



Making Social Care  
Better for People

# inspection report

Residential Special School (not registered as  
a Children's Home)

## **Holbrook Centre for Autism**

Port Way

Holbrook

Belper

Derbyshire

DE56 0TE

14th March - 17th March 2005

## Commission for Social Care Inspection

Launched in April 2004, the Commission for Social Care Inspection (CSCI) is the single inspectorate for social care in England.

The Commission combines the work formerly done by the Social Services Inspectorate (SSI), the SSI/Audit Commission Joint Review Team and the National Care Standards Commission.

### The role of CSCI is to:

- Promote improvement in social care
- Inspect all social care - for adults and children - in the public, private and voluntary sectors
- Publish annual reports to Parliament on the performance of social care and on the state of the social care market
- Inspect and assess 'Value for Money' of council social services
- Hold performance statistics on social care
- Publish the 'star ratings' for council social services
- Register and inspect services against national standards
- Host the Children's Rights Director role.

## Inspection Methods & Findings

SECTION B of this report summarises key findings and evidence from this inspection. The following 4-point scale is used to indicate the extent to which standards have been met or not met by placing the assessed level alongside the phrase "Standard met?"

### The 4-point scale ranges from:

- 4 - Standard Exceeded (Commendable)
- 3 - Standard Met (No Shortfalls)
- 2 - Standard Almost Met (Minor Shortfalls)
- 1 - Standard Not Met (Major Shortfalls)

'O' or blank in the 'Standard met?' box denotes standard not assessed on this occasion.

'9' in the 'Standard met?' box denotes standard not applicable.

'X' is used where a percentage value or numerical value is not applicable.

<b>SCHOOL INFORMATION</b>
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**Name of School**

Holbrook Centre for Autism

**Address**

Port Way, Holbrook, Belper, Derbyshire, DE56 0TE

**Tel No:**

01332 880208

**Fax No:**

**Email Address:**

**Name of Governing body, Person or Authority responsible for the school**

Derbyshire County Council

**Name of Head**

David Heald

**CSCI Classification**

Residential Special School

**Type of school**

Residential Special  
School

**Date of last boarding welfare inspection:**

12/01/04
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<b>Date of Inspection Visit</b>		14th March 2005	<b>ID Code</b>
<b>Time of Inspection Visit</b>		09:00 am	
<b>Name of CSCI Inspector</b>	<b>1</b>	Katarina Djordjevic	074488
<b>Name of CSCI Inspector</b>	<b>2</b>	Nancy Bradley	136454
<b>Name of CSCI Inspector</b>	<b>3</b>	Susan Clarke, Pharmacy Inspector	155508
<b>Name of CSCI Inspector</b>	<b>4</b>		
<b>Name of Boarding Sector Specialist Inspector (if applicable):</b>			
<b>Name of Lay Assessor (if applicable)</b> Lay assessors are members of the public independent of the CSCI. They accompany inspectors on some inspections and bring a different perspective to the inspection process.			
<b>Name of Specialist (e.g. Interpreter/Signer) (if applicable)</b>			
<b>Name of Establishment Representative at the time of inspection</b>		Mr David Heald, Ms Caroline Bell & Ms Kelly Belcher	

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## INTRODUCTION TO REPORT AND INSPECTION

Residential Special Schools are subject to inspection by the Commission for Social Care Inspection (CSCI) to determine whether the welfare of children (i.e. those aged under 18) is adequately safeguarded and promoted while they are accommodated by the school.

Inspections assess the extent to which the school is meeting the National Minimum Standards for Residential Special Schools, published by the Secretary of State under Section 87C of the Children Act 1989, and other relevant requirements of the Children Act 1989 as amended. Residential Special Schools are not registered as children's homes unless they accommodate, or arrange accommodation for, one or more children for more than 295 days a year.

This document summarises the inspection findings of the CSCI in respect of the Holbrook Centre for Autism

The report follows the format of the National Minimum Standards and the numbering shown in the report corresponds to that of the standards.

