



## The Albany Curriculum

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Date:	9 November 2022
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Date:	9 November 2022
Agreed at the Local Governing Body Meeting on:	9 November 2022
Minute Reference:	

Document reference:	Version 2.2
Created by:	Darryl James
Creation date:	November 2022
Reviewed by:	
Review & revised date:	
Major revision by:	
Major revision date:	
Master File location:	Office Policy Files
Next review due:	

# THE ALBANY CURRICULUM

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The Albany is a non-specialist secondary Alternative Provision (AP). Historically it had two commissioned Social Emotional and Mental Health (SEMH) specialist groups within it. Students within the SEMH cohort have an EHCP and are on the role of The Albany until more suitable specialist provision becomes available. Students within our Alternative Provision (AP) cohort may have an EHCP, but more often do not. If they have been permanently excluded from another school they may be on our role, although we will identify another school with the LA if this is an appropriate route for the student. Normally, however, students will be on the role of their mainstream school and attending The Albany to reengage them in education and learning and address their SEMH needs.

All students attending The Albany have SEMH needs. These will often be communicated through their behaviour. They may be withdrawn and self-excluding from school, or they may have an explosive temper and be aggressive to others or property. They more often lay somewhere between these extremes. Our purpose at The Albany is to unlock the hidden messages behind the behaviours, and support the young person to find ways to engage with others and their learning emotionally, socially and academically in a prosocial way. We also support our students to gain the support they need to address the impacts of trauma and mental ill health.

All learning takes place in the context of a relationship and can only take place when our basic needs are met. Suffolk Mind describes these needs through 12 physical and emotional needs. These are

- Security: our need to feel safe to think clearly and respond appropriately
- Control: the need to have some say over our lives and personal choices
- Attention: our need to give and receive attention in balance to stay mentally healthy
- Status and Respect: our need to feel valued and appreciated by others
- Community: a basic need as social beings who need to belong to groups
- Privacy: time and space to reflect, learn from experience and decide what is important to us
- Emotional Connection: relationships with others that provide a personal connection
- Achievement: a need to feel that we are achieving things and growing
- Meaning and Purpose: provides a reason to exist and supports our resilience
- Sleep: without the right amount of sleep, our bodies and minds cannot operate as they should
- Food and drink: Without adequate nutrition and hydration we will not function well
- Movement: Exercise provides endorphins that boost our mood and promote emotional wellbeing. They also help our bodies to remain physically healthy, protecting our cardiovascular and musculoskeletal systems.

Our relational and restorative ethos supports students to feel safe, receive attention appropriately, gain control of aspects of their lives in healthy ways, and supports students to feel valued and respected. We have created a nurturing and supportive community, where our students can experience safe relationships with appropriate connections, have time to reflect and be alone, and opportunities to develop meaning and purpose within their lives.

We have a community that thrives on respect, and a sense of achievement and growth. Students' basic needs for food and comfort are met and they are taught about the importance of sleep and balanced nutrition and hydration. All students are actively encouraged to engage in physical exercise, with a variety of opportunities to build body confidence and personal confidence to engage.

We are actively addressing each element of the 'Suffolk Needs Met' model for physical and mental health and wellbeing. Our culture is a mentally healthy one. Our curriculum builds the skills, attitudes, aptitudes and knowledge to support our students to be active participants in their own lives, make informed decisions, and engage with society in a prosocial way.

Trauma informed principles ([Appendix A](#)), which encompass some of the 12 needs above, show us our students need

- To feel safe
- To have a calm environment
- To feel connected
- To develop a sense of community and self-efficacy
- To feel hope.

This safe community is built through our relationships, underpinned by our primary beliefs that

- I'm OK. You're OK
- Anyone can think

- Everyone can change.

