

REWRITING THE STORY

PHYSICAL EDUCATION IN ALTERNATIVE PROVISION

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For many young people in alternative provision, hospital schools or Child and Adolescent Mental Health Services (CAMHS) units, physical education (PE) can be the part of the curriculum that disappears first. Limited facilities, medical needs, safeguarding concerns, staffing pressures and even assumptions that students are not able or willing to participate all affect PE provision. Yet, for those young people who often experience the greatest barriers to education, movement, play and connection may be more important than ever.

Recent work by the Youth Sport Trust, Loughborough University and Leeds Beckett University is helping to shine a light on the importance of PE and school sport in alternative provision. Alongside the research, inspiring practice is emerging from settings across the country, demonstrating that, with creativity, empathy and belief, PE can thrive even in the most unexpected places. This work was spotlighted at the Youth Sport Trust's annual conference in March 2026 and this article shares some of the key insights and stories of success.

WHAT THE RESEARCH IS TELLING US

Recent research conducted by Loughborough University and Leeds Beckett University along with the Youth Sport Trust explored the role of PE in alternative provision settings, including pupil referral units (PRUs), medical alternative provision and hospital schools. The research aimed to understand the experiences of young people in these settings, the barriers practitioners face when delivering PE, and the ways schools are finding creative solutions to ensure that young people can continue to access the subject. Several key messages have emerged.

Physical education matters deeply to young people in alternative provision

Despite the complex challenges that many young people face, pupils consistently describe PE as one of the parts of the school experience that they value most. For some, it is the moment in the day when they feel most successful or most like themselves. PE can provide opportunities for enjoyment, achievement and connection that are sometimes harder to access in more traditional classroom environments.

Experiences of physical education are often mixed

Many pupils arrive in alternative provision with negative memories of PE from previous schools. Some describe feeling embarrassed, excluded or unable to succeed in competitive environments. However, the research shows that when PE is adapted and delivered in a more personalised and supportive way, pupils often re-engage quickly and positively with movement.

Listening to pupil voice is essential

An important element of the research has been capturing young people's perspectives. In alternative provision settings, pupils' voices are, perhaps, even more important, but facilitating these can require practitioners to use a range of approaches, including:

- informal conversations during activities
- reflective discussions after sessions
- creative approaches such as drawings or activity journals
- observations of engagement and behaviour during physical activity.

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These approaches allow practitioners to understand what activities feel safe, enjoyable and meaningful for each young person and help them to make sure that PE experiences are relevant and engaging.

Creativity and flexibility enable participation

Across the research, one theme appears again and again: PE in alternative provision works best when it is flexible. Practitioners adapt activities to suit limited space, smaller groups, individual health needs and fluctuating attendance. Rather than focusing solely on traditional sports, many settings focus on movement skills, cooperative activities and experiences that allow pupils to succeed. This approach helps to build confidence and often leads to pupils rediscovering enjoyment in movement. Encouragingly, the research also highlights that many schools are already developing innovative ways to ensure PE remains accessible. The following examples show how this creativity is being brought to life in practice.

PE IN A BOX – WAVE MULTI ACADEMY TRUST (DEVON AND CORNWALL)

Wave Multi Academy Trust comprises eight regional alternative provision academies, two medical academies and a special academy for pupils with social, communication and interaction needs across Devon and Cornwall. They provide support to enable pupils to reintegrate into mainstream or special schools or, in the last four terms of compulsory education, facilitate integration into the world of work or further education.

Wave reflected the national picture of provision for PE in alternative provision. Often – but not always – lacking facilities or adequate space, having teachers who might not have a specialism in PE, delivering a curriculum focused on team sports, and managing perceptions and attitudes carried over from pupils' negative prior experiences in school.

"We know it. We see it. We feel it. Across our 11 schools, we see sector-leading provision but also have academies with no outside space or timetabled PE yet. And attempts to use publicly shared facilities can be difficult. Barriers are real and what works 'somewhere' does not work 'everywhere'."

Rather than accepting this as inevitable, however, the trust decided to challenge the assumption based on the aforementioned research by the Youth Sport Trust, Loughborough University and Leeds Beckett University.