The report will show the following:

- Inspection methods used
- Key findings and evidence
- Overall ratings in relation to the standards
- Recommended action by the school
- Advisory recommendations on boarding welfare
- Summary of the findings
- Report of the lay assessor (where relevant)
- The Head's response and proposed action plan to address findings

## INSPECTION VISITS

Inspections are undertaken in line with the agreed regulatory framework under the Care Standards Act 2000 and the Children Act 1989 as amended, with additional visits as required.

The report represents the inspector's findings from the evidence found at the specified inspection dates.

## **BRIEF DESCRIPTION OF THE SCHOOL AND RESIDENTIAL PROVISION**

The Holbrook Centre for Autism is run by the Local Education Authority and provides specialist education and care for students with Autism, Severe Learning Difficulties and Challenging Behaviour aged between 5 and 19. It is situated in a rural location.

The residential provision has 9 places. It can be accessed by students for up to four nights a week in term time dependent on the individual's assessed needs. There are two units, one on the first floor and the other on the second floor which both have their own lounge, small kitchen and bathing and toilet facilities. There is an additional lounge/music room, which can be accessed by students using both units. Residential students use the school hall/dining hall for some of their meals.

All bedrooms were single.

There is a sensory room, library and other activity rooms/areas.

## **PART A SUMMARY OF INSPECTION FINDINGS**

### **WHAT THE SCHOOL DOES WELL IN BOARDING WELFARE**

This inspection has identified the continued commitment and hard work by the whole staff team in providing a high quality of service based on individual assessed needs. Staff presented as enthusiastic and very knowledgeable about the complex needs of individual students.

There was a relaxed atmosphere throughout this inspection.

Residential, education and ancillary staff worked well together with positive outcomes for the students.

Evidence from the inspection supported the Inspectors' view that students were given excellent support to meet their communication needs. There were many examples of initiatives implemented to support students in making day to day choices/decisions and increasing their communication skills. These include the development of the Communications Officer and the recently established Pupil Council.

Evidence supported that staff were skilled in managing the difficult behaviours presented by some students. Physical intervention clearly was used as a last resort. Records of incidents of physical intervention supported this and were considered by the Inspectors, to be low. This is testament to the skills of the staff team.

Students were enabled to routinely access community facilities despite the behavioural difficulties that they can present. Staff are to be commended for their hard work and commitment.

The Inspectors considered that the catering and provision of meals were managed to a high standard.

#### **WHAT THE SCHOOL SHOULD DO BETTER IN BOARDING WELFARE**

- Improvements should be made to the system for the administration and storage of medication.
- Improvements should be made to students' care records to ensure a holistic care plan and risk assessment is in place for each student.
- All policies and procedures and records must be signed and dated by the author.
- Doors should not be wedged open. This practice must cease immediately. The Head Teacher may wish to consider the fitting of self-closure devices but should consult with the Fire Officer on this matter.
- Environmental risk assessments should be completed.
- Further improvements to the school's recruitment practices should be made. Staff without a satisfactory CRB check must not work unsupervised with students.

#### **CONCLUSIONS AND OVERVIEW OF FINDINGS ON BOARDING WELFARE**

Excellent progress has been made in addressing the Recommendations made in the last announced inspection report. The Inspectors consider that this success, which has been ably lead by the Deputy Head Teacher and Head of Care, is testament to the commitment of the whole staff team. The whole staff team are to be commended for their continued commitment and hard work in providing a high level service. The school's management team continue to effectively lead the team in an open and responsive environment.

The Inspectors' findings confirmed that students' needs were being met. The students appeared content and looked well cared for. They obviously enjoyed the activities they participated in.

This was the first time that the school had been inspected by a specialist Pharmacist Inspector of the Commission for Social Care Inspection. A number of improvements are required to meet National Minimum Standards.

The Head Teacher should ensure that staff who start work without having received a satisfactory CRB check, do not work unsupervised.

Questionnaires were sent out to all students' Parents, Placing Officers and staff. Feedback from parents was also very positive and considered the care to be excellent. The feedback demonstrated a gratitude for the level of care and commitment provided by the staff team. Parents reported that staff were always approachable and professional and that communication from staff at the school was very good.

Feedback from staff both verbally and from the questionnaires confirmed that staff were well supported by the management team and that they felt valued.