## CURRICULUM OVERVIEW

### The Curriculum Intent

Our primary focus is to re-energise and engage our students so they see themselves as learners, are enabled to learn, and maximise their achievements [Believe, Engage and Achieve]

- Every student will have the opportunity to thrive , aspiring to achieve outcomes in line with their peers in mainstream school.
- Every student will have the SEND and SEMH support they need to enable them to learn
- Every student will have opportunities to broaden their physical, cultural and spiritual experiences
- Every student will build the skills they need to be successful beyond the school; at home, within mainstream, post 16 and into adulthood
- Every student will grow the connections they have within their own and the wider community, thus gaining a sense of belonging beyond the school gate

A curriculum that is flexible and responsive to need, personalised to the development **stage** of students, such that each makes accelerated progress, moving on to their next step with confidence, resilience, curiosity and commitment.

#### SEND and SEMH Support

A Nurture based approached  
Attachment and trauma informed  
ethos and pedagogy (See Appendix A)  
Challenge Learning  
Personal Training (e.g. BSE Rugby Club)  
Therapy Farms (e.g. Sunset Barn)  
Equine (e.g. Bardwell Stables, Limes Equestrian)  
Motional assessment and intervention  
Boxhall assessment and intervention  
Access to support (facilitated within school if preferred) from:

- Emotional Wellbeing Hub
- CAMHS
- Youth Justice
- Turning Point
- Early Help and Social Care

#### National Curriculum and Enrichment Offer

English, Maths, Science  
Cookery, Art  
PE  
RHSE

*Outdoor and vocational learning:*  
ASDAN

#### Skills for Life

- Core Skills (e.g. Literacy, numeracy)
- Personal (e.g self-regulation, perseverance)
- Career Skills (e.g. interpersonal, self-motivation)
- Metacognition (e.g. organisation, perception)
- Preparation for Adulthood;* education and employment, independent living, participation in society, being healthy
- 8 Gatsby Benchmarks
- Life Skills: - finance & budgeting, cookery, shopping, DIY, social skills etc.
- Character Education (Resilience, confidence, motivation, community spirit, tolerance, integrity, conscientiousness)
- Travel Training
- Healthy Living Skills, attitudes and beliefs
- Mental Wellness
- Relationships and Sex Education

#### A Differentiated and Personalised Provision

At a student level the curriculum and student experience is informed by

- The views of the child and their family and the views of the mainstream school where appropriate
- Assessment of learning need and progress towards targets
- Motional and assessments
- EHC plan and long term outcomes (where one is in place or has been applied for)
- Moving into Adulthood targets and plans
- Individual student short term developmental targets
- Academic targets

## OUR CURRICULUM: THE STUDENT EXPERIENCE

### The curriculum is designed to:

- ✓ Engage all students in learning
- ✓ Enable all students to make progress from their individual starting points, and to have successes in learning
- ✓ Focus on developing student's social, emotional and mental health
- ✓ Develop students' resilience through challenge activities
- ✓ Support all students to make healthy and safe choices
- ✓ Ensure that all students are given opportunities to broaden their cultural learning experiences through visits; in school workshops and external provider visits

In addition, in each Key Stage to:

#### Key Stage 3

- Focus on depth before breadth: having a strong curriculum focus on the facilitating subjects of literacy and numeracy
- Allow students to explore subjects beyond the core curriculum
- Support all students to develop the skills, behaviours and attitudes that will enable them to reintegrate to, and be successful in, the next phase of their education

#### Key Stage 4

- Focus on depth before breadth: having a strong curriculum focus on the facilitating subjects of English, Mathematics and Science
- Support students to make positive decisions about their future and next steps
- Enable all of our students to achieve qualifications in English, Mathematics and Science
- Ensure that all students have access to some form of work-related and/or vocational learning experience

### Accreditation

Access to Entry Level Qualifications in English, mathematics and science.  
AQA awards

English and Maths Functional Skills level 1 and level 2 qualifications  
ELC Science  
Vocational qualifications NOCN  
ASDAN

Our curriculum approach is designed to plug any educational gaps and maximise the opportunity for every student to reintegrate successfully into mainstream. At KS3 Students are placed into vertical groups based largely on the reading ages and Maths ages. This enables the teacher to follow ‘stage related expectations’ in setting targets and assessing progress. There are two pathways for students at KS3. The RESET pathway which is a 12-week programme to enable a student to reset, re-engage with learning and work with staff to identify any underlying issues posing a barrier to success. For students who may have more barriers, a second pathway is available, the READY pathway is 24–36-week programme. At KS3 students are expected to maintain contact with their mainstream home school and have at least one day a week with them. With support these days increase to enable a full reintegration based on the student’s progress.