"[Since the research was published] we have appointed a PE lead, we've established and are growing a PE network of teachers (often with multiple hats and not specialists) across our 11 schools in the South West... we are engaging pupil voice... We will reach to the edges when we truly collaborate".

Lucy Holloway, Director of Education and Executive Principal

The result of Wave's work in this area was the creation of the *PE in a Box* initiative. As part of this, Wave Multi Academy Trust developed tailored kits designed to bring physical activity directly into classrooms, no matter the space, with training alongside for staff. For pupils in Medical AP, a follow up initiative was *PE in a Bag*, bringing carefully selected equipment directly into pupils' homes where, due to ill health, they were taught through outreach. Each bag contained resources: accessible and engaging equipment such as yoga mats, wobble boards, badminton sets and boules, with bags altered to reflect need. The aim was simple but powerful: remove barriers, introduce novelty and restore the fun of movement. Pupils received the equipment on loan, with the intention of exchanging kits termly to keep activities fresh and engaging.

Across the trust's two medical alternative provisions, Torland Academy and CHES Academy, the initiative has already made a significant impact, with more than 210 PE bags prepared and 86 delivered directly to pupils who are learning at home.

While formal evaluation is still developing, early feedback from staff, families and pupils has been overwhelmingly positive, with colleagues reporting increased levels of movement, opportunities for skill development and, perhaps most importantly, moments of enjoyment.

One particularly memorable example came when two Key Stage 3 pupils began setting physical challenges for one another using the equipment from their PE bags. What started as friendly competition soon led to the pupils arranging to meet up in person to play together. Movement had become the catalyst for social connection.



Alongside staff and pupils, parents/carers have also welcomed the initiative. One commented:

"The PE in a Box is a brilliant idea. It allows children to try different games and activities."

The project has not been without its challenges. Packing, delivering and managing equipment loans requires coordination and time. As the programme expands, the trust is exploring ways to strengthen logistics and secure future funding. However, the central message remains clear: PE is possible in alternative provision. With creativity and commitment, barriers can be removed and opportunities created.

PHYSICAL EDUCATION IN PAEDIATRIC HOSPITAL INPATIENT SETTINGS – MANCHESTER HOSPITAL SCHOOL

In hospital schools and CAMHS units, the context for PE can be even more complex. In this example, Denis Moran, teacher at Manchester Hospital School, shares what happens on Ward 86.

Life in Manchester Hospital School is fast paced, with daily admissions to the wards, alterations in the conditions of pupils and appointments for medication and treatment, and teachers need to be ready for the many changes to any planned day. What does an average day teaching PE on the wards at Manchester Hospital School look like? The answer is there is not an average day! As a teacher working on the wards, I have to be ready to adapt my teaching accordingly and be prepared for the many challenges that each day brings. The challenges may be great, but the rewards are even greater.

We know that the experience of being hospitalised is usually an anxiety-provoking and even traumatic experience with potentially life-changing consequences for children and their families. Many are concerned about their futures, asking themselves if they will be able to do sports and physical activity again. It is bad enough being ill, but the loss of functioning, not being able to do what you used to do, can lead to significant poor mental health. The experience of feeling different and the anticipation of a potentially permanent physical change may further exacerbate the anxiety of hospitalised children and can even derail their identity and sense of self.

Manchester Hospital School teaches Reception to Year 11 pupils who are receiving treatment for a range of medical needs. We teach highly personalised National Curriculum PE with a focus on inclusion and adaptation to enable pupils to engage in learning.

Teaching PE on hospital wards requires a great deal of thought about how to use limited space creatively: we are not in a gym or a sports hall, but use a corridor, a bedside unit or a small communal playroom. Whilst being mindful of the range of illnesses with which pupils present, we ensure equity of opportunity through adaptive teaching so that all pupils progress. Lessons need to be as engaging and energetic as possible, but considerate of other children in the vicinity. It is amazing how you can use space around a bed and the little nooks and crannies that exist up and down the ward for different activities. For pupils who are more mobile, we can use a quiet corridor that can be set

up for basketball, football or fundamental movement skills. We even have a Daily Mile route marked around the ward, encouraging pupils who are able to keep moving beyond their PE lessons.