The majority of Recommendations made in this report are considered to be areas, which mainly need minor improvements.



## RECOMMENDED ACTIONS IDENTIFIED FROM THIS INSPECTION

**Action Plan: The Head is requested to provide the Commission with an Action Plan, which indicates how recommended actions are to be addressed. This action plan will be made available on request to the Area Office.**

<b>RECOMMENDED ACTION</b>			
Identified below are the actions recommended on issues addressed in the main body of the report in order to safeguard and promote the welfare of boarders adequately in accordance with the National Minimum Standards for Residential Special Schools. The references below are to the relevant Standards. Non-implementation of recommended action can lead to future statutory notification of failure to safeguard and promote welfare.			
No	Standard*	Recommended Action	
1	RS1	The school should produce a Children’s Guide in a suitable format.	31.12.05
2	RS3	The school’s policy on when it may be necessary to search a student ‘s possessions should include the requirement to record details of all searches undertaken as detailed in Standard 3.11.	01.09.05
3	RS4	<p>The following improvements should be made to the school’s complaints procedure:</p> <ol style="list-style-type: none"> <li>1. Records of complaints should clearly state the outcome of the investigation and if the complaint was substantiated or not.</li> <li>2. The Complaints leaflet produced by the school itself (and not Derbyshire County Council) should include the contact number of the local CSCI and should make it clear that parents/carers can contact the Commission for Social Care Inspection directly.</li> </ol>	01.09.05
4	RS5	The school’s Child Protection policy should include reference to the need to notify the CSCI of any child protection enquiries involving the school, as required in Appendix 1 of the National Minimum Standards.	31.07.05
5	RS8	The school’s policy on absconding should include points 2, 4 & 5 of Standard 8.3.	30.09.05

6	RS13	Individual student risk assessments should be completed to identify any risks presented by participation in leisure activities.	31.07.05
7	RS14	The strength of all medications should be recorded on the school medicine records. This includes tablets, capsules, liquids and cream preparations.	16.05.05
8	RS14	The dose of all medication to be administered at each administration time should be recorded on the school medicine records. This includes prescribed and non-prescribed medications.	16.05.05
9	RS14	The name of the medication printed on the pharmacy-dispensing label should be the name used on the medication records.	16.05.05
10	RS14	The full name and strength of any non-prescribed medications provided by parents should be recorded.	16.05.05
11	RS14	The school should request parents not to alter medication labels.	30.06.05
12	RS14	Medication should not be mixed in food or drinks unless the school has a written statement from the prescribing doctor that this is necessary for that student and safe to mix with the foodstuffs concerned.	30.06.05
13	RS14	The first-aid training received by staff should include first aid for children of the age group in the school.	30.06.05
14	RS14	The Local Education Authority should clarify the issue regarding responsibility for medication when students travel to and from school by taxi.	31.07.05
15	RS17	Improvements should be made to students' care records to ensure a holistic care plan and risk assessment based on assessed needs is in place for each student using the residential provision. The plan should give clear details on how the needs will be met and by whom.	01.09.05
16	RS17	Care plans should be reviewed regularly and amended as necessary to reflect significant changes in the student 's needs or progress in his/her development.	01.09.05
17	RS17	The night time recording records should be reviewed to ensure student confidentiality and should be signed and dated by the author.	31.05.05
18	RS18	Written entries in the student's file/s should be signed, dated and the name of the signatory clearly identified.	16.05.05