At KS4, students follow the FOCUS pathway. This is a pathway for students who may be at risk of permanent exclusion or have not had sufficient time at school to gain GCSE qualifications but need time to gain secondary age qualifications and develop a plan for adulthood and Post-16 progression. For most students this will involve studying Functional Skills in English and Maths and the ELC in Science. Depending on the barriers to learning, students will also have the opportunity to gain further vocational qualifications.

RESET pathway KS3	READY pathway KS3	PROGRESS pathway KS4
<b>Duration:</b> 12 weeks	<b>Duration</b> 24-36 weeks	<b>Duration</b> 24-36 weeks
<b>Student Profile:</b> Will have the potential to access mainstream education following a short programme of intervention	<b>Student Profile:</b> Will have the potential to access mainstream education following a longer more intensive programme of intervention	<b>Student Profile:</b> Will have the potential to access mainstream education following a short programme of intervention
<b>Dual placement arrangement:</b> Students are dual registered and home school retains responsibilities as main school. For dual registered children, contact of at least one day will be required. For a permanently excluded child, the Family services team must provide an identified school within 6 weeks.	<b>Dual placement arrangement:</b> Students are dual registered and home school retains responsibilities as main school. Contact of a least one day a week will be required.	<b>Dual placement arrangement:</b> Students are dual registered and home school retains responsibilities as main school. Contact for optional subjects would be preferable.
<b>Albany offer:</b> Core subject support, SEMH curriculum, contextualised PSHRE and SEND/SEMH interventions	<b>Albany offer:</b> Core subject support, SEMH curriculum, contextualised PSHRE and SEND/SEMH interventions.	<b>Albany offer:</b> Core subject support, SEMH curriculum, contextualised PSHRE and SEND/SEMH interventions
<b>Aim:</b> To successfully reintegrate into mainstream	<b>Aim:</b> To successfully reintegrate into mainstream	<b>Aim:</b> To successfully progress on to Post-16 provision

## OUR ASSESSMENTS

The details of our assessments processes are in our Assessment Policy.

As students join The Albany, and during their time with us, we complete a range of assessments with them to determine their

- current academic baseline
- cognition and learning needs,
- social, emotional and mental health needs
- experiences of trauma
- sensory processing needs
- communication and interaction needs
- physical needs

These assessments inform our decision of the most appropriate pathway and classroom environment for each student.

We monitor student progress in all aspects of their development and learning, ensuring that all students leave The Albany with the knowledge, skills attitudes and values they need to be successful in the next stage of their life.

To support target setting and assessment of SEMH and academic progress, the school is developing a developmental assessment framework using Motional that will support identification of next steps for all students. In assessing students against this developmental framework, we will more accurately be able to identify the appropriate support an intervention for students.

Our detailed assessment structure that enables us to measure the SEMH progress alongside academic progress and progression in their skills for learning. If we have made good progress reducing the impact of a student’s SEMH barriers to learning and are supporting their learning needs effectively, our students will make good and at times accelerated progress from their baseline on entry, achieving outcomes that are much more in line with their peers nationally.