The hospital wards present unique challenges and, as teachers, we have to be prepared for the clinical reality of a classroom where medical interventions and support are the priority. We must work around treatment regimes, testing and any other medical interventions that may take place whilst trying to keep education alive in pupils' lives. There are medical constraints that present as physical barriers, such as pupils attached to IV drips, oxygen tanks or post-surgical drains. There is also the psychological impact of hospitalisation to consider, where pupils may be not feeling well, may have fluctuating energy levels or may be struggling with significant emotions. Managing infection control brings a more serious challenge to delivery of PE as pupils may present with a broad range of pathogens, including fungi, viruses, mycobacteria, bacteria and spores such as *Clostridium difficile*. Any equipment we use has to be cleaned with Chlor-Clean, a process for disinfecting equipment, and this is part of a daily regular routine. Getting this right is critical, not only to prevent cross-infection but, more practically, because of how much time is required to source, make up and clean equipment, eating into precious teaching time.

Other considerations include 'safety fear'. Taking an overly cautious approach (often known as the 'glass child' effect) can lead to unnecessary sedentary behaviour. This requires careful risk assessment and multiagency collaboration, involving parents, pupils and skilled education staff, to build positive trusting relationships wherein pupils develop the confidence to face their fears. Manchester Hospital School's admission process allows us to establish the physical abilities of the child at the first point of contact, which then provides a baseline of where to start.

Although teaching PE on the wards at Manchester Children's Hospital can be challenging, it is simultaneously rewarding. Having a job where you aim to maintain a pupil's enthusiasm for learning, and overcoming the many barriers to learning while seeing the pupil overcome their own medical and psychological challenges, is when you realise you have the best job in the world and that it is a privilege to do what we do.

"Exercise is not just safe; it is a medicine that improves treatment tolerance and long-term quality of life for children with complex illnesses." – Adapted from

ScienceDirect: Exercise as Medicine in Chronic Diseases

PRACTICAL IDEAS: LESSONS FOR PHYSICAL EDUCATION PRACTITIONERS

From the research and practitioners' experience, we have identified four key messages that can help PE to thrive in alternative provision. These are also transferable to mainstream settings.

Start with relationships

Trust and safety are the foundations of meaningful participation. Building positive, respectful relationships with pupils is essential and small, everyday actions can make a big difference. Actively engaging in activities with pupils, finding opportunities to check-in through informal

conversations and avoiding confrontational behaviours – such as shouting – help to create safe and supportive environments where pupils feel seen and valued.

Centre pupil voice

Listening to pupils is crucial. Gathering feedback through conversations, reflections and observation enables practitioners to understand what pupils enjoy, what motivates them and what challenges them. These small but powerful insights can shape activities that feel relevant, meaningful and accessible, building ownership and enhancing engagement.

Be creative with space and equipment

Space constraints do not need to limit participation. Corridors, gardens and classrooms can all be reimaged as places for movement. Portable, low-cost equipment and simple resources can open up new opportunities for activity. With a flexible mindset, PE can happen in all sorts of places.

Focus on success and enjoyment

Many pupils in alternative provision – and those on the margins in mainstream – have experienced limited success in PE. Creating opportunities where they can feel competent, have fun and achieve small wins is vital. Celebrating progress, however modest, can help to rebuild confidence and foster motivation, encouraging a positive relationship with movement.

LOOKING AHEAD

The research from Loughborough University and Leeds Beckett University highlights the need for greater support for PE in alternative provision settings. This includes the provision of adequate space, facilities and equipment for PE as well as improved access to professional learning, resources and partnerships that can help practitioners to deliver inclusive and meaningful experiences (Maher *et al.*, 2025a, 2025b; Quarmby *et al.*, 2025). At the same time, the stories from schools such as Wave Multi Academy Trust and Manchester Hospital School demonstrate what is already possible, even where circumstances might be challenging. Indeed, across the country, educators are reimagining PE in ways that prioritise empathy, creativity and opportunity. The message for our profession is, therefore, a hopeful one. One that shows that, even in the most unlikely environments, PE can thrive. And for the young people who need it most, those moments of movement, connection and success can make all the difference. ■

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