

Rebuilding home school attendance during a psychiatric hospital admission

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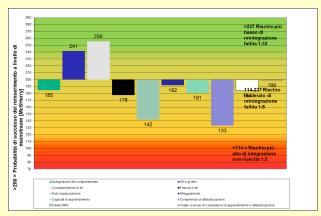
Hope in Italy congress, 2023

The RRS, what is it?

- A teacher-completed measure for assessing the potential for likely successful school reintegration amongst pupils excluded from mainstream school.
- The items are largely based on observable behaviours with relatively low inference
- 71 items across 8 sub-scales
- Author: Jane McSherry

The RRS, why is it helpful?

- Another perspective, based on the teacher's experience of the child's behaviour
- Classroom-based 'vital signs'
- Takes some of the heat and anxiety out of reintegration
- In the last 12 years 43% pupils come with a school place: 83% leave with a school place.
- Shown as a visual profile
 - reflecting the teacher's experience of the child



The RRS sub-scales

[and sample items]

Self Management of Behaviour

['Does not leave the room without permission']

2. Self & Others

['Is able to work in a team']

Self Awareness

['Can ask for help']

4. Self Confidence

['Is happy with self']

5. Self Organisation

['Can work alone without constant attention']

Attitude

['Is prepared to work in lessons']

7. Learning Skills

['Will try to start a task on his/her own']

Literacy Skills

['Is willing to spend time working out the instructions']

The RRS – creating a visual profile

71 items

Each item is scored as:

1(Is never able to fulfil this criterion) to

4 (Almost always fulfils this criterion)

Minimum total = 71

Maximum total = 284

8 sub-scales with 4 to 13 items

'A score of 200 or above would suggest a pupil was potentially ready for mainstream education'

An RRS subscale

Self Management	Almost always fulfils this criterion				
of Behaviour	More often than not fulfils this criteri			terion	
	Rarely fufils	Rarely fufils this crite			
	Is never able to fulfil this cri	terion			
Can accept discipline without argument or sulking		1	2	3	4
Can cope with unstructured time, i.e. lunch and break		1	2	3	4
Can arrive and settle down quietly and appropriately		1	2	3	4
Does not leave the room without permission		1	2	3	4
Can accept changes to plans or disappointment with an even temper		1	2	3	4
Shows some self-discipline when others try to encourage deviation from normal routines at any changeover time.		1	2	3	4
Does not normally use loud exhibitionist language. Is aware of normal sound levels and can be reminded of them and respond without backchat.		1	2	3	4
Can handle trips out of school		1	2	3	4
Does not seek confrontation at break-time		1	2	3	4
Behaves appropriately in the dining hall		1	2	3	4

Score:

/40

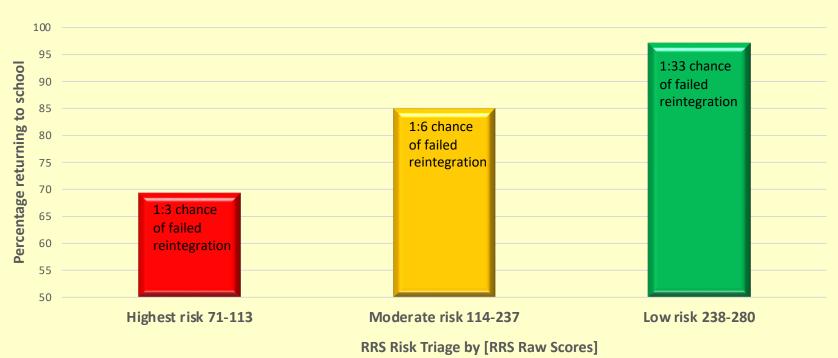
Feedback from staff

- "[Child's name] needs a mainstream curriculum... he can manage one."
- "Takes the fear out of taking a student from a psychiatric hospital"
- "[An] imperfect mirror"
- "Quick and easy to complete"
- "It can act as a framework for staff supporting students in their next placement"
- "Overall knowing their RRS scores enables us to adapt our support so they can engage in their learning and feel safe and secure doing so"

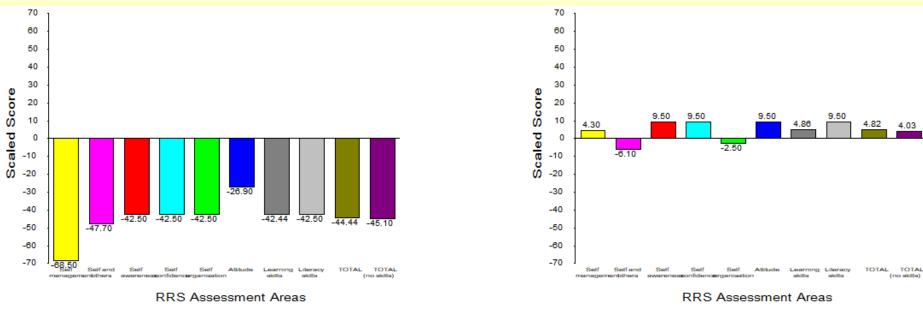
Percentage of Pupils in each RRS range, at T1, who Return to Education



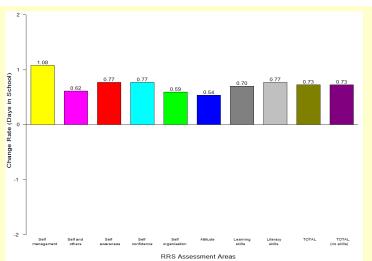
Ratio of Pupils with T1 RRS Scores who fail to return to Education