19	RS19	The Local Education Authority should ensure that a personnel file for all staff including catering staff with the information detailed in Standard 19.2 is kept at the school.	31.07.05
20	RS19	The school should retain copies of menus as served for the past year.	31.07.05
21	RS24	The loose roof tiles should be repaired/replaced. <b>This is repeated from the last announced inspection report.</b>	30.06.05
22	RS24	The window frames should be made good/replaced. <b>This is repeated from the last announced inspection report.</b>	01.09.05
23	RS24	Improvements should be made to the lighting in Oak and Acorn lounges. <b>This is repeated from the last announced inspection report.</b>	31.05.05
24	RS24	All bedrooms should have seating. Where it is identified that the student does not require a chair, this should be documented in the student 's care records.	31.07.05
25	RS25	Regular testing of the hot water temperatures of all hot water outlets used by the students should be carried out and records kept.	20.04.05
26	RS26	Doors should not be wedged open. This practice must cease immediately. The Head Teacher may wish to consider the fitting of self-closure devices but should consult with the Fire Officer on this matter.	31.03.05
27	RS26	A Legionella risk assessment on the water system should be carried out.	01.09.05
28	RS26	Environmental risk assessments should be completed within the timescale given.	30.06.05
29	RS27	Improvements to the schools recruitment practices should be made to address points 1- 3 detailed in the main text and to ensure compliance with Standard 27.	31.05.05
30	RS30	New staff should receive one to one supervision at least fortnightly during the first two terms of their employment. Records of these sessions should be kept.	30.06.05
31	RS32	The system devised to monitor and sign all records as detailed in Standard 32.2 should be implemented.	30.09.05

## ADVISORY RECOMMENDATIONS

Identified below are advisory recommendations on welfare matters addressed in the main body of the report and based on the National Minimum Standards, made for consideration by the school.

No	Refer to Standard*	Recommendation
1	RS4	All complainants should receive a letter of acknowledgement and a letter giving details of the outcome of the investigation.
2	RS13	It is recommended that daily handover sessions are implemented between education and care staff, before school and after school.
3	RS14	The record of medication received into the school should include the quantity of medication received and be signed by the member of staff.
4	RS14	Medication dispensed into a bottle by the supplying pharmacist should not be used after six months from the date of dispensing.
5	RS17	Daily logs should be kept for each student using the Residential Unit. Recording should be reflective of needs identified and targets set in the student's care plan.
6	RS18	The school should provide a 'Working file' for students in the Residential Unit to ensure that the required information detailed in Standard 18.2 is easily accessible.
7	RS29	Further improvements should be made to the recording of the induction process for new staff.
8	RS30	Supervision records should include checking progress on agreed actions made in previous sessions.
9	RS30	All staff should be given copies of their supervision records.
10	RS31	The Head of Care should receive additional and appropriate training to develop further her management skills.

Note: You may refer to the relevant standard in the remainder of the report by omitting the 2-letter prefix. E.g. RS10 refers to standard 10.

**PART B****INSPECTION METHODS AND FINDINGS**

The following inspection methods were used in the production of this report

Direct Observation	YES
Pupil Guided Tour of Accommodation	NO
Pupil Guided Tour of Recreational Areas	NO
Checks with other Organisations	
• Social Services	YES
• Fire Service	YES
• Environmental Health	YES
• DfES	NO
• School Doctor	YES
• Independent Person	YES
• Chair of Governors	YES
Tracking individual welfare arrangements	YES
Survey / individual discussions with boarders	NO
Group discussions with boarders	NO
Individual interviews with key staff	YES
Group interviews with House staff teams	NO
Staff Survey	YES
Meals taken with pupils	YES
Early morning and late evening visits	YES
Visit to Sanatorium / Sick Bay	YES
Parent Survey	YES
Placing authority survey	YES
Inspection of policy/practice documents	YES
Inspection of records	YES
Individual interview with pupil(s)	NO
Answer-phone line for pupil/staff comments	NO

Date of Inspection

14/03/05
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Time of Inspection

09.30
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Duration Of Inspection (hrs.)

57
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Number of Inspector Days spent on site

6
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**Pre-inspection information and the Head's Self evaluation Form, provided by the school, have also been taken into account in preparing this report.**

## SCHOOL INFORMATION

**Age Range of Boarding Pupils**      **From**       **To**

### NUMBER OF BOARDERS AT TIME OF INSPECTION:

**BOYS**     

**GIRLS**     

**TOTAL**     

**Number of separate Boarding Houses**     

The following pages summarise the key findings and evidence from this inspection, together with the CSCI assessment of the extent to which standards have been met. The following scale is used to indicate the extent to which standards have been met or not met by placing the assessed level alongside the phrase "Standard met?"

The scale ranges from:

- |                         |                    |
|-------------------------|--------------------|
| 4 - Standard Exceeded   | (Commendable)      |
| 3 - Standard Met        | (No Shortfalls)    |
| 2 - Standard Almost Met | (Minor Shortfalls) |
| 1 - Standard Not Met    | (Major Shortfalls) |

"0" in the "Standard met" box denotes standard not assessed on this occasion.

"9" in the "Standard met" box denotes standard not applicable.

"X" is used where a percentage value or numerical value is not applicable.

## STATEMENT OF THE SCHOOL'S PURPOSE

The intended outcome for the following standard is:

- Children, parents, staff and placing authorities have access to a clear statement of the school's care principles and practice for boarding pupils.

### Standard 1 (1.1 – 1.9)

The school has a written Statement of Purpose, which accurately describes what the school sets out to do for those children it accommodates, and the manner in which care is provided. The Statement can be made up of other documents, e.g., Letter of Approved Arrangements and school prospectus, which are required to include specific information.

Key Findings and Evidence	Standard met?	2
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The school's 'Statement of Purpose' has been reviewed since the last announced inspection, which involved staff and Governors. An inspection of the 'Statement of Purpose' identified that it meets this Standard. The Head Teacher reported in the Pre-Inspection questionnaire that they are looking at ways of making the information accessible to students.

Evidence from this inspection supported that the school meets the needs of students admitted.

The Head Teacher reported that the school are in the process of trying to produce a Children's Guide in a format accessible to the students. The Inspectors discussed with the school alternative formats for the Children's Guide such as a video diary.

## CHILDREN'S RIGHTS

The intended outcomes for the following set of standards are:

- Children are encouraged and supported to make decisions about their lives and to influence the way that the school is run. No child should be assumed to be unable to communicate their views.
- Children's privacy is respected and information about them is confidentially handled.
- Children's complaints are addressed without delay and children are kept informed of progress in their consideration.

### Standard 2 (2.1 – 2.9)

Children's opinions, and those of their families or significant others, are sought over key decisions which are likely to affect their daily life and their future. Feedback is given following consultations.

Key Findings and Evidence	Standard met?	4
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The findings of this inspection support that every effort is made to involve students wherever possible in decision making, not only the day to day lives of students but in long term planning. The majority of students have severe communication difficulties, which potentially makes it difficult to obtain their views, opinions and choices. However, the Inspectors findings supported that staff are skilled in working with students with such difficulties and have developed methods of alternative forms of communication. The Picture Exchange Communication System (PECS) was used for students to communicate and exercise their choice as much as possible in daily living. All staff were very skilled at communicating with the students. The Inspectors were pleased to observe the interaction/communication between students and the catering staff. Since the last announced inspection one of the care staff have taken on the role of Communications Officer. Her remit is to develop further PECs boards to increase opportunities for students to express their views, make choices and decisions and to ensure consistency between care and education staff. The Communications Officer meets weekly with the Deputy Head Teacher to discuss progress and identify any difficulties.

There was evidence of good communication with students' parents, and significant others. Home- School Link books were used for each student which appeared to work well. Parents were invited to attend Individual Education Plan meetings and Annual Reviews. The school had policies and procedures for contacting students' families.

A Pupil Council has recently been established and has met twice. Minutes of these meetings were kept and seen by the Inspectors. The minutes were in pictorial form.

The Inspectors considered this and the development of the Communications Officer excellent initiatives.

**Standard 3 (3.1 – 3.11)**

**The school and staff respect a child's wish for privacy and confidentiality so far as is consistent with good parenting and the need to protect the child.**

**Key Findings and Evidence**

**Standard met?**

**2**

There were policies and procedures on privacy and confidentiality, which covered all points of Standard 3.2. A Lone Working Policy has been produced since the last announced inspection.

Practice observed by the Inspectors confirmed that every effort is made to maintain a student's privacy and dignity whilst at the same time encouraging independence. Staff demonstrated sensitivity in dealing with personal care issues. Students were able to choose who assisted them with personal care and activities. A male carer has been appointed to work as a waking night care assistant since the last announced inspection. The Inspectors noted that individual holistic risk assessments had not been including regarding bathing. (A recommended action has been made later in this report for the school to provide holistic risk