We will further evaluate the impact of our curriculum in the following ways:

Aim	Impact measurement
Ultimately for students to return to their mainstream setting on a full-time basis	Students to return within the timeframe of the programme
Students to make academic progress by mastering curriculum objectives based on their stage of cognitive development	Analysis of student progress data in literacy and numeracy/Maths and English Analysis of progress in reading and maths standard scores Qualifications in Core Functional Skills and ASDAN/NOCN vocational subjects
Engage all students in learning Focus on developing student’s social, emotional and mental health.	Observations of learning Student voice / parent/carer questionnaires Attendance Boxhall and Motional assessments Use of Emotional wellbeing hub and other supporting programmes SCERTs assessment Behaviour evaluations
Enable all students to make progress from their individual starting points, and to have successes in learning.	Analysis of student progress data – through our achievement tracker and Boxhall. Qualitative data on student progress (e.g. through book scrutiny and lesson observations)
Support all students to make healthy and safe choices.	Quality assurance of RSHE curriculum Observations of learning in RSHE lessons Student voice -take up of referral programmes Analysis of behaviour data – Arbor/My Concern
Develop students’ resilience through challenge activities and vocational activities.	Participation in challenge activities & vocational activities Boxhall Assessments Motional Assessments
Focus on depth before breadth: having a strong curriculum focus on the facilitating subjects of literacy and numeracy/English and mathematics.	
Support all students to develop the skills, behaviours and attitudes that will enable them to be successful in a college, apprenticeships, or a work environment.	Number of students successfully reintegrated to the next phase of their education

Please read this policy alongside our Teaching and Learning Policy, our Assessment Policy and our Recovery Curriculum Handbook.



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### 1. TRAUMATIC EXPERIENCES ARE INHERENTLY COMPLEX.

Every traumatic event - even events that are relatively circumscribed - is made up of different traumatic moments. These moments may include varying degrees of objective life threat, physical violation, and witnessing of injury or death. Trauma-exposed children experience subjective reactions to these different moments that include changes in feelings, thoughts, and physiological responses; and concerns for the safety of others. Children may consider a range of possible protective actions during different moments, not all of which they can or do act on. Children's thoughts and actions (or inaction) during various moments may lead to feelings of conflict at the time, and to feelings of confusion, guilt, regret, and/or anger afterward. The nature of children's moment-to-moment reactions is strongly influenced by their prior experience and developmental level. Events (both beneficial and adverse) that occur in the aftermath of the traumatic event introduce additional layers of complexity. The degree of complexity often increases in cases of multiple or recurrent trauma exposure, and in situations where a primary caregiver is a perpetrator of the trauma.

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### 2. TRAUMA OCCURS WITHIN A BROAD CONTEXT THAT INCLUDES CHILDREN'S PERSONAL CHARACTERISTICS, LIFE EXPERIENCES, AND CURRENT CIRCUMSTANCES.

Childhood trauma occurs within the broad ecology of a child's life that is composed of both child-intrinsic and child-extrinsic factors. Child-*intrinsic* factors include temperament, prior exposure to trauma, and prior history of psychopathology. Child-*extrinsic* factors include the surrounding physical, familial, community, and cultural environments. Both child-intrinsic and child-extrinsic factors influence children's experience and appraisal of traumatic events; expectations regarding danger, protection, and safety; and course of post trauma adjustment. For example, both child-intrinsic factors such as prior history of loss, and child-extrinsic factors such as poverty may act as vulnerability factors by exacerbating the adverse effects of trauma on children's adjustment.

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### 3. TRAUMATIC EVENTS OFTEN GENERATE SECONDARY ADVERSITIES, LIFE CHANGES, AND DISTRESSING REMINDERS IN CHILDREN'S DAILY LIVES.

Traumatic events often generate secondary adversities such as family separations, financial hardship, relocations to a new residence and school, social stigma, ongoing treatment for injuries and/or physical rehabilitation, and legal proceedings. The cascade of changes produced by trauma and loss can tax the coping resources of the child, family, and broader community. These adversities and life changes can be sources of distress in their own right and can create challenges to adjustment and recovery. Children's exposure to trauma reminders and loss reminders can serve as additional sources of distress. Secondary adversities, trauma reminders, and loss reminders may produce significant fluctuations in trauma survivors' post trauma emotional and behavioural functioning.

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### 4. CHILDREN CAN EXHIBIT A WIDE RANGE OF REACTIONS TO TRAUMA AND LOSS.