A pupil's RRS story



Change per day attended in school



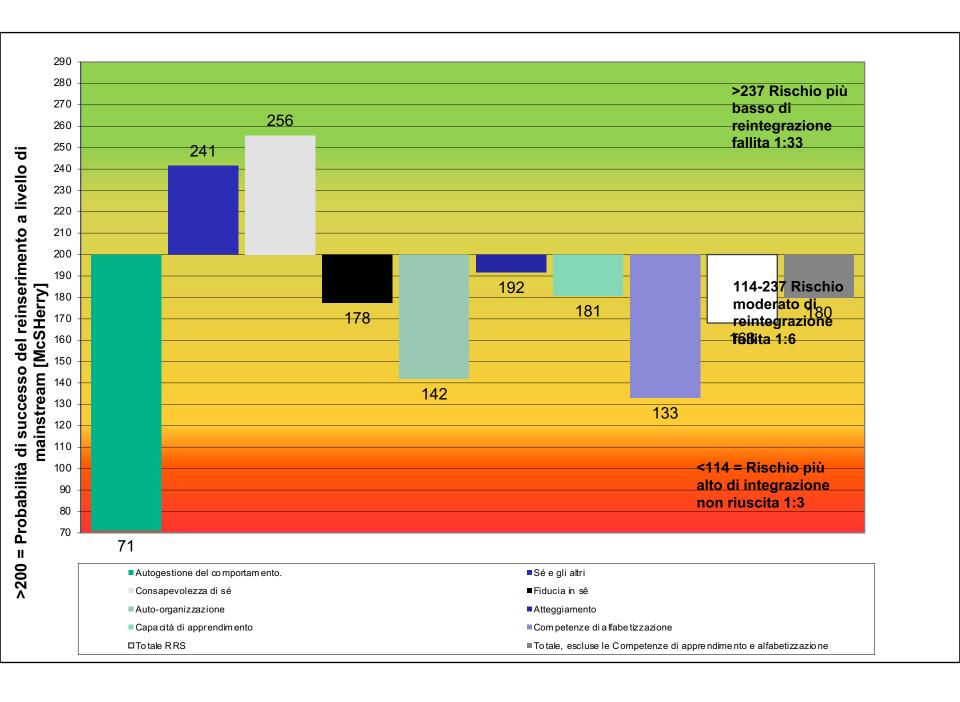
Just an imperfect mirror?

Reliability:

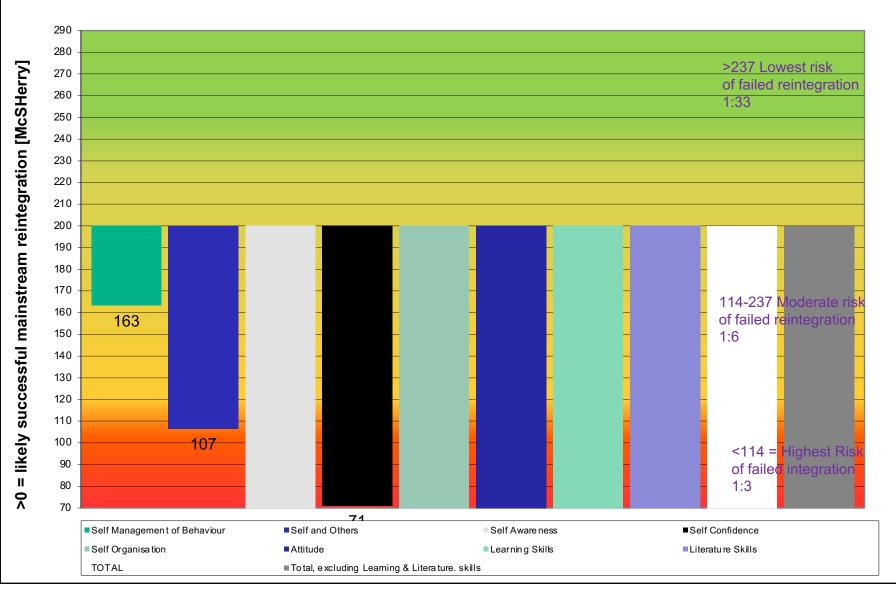
- α .99 (n606) on admission, α .99 (n596) on discharge
 (likelihood that the items measure the same underlying construct)
- Inter-rater reliability:
 - ICC2 .94 (n36) average agreement between independent raters – 'excellent'
 - Test-retest reliability

Validity

- r.43 (n73) Children's Global As (1973) Child
- r.321 (n498) School-related happiness (HLM) with RRS Total
- Face validity Content Validity staff responses



Name Surname - DD - MM - YY [KT]



Supportive Transition Planning for Adolescents Transitioning From Psychiatric Hospitalization to School: Midura S. et al. 2023

Four major key factors emerged ...

- a. Stakeholder Voice (Student, Caregiver, Hospital/Treatment Team, or School Team Voice)
- b. Establishing a Point Person for Transition (Medical or School Point Person)
- c. Recommendations/Accommodations (Formal or Informal Supports)
- d. Having a Transition Meeting.



Maudsley and Bethlem Hospital School - online

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More resources in:

Mental Health Resources for Schools