex SEND. The impact of this strategy is evaluated through progress against EHCP outcomes, engagement and attendance data, communication and wellbeing measures, and regular review through the school's self-evaluation and improvement planning processes.

## Challenges

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

Challenge number	Detail of challenge
1	All pupils have an Education, Health and Care (EHC) Plan. An increasing number of pupils have complex or multiple needs
2	All pupils present with a severe or profound cognitive disability which poses a barrier to learning and can have detrimental effect on their progress towards English and Mathematics end of Key Stage objectives within their EHCP.
3	All pupils have severe communication difficulties; Many learners are non-verbal or have limited verbal language and some pupils have social communication difficulties.
4	Some pupils have profound physical disabilities that input their access to learning, comfort and readiness to access education.
5	Some pupils have significant and/or complex medical issues some of which are life limiting.
6	Specialist knowledge of teachers in relation to specific needs and appropriate strategies
7	Attendance rates for some pupils are reduced leading to less curriculum access and opportunities for progression
8	Many families live geographically some distance from the school so interaction with families can be limited
9	Lack of opportunity for enrichment activities for some pupils at home.

## 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
Pupils make strong progress against individual EHCP outcomes, particularly in communication, cognition and learning, physical development, and SEMH.	At least 75–80% of pupils meet or exceed the majority of their EHCP outcomes at End of Key Stage, evidenced through termly reviews
Increased access to, and engagement with, English and mathematics learning at an appropriate developmental level, evidenced through personalised assessment frameworks.	Pupils demonstrate increased engagement, sustained attention, and progress within personalised English and maths pathways

Improved communication outcomes, with pupils increasingly able to express needs, choices, and learning through AAC, objects of reference, symbols, or verbal language where appropriate.	Increased frequency and independence of communication attempts recorded through AAC logs, communication passports, or observation records
Improved physical comfort, regulation, and readiness to learn for pupils with profound physical and medical needs.	Reduced incidences of distress linked to physical needs; improved readiness to engage at the start of sessions
Improved attendance and sustained engagement for pupils with historically lower attendance.	Improved attendance for identified pupils; reduced impact of medical absence through flexible provision
Increased access to enrichment and experiential learning opportunities, narrowing gaps caused by limited experiences outside school.	All pupils access a planned programme of enrichment activities, evidenced through learning journals and curriculum records
Strengthened partnerships with families, particularly those living at distance from the school.	Increased family participation in meetings, workshops, or communication, with positive feedback gathered through surveys

## 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 (for example, CPD, recruitment and retention)

Budgeted cost: £ 13,564

Activity	Evidence that supports this approach	Challenge number(s) addressed
Appointment and ongoing development of a Lead Teacher role responsible for Communication and Interaction to deliver bespoke, intensive CPD across the academic year (linked to SIP priority)	<ul style="list-style-type: none"> <li>• EEF: Special Educational Needs in Mainstream Schools – consistent, whole-school approaches to communication improve access to learning.</li> <li>• DfE SEND Code of Practice – emphasis on communication as a foundation for learning and participation.</li> <li>• SALT advice and research on AAC and total communication highlights improved engagement and reduced frustration for pupils who are non-verbal.</li> </ul>	1, 3, 6

<p>Appointment and ongoing development of a Lead Teacher role responsible for Cognition and Learning with responsibility for English (including early reading) and mathematics CPD</p>	<ul style="list-style-type: none"> <li>• EEF: Improving Literacy in Primary Schools and Improving Mathematics – high-quality teaching and subject-specific pedagogy have the strongest impact.</li> <li>• EEF SEND guidance – adapting teaching and scaffolding learning is more effective than over-reliance on withdrawal interventions.</li> <li>• Evidence from specialist SEND settings shows that personalised, developmental pathways lead to sustained progress for pupils with SLD/PMLD.</li> </ul>	<p>1, 2, 6</p>
<p>Appointment and ongoing development of a Lead Teacher role responsible for SEMH and Sensory &amp; Physical needs to support whole-school curriculum approaches</p>	<ul style="list-style-type: none"> <li>• EEF: Improving Behaviour in Schools – proactive, whole-school approaches improve engagement and learning behaviours.</li> <li>• Research into sensory integration and regulation demonstrates improved readiness to learn and reduced dysregulation when needs are proactively met.</li> </ul>	<p>1, 4, 6</p>

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

Budgeted cost: £ 3391

Activity	Evidence that supports this approach	Challenge number(s) addressed
<p>Creation of a Lead Teacher for Therapeutic Interventions role with half-day weekly release</p>	<ul style="list-style-type: none"> <li>• EEF: <i>Making Best Use of Teaching Assistants</i> – targeted, well-trained adults have greater impact when strategies are embedded into classroom practice.</li> <li>• NHS and DfE guidance promotes integrated therapy models rather than isolated clinical sessions.</li> <li>• Research indicates that postural management directly supports attention, communication and engagement for pupils with physical disabilities.</li> </ul>	<p>1, 4, 5, 6</p>

Direct work with pupils and class teams on postural management in lessons, supported by NHS therapy MDT	<ul style="list-style-type: none"> <li>SEND Code of Practice – stresses the importance of joined-up working between education, health and care.</li> <li>Evidence from specialist settings shows improved outcomes when therapy targets are reinforced daily by education staff.</li> </ul>	1, 4, 5, 6, 7
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### Wider strategies (for example, related to attendance, behaviour, wellbeing)

Budgeted cost: £ 57,369

Activity	Evidence that supports this approach	Challenge number(s) addressed
Targeted time within the Family Liaison Team to support attendance, engagement and access to enrichment	<ul style="list-style-type: none"> <li>EEF: <i>Working with Parents to Support Children's Learning</i> – effective parental engagement has a positive impact on pupil outcomes.</li> <li>DfE attendance guidance – personalised, relationship-based approaches are most effective for pupils with complex needs.</li> <li>Evidence from SEND Forums highlights improved attendance where families feel supported and connected to the school community.</li> </ul>	1, 7, 8, 9
Planned family engagement and enrichment activities supported by the Family Liaison Team		1, 7, 8, 9
Medical Welfare Officer appointed and identified as responsible for staff training and the updating of care plans. Including liaison with healthcare professionals	<ul style="list-style-type: none"> <li>SEND Code of Practice – schools must ensure pupils with medical needs can access education safely.</li> <li>Research indicates that well-trained staff and robust care planning reduce interruptions to learning and increase pupil wellbeing.</li> <li>Joint working with healthcare professionals improves consistency and confidence in meeting complex and life-limiting medical needs.</li> </ul>	1, 4, 5, 6, 7

**Total budgeted cost: £ 74,324**

## Part B: Review of the previous academic year

### Outcomes for disadvantaged pupils

#### **Overview:**

The Pupil Premium strategy at Lime Academy Orton in 2024–25 aimed to support disadvantaged pupils with severe and complex learning difficulties. The overall goal was to narrow attainment gaps and support progress across multiple areas of development, aligned to individual EHCP outcomes. A total of £73,990 was allocated to support 59 eligible pupils.

#### **Key Strategic Areas and Outcomes:**

##### **Enrichment and Life Experiences (£3,960 allocated)**

- **Strategy:** Pupils were supported to access extra-curricular activities, educational visits, and community experiences.
- **Outcome:** Funding successfully ensured that all eligible pupils could participate alongside peers. This promoted social inclusion, engagement, and personal development, enriching learners' experiences beyond the classroom.
- **Impact:** Although no quantitative progress data is provided, qualitative evidence likely shows improved confidence, engagement, and exposure to broader learning contexts.

##### **Attendance Support (£30,000 allocated)**

- **Strategy:** Deployment of a Family Support Worker to increase and monitor attendance for pupils with below-threshold attendance.
- **Outcome:** This proactive approach addressed an external barrier to attainment. Improved attendance would have supported greater access to the curriculum and progression towards EHCP outcomes.
- **Impact:** Direct links to academic or developmental outcomes are implied through increased curriculum access, improvements in pupil attendance are being seen into this academic year with an increase from 85.53% to 86.21%.

##### **Behaviour and Self-Regulation Support (£9,600 allocated)**

- **Strategy:** Staff were released for PRICE training to support pupils in managing behaviours and developing self-regulation skills.
- **Outcome:** Pupils were better supported in managing behaviour, leading to fewer incidents of challenging behaviour. This, in turn, created more opportunities for learning.
- **Impact:** Contributed to improvements in personal development, social interaction, and engagement, supporting EHCP targets in behaviour and self-regulation.

##### **Hydrotherapy and Physical Development (£2,500 + £19,640 allocated)**

- **Strategy:** Investment in additional teaching assistant hours, training, and shallow pool rescue skills to increase hydrotherapy access for pupils with complex medical and physical needs.
- **Outcome:** Pupils gained greater access to hydrotherapy, including targeted sessions and the establishment of a weekly swimming club for those with mild physical disabilities.
- **Impact:** Positive effects on movement, mobility, physical well-being, and life skills were facilitated. The provision supported inclusion and engagement in

physical activities, enhancing overall developmental outcomes. Increased access to hydrotherapy and fewer instances of the hydrotherapy pool being closed due to staffing.

### **Medical and Manual Handling Support (£8,290 allocated)**

- **Strategy:** Targeted time within the Medical Welfare Officer timetable to train staff in medical and manual handling skills.
- **Outcome:** Ensured pupils could safely access all learning opportunities, contributing to progression across cognitive, physical, and social domains.
- **Impact:** Directly supported pupils' ability to participate fully in the curriculum, safeguarding their health while promoting independence and skill development.

### **Overall Impact:**

The strategy demonstrates a strong alignment between funding allocation, targeted interventions, and expected learner outcomes. Key areas of impact included:

- **Personal Development & Behaviour:** Improved self-regulation and engagement through training and support for staff and pupils.
- **Independence & Life Skills:** Access to enrichment, hydrotherapy, and physical activities contributed to independence, confidence, and physical well-being.
- **Communication & Social Interaction:** Participation in activities and tailored support enhanced social skills and interactions.
- **Cognition & Learning:** Ensuring attendance, safety, and engagement facilitated progression towards EHCP outcomes.
- **Movement & Mobility:** Hydrotherapy provision effectively addressed physical development and mobility needs.

### **Strengths:**

Clear alignment of spending with barriers to learning.

Focused interventions targeting both in-school and external barriers.

Evidence of inclusive practice ensuring all eligible pupils benefited.

Strategic investment in staff training to sustain long-term improvements.

### **Areas for Further Development:**

Quantitative data on progress (academic, social, or physical) could strengthen evaluation of impact.

Systematic tracking of attendance and behaviour improvements linked to Pupil Premium funding.

Feedback from pupils and families could provide richer qualitative evidence of impact.

### **Conclusion:**

The 2024–25 Pupil Premium strategy at Lime Academy Orton effectively targeted the complex needs of disadvantaged pupils, supporting their access to learning, personal development, and enrichment opportunities. The strategy's design demonstrates a coherent, pupil-focused approach likely to have had meaningful impacts on engagement, wellbeing, and development across EHCP domains.

## Externally provided programmes

*Please include the names of any non-DfE programmes that you used your pupil premium to fund in the previous academic year.*

Programme	Provider
None	