Trauma-exposed children can exhibit a wide range of post trauma reactions that vary in their nature, onset, intensity, frequency, and duration. The pattern and course of children's post trauma reactions are influenced by the type of traumatic experience and its consequences, child-intrinsic factors including prior trauma or loss, and the post trauma physical and social environments. Post-traumatic stress and grief reactions can develop over time into psychiatric disorders, including post-traumatic stress disorder (PTSD), separation anxiety, and depression. Post-traumatic stress and grief reactions can also disrupt major domains of child development, including attachment relationships, peer relationships, and emotional regulation, and can reduce children's level of functioning at home, at school, and in the community. Children's post trauma distress reactions can also exacerbate pre-existing mental health problems including depression and anxiety. Awareness of the broad range of children's potential reactions to trauma and loss is essential to competent assessment, accurate diagnosis, and effective intervention.

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### 5. DANGER AND SAFETY ARE CORE CONCERNS IN THE LIVES OF TRAUMATIZED CHILDREN.

Traumatic experiences can undermine children's sense of protection and safety and can magnify their concerns about dangers to themselves and others. Ensuring children's physical safety is critically important to restoring the sense of a protective shield. However, even placing children in physically safe circumstances may not be sufficient to alleviate their fears or restore their disrupted sense of safety and security. Exposure to trauma can make it more difficult for children to distinguish between safe and unsafe situations and may lead to significant changes in their own protective and risk-

taking behaviour. Children who continue to live in dangerous family and/or community circumstances may have greater difficulty recovering from a traumatic experience.

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## 6. TRAUMATIC EXPERIENCES AFFECT THE FAMILY AND BROADER CAREGIVING SYSTEMS.

Children are embedded within broader caregiving systems including their families, schools, and communities. Traumatic experiences, losses, and ongoing danger can significantly impact these caregiving systems, leading to serious disruptions in caregiver-child interactions and attachment relationships. Caregivers' own distress and concerns may impair their ability to support traumatized children. In turn, children's reduced sense of protection and security may interfere with their ability to respond positively to their parents' and other caregivers' efforts to provide support. Traumatic events - and their impact on children, parents, and other caregivers - also affect the overall functioning of schools and other community institutions. The ability of caregiving systems to provide the types of support that children and their families need is an important contributor to children's and families' post trauma adjustment. Assessing and enhancing the level of functioning of caregivers and caregiving systems are essential to effective intervention with traumatised youths, families, and communities.

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## 7. PROTECTIVE AND PROMOTIVE FACTORS CAN REDUCE THE ADVERSE IMPACT OF TRAUMA.

*Protective* factors buffer the adverse effects of trauma and its stressful aftermath, whereas *promotive* factors generally enhance children's positive adjustment regardless of whether risk factors are present. Promotive and protective factors may include *child-intrinsic* factors such as high self-esteem, self-efficacy, and possessing a repertoire of adaptive coping skills. Promotive and protective factors may also include *child-extrinsic* factors such as positive attachment with a primary caregiver, possessing a strong social support network, the presence of reliable adult mentors, and a supportive school and community environment. The presence and strength of promotive and protective factors - both before and after traumatic events - can enhance children's ability to resist, or to quickly recover (by resiliently "bouncing back") from the harmful effects of trauma, loss, and other adversities.

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## 8. TRAUMA AND POST TRAUMA ADVERSITIES CAN STRONGLY INFLUENCE DEVELOPMENT.

Trauma and post trauma adversities can profoundly influence children's acquisition of developmental competencies and their capacity to reach important developmental milestones in such domains as cognitive functioning, emotional regulation, and interpersonal relationships. Trauma exposure and its aftermath can lead to developmental disruptions in the form of regressive behaviour, reluctance, or inability to participate in developmentally appropriate activities, and developmental accelerations such as leaving home at an early age and engagement in precocious sexual behaviour. In turn, age, gender, and developmental period are linked to risk for exposure to specific types of trauma (e.g., sexual abuse, motor vehicle accidents, and peer suicide).

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## 9. DEVELOPMENTAL NEUROBIOLOGY UNDERLIES CHILDREN'S REACTIONS TO TRAUMATIC EXPERIENCES.

