Pupil Premium Strategy Statement 2017-18

Summary Information (PP =Pupil Premium)

School	Digitech Studio School				
Academic Year	2017-18	Total PP budget	£46,935	Date of most recent PP review	May 2017
Total Number of Pupils	152 (KS4)	Number of Pupils eligible for PP	38	Date for the next internal review of this strategy	January 2018

PP	Pupil Premium
HAPP	Higher prior attaining Pupil Premium
MAPP	Middle prior attaining Pupil Premium

Year 11 Attainment 2016-2017

	Pupils Eligible for PP	Pupils not eligible for PP	*Gap*
Basics -English and Maths 4+	41%	60%	19%
Basics - English and Maths 5+	18.5%	30%	11.5%
Progress 8 score average	-1.02	-0.39	-0.63
Attainment 8 score average	33.89	41.33	7.44

Year 11 Attendance 2016-2017

	Pupils Eligible for PP	Pupils not eligible for PP	*Gap*
Year 10	94.4%	94.5%	0.1%
Year 11	91.2%	96.2%	5.0%

Priorities are driven by:

- Self-Evaluation
- Attendance data
- Attainment data
- Progress data
- National research and evidence of best practice

Barriers to future attainment (for pupils eligible for PP)

In-school barriers

1. **Quality of teaching and learning–** Outcomes for PP students do not match the outcomes for non-PP students both at Digitech and nationally. We will continue to raise expectations in the classroom, identifying the best practise and using teaching and learning strategies identified by the Sutton trust that improve the learning and opportunities in the classroom for PP students. Teaching will also focus on historic limitations on literacy.

2. **Self-deselection.** Self-evaluation suggests that our PP cohort are more likely to opt out in the classroom and worry more about making mistakes, preferring to remain silent than take a chance on participating. Teachers use strategies that support the student to opt in through no opt out, full response and live feedback. Students leave to pursue either further education, training and/or employment.

3. **Attendance** – Children receiving the premium are less likely than their peers to come to school. PP attendance is tracked and monitored with timely interventions where attendance becomes a barrier.