Children's Hospital School

'Better Together'

Home/School Agreement **Name:**_____

At the Children's Hospital School, some students follow part time timetables, to reflect their health needs. Students are given agreed leave of absence for part of the week, which will be recorded as authorised absence (C2).

As Parents/Guardians, I/we understand that during periods where my child is not timetabled to attend school or is absent, parents/guardians have legal responsibility for their care and well-being.

Signature _____ Date_____

As a school, we will inform you of timetable changes and share changes in writing, so it is clear when your child is expected in school.

Signature_____ Date_____

Please note that if a student does not attend regularly and when expected, leave of absence can be withdrawn and all absences can become unauthorised.

As Parents/Guardians, I/we will:

- work with the Children's Hospital School to support my child's education as appropriate
- support my child to access lessons regularly as agreed, on time and properly equipped
- support the school's code of conduct and dress code
- let the school know, at the earliest opportunity, if my child has a medical appointment, or is unable to access their lessons
- contact school on the first and every day of absence
- let my child's tutor know of any issues that might affect my child's work, behaviour or attendance
- encourage my child with homework, to meet their targets and to read
- treat others with courtesy and respect
- respect personal information and maintain confidentiality relating to others
- advise and support my child to use ICT equipment and the internet safely at home, in order to complete school tasks
- support liaison between school and other services, including CAMHS, so that we can work together to support your child
- work with other support agencies as requested or required, to support your child
- let the school know if anyone in my child's household is suffering with sickness, stomach upsets or any infectious conditions
- support my child to have a healthy balance of school work, concentration and screen time with exercise, leisure, fresh air and conversation.
- at Willow Bank, the Magpie and Phoenix Learning Centres: Cancel transport in good time if my child is unable to attend
- at home: Provide a quiet place for lessons in the home and for on-line lessons.

Signature _____ Date_____

The school will:

- provide a balanced curriculum, meeting the individual needs of the child
- promote a safe, caring environment which is mobile phone-free
- expect high standards of behaviour and self-discipline of all in our school
- develop clear lines of communication between home and school
- liaise with other professionals working with you, including the school you are on roll at, to plan a way forward and keep on track
- keep you informed of your child's progress and attendance
- encourage success and recognise effort and achievement
- liaise with you and with transport providers regarding timetable changes
- treat everyone with courtesy and respect
- respect personal information and maintain confidentiality relating to others

Signature_____ Date_____

As a student I will:

- attend school / access lessons every session that I am expected to, unless I have a valid reason for absence
- have high standards of behaviour and self-discipline
- be ready for lessons on time and do my work to the best of my ability
- dress sensibly, modestly and safely, following the dress code for school
- treat others with courtesy and respect
- show consideration for all members of the school community and respect for their property
- use appropriate language to staff and others
- hand in my phones and any smart devices
- tell a member of staff if I have any issues that might affect my work, behaviour or attendance
- respect personal information and maintain confidentiality relating to others
- use ICT equipment and the internet safely at home and in school
- try to get on with others and always behave in a way that allows others to get on with what they should be doing
- work with my team to keep myself safe

Signature_____ Date_____

Children's Hospital School • University Hospitals of Leicester NHS Trust • Leicester Royal Infirmary • Leicester • LE1 5WW
Tel: 0116 497 9993

✉ WBadmin@childrenshospitalschool.leicester.sch.uk www.childrenshospitalschool.leicester.sch.uk