Children's capacities to appraise and respond to danger are linked to an evolving neurobiology that consists of brain structures, neurophysiological pathways, and neuroendocrine systems. This "danger apparatus" underlies appraisals of dangerous situations, emotional and physical reactions, and protective actions. Traumatic experiences evoke strong biological responses that can persist and that can alter the normal course of neurobiological maturation. The neurobiological impact of traumatic experiences depends in part on the developmental stage in which they occur. Exposure to multiple traumatic experiences carries a greater risk for significant neurobiological disturbances including impairments in memory, emotional regulation, and behavioural regulation. Conversely, ongoing neurobiological maturation and neural plasticity also create continuing opportunities for recovery and adaptive developmental progression.

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## 10. CULTURE IS CLOSELY INTERWOVEN WITH TRAUMATIC EXPERIENCES, RESPONSE, AND RECOVERY.

Culture can profoundly affect the meaning that a child or family attributes to specific types of traumatic events such as sexual abuse, physical abuse, and suicide. Culture may also powerfully influence the ways in which children and their families respond to traumatic events including the ways in which they experience and express distress, disclose personal information to others, exchange support, and seek help. A cultural group's experiences with historical or multigenerational trauma can also affect their responses to trauma and loss, their world view, and their expectations regarding the self, others, and social institutions. Culture also strongly influences the rituals and other ways through which children and families grieve over and mourn their losses.

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## 11. CHALLENGES TO THE SOCIAL CONTRACT, INCLUDING LEGAL AND ETHICAL ISSUES, AFFECT TRAUMA RESPONSE AND RECOVERY.

Traumatic experiences often constitute a major violation of the expectations of the child, family, community, and society regarding the primary social roles and responsibilities of influential figures in the child's life. These life figures may include family members, teachers, peers, adult mentors, and agents of social institutions such as judges, police officers, and child welfare workers. Children and their caregivers frequently contend with issues involving justice, obtaining legal redress, and seeking protection against further harm. They are often acutely aware of whether justice is properly served and the social contract is upheld. The ways in which social institutions respond to breaches of the social contract may vary widely and often take months or years to carry out. The perceived success or failure of these institutional responses may exert a profound influence on the course of children's post trauma adjustment, and on their evolving beliefs, attitudes, and values regarding family, work, and civic life.

## 12. WORKING WITH TRAUMA-EXPOSED CHILDREN CAN EVOKE DISTRESS IN PROVIDERS THAT MAKES IT MORE DIFFICULT FOR THEM TO **provide good care.**

Mental healthcare providers must deal with many personal and professional challenges as they confront details of children's traumatic experiences and life adversities, witness children's and caregivers' distress, and attempt to strengthen children's and families' belief in the social contract. Engaging in clinical work may also evoke strong memories of personal trauma- and loss-related experiences. Proper self-care is an important part of providing quality care and of sustaining personal and professional resources and capacities over time.

Student	Differentiated objectives	Learning Needs	<i>Evaluation?</i>

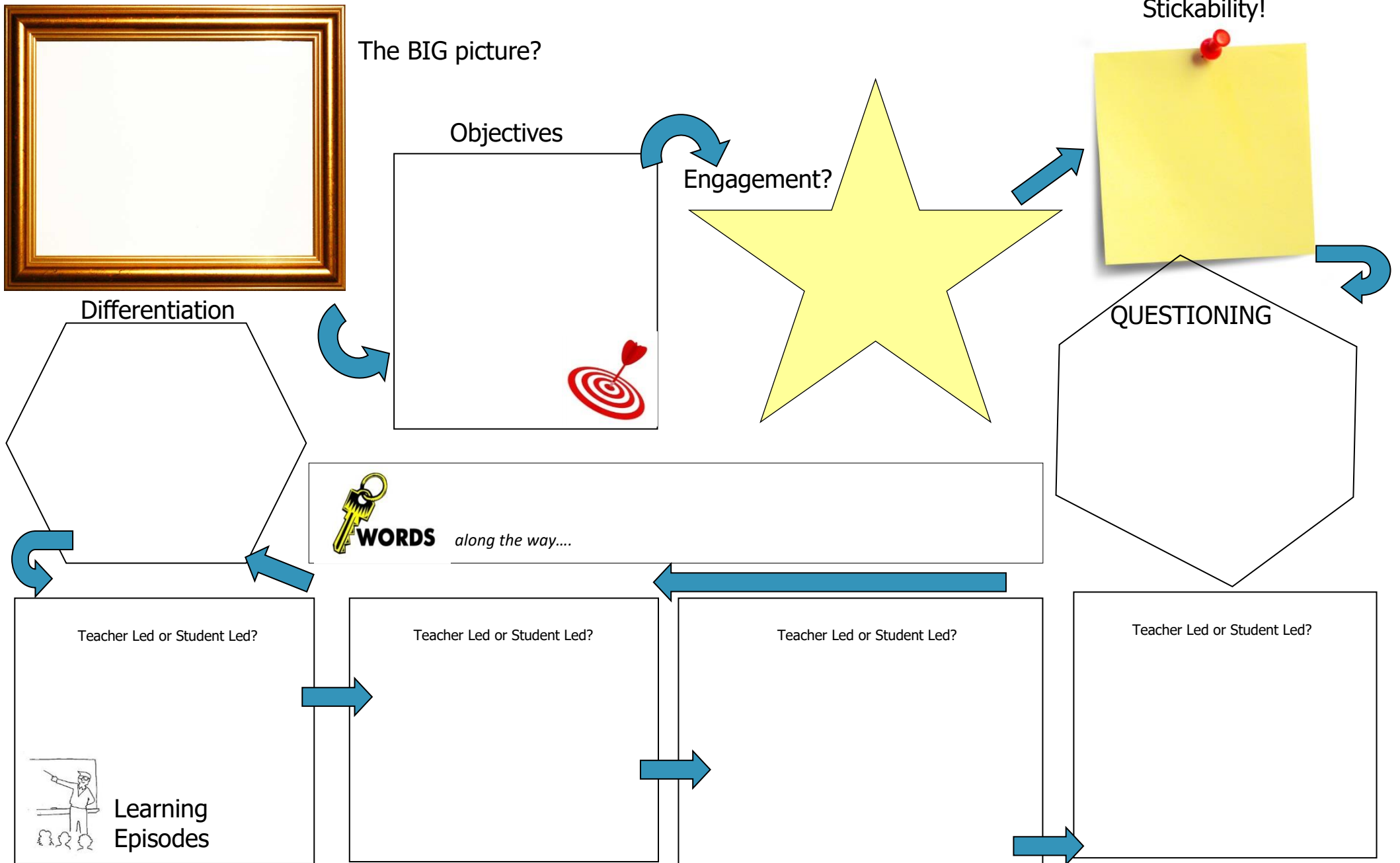
**Resources**

**Health and Safety**

**Support**



**BELIEVE  
ENGAGE  
ACHIEVE**



An example of AREs that are used as SREs to plug gaps and support stage related progress.

### KS3 AREs 'quick reference': Year 7

A student classed as **WORKING AT**:

#### READING

- ✓ Highlight, make notes, summarise key information
- ✓ Use some relevant quotations
- ✓ Use some subject terminology
- ✓ Make some comments on the effect/impact on the reader
- ✓ Make some comments on (compare) some of the writers' styles (language/structure/narrative voice)
- ✓ Make some comments on the writer's main purpose and viewpoint
- ✓ Make some comments on contextual influences

#### In WRITING

- ✓ Use basic sentence demarcation accurately (inc. speech marks)
- ✓ Mostly using Standard English
- ✓ Correctly spell: simple past/present tense endings, common plural words, common homophones
- ✓ Use the main features of form/genre/purpose
- ✓ Demonstrate a clear viewpoint
- ✓ Use the main language devices
- ✓ Write in paragraphs, in a clear order, with a clear opening and closing
- ✓ Use different types of sentences (simple, compound, complex)
- ✓ Use interesting words and words linked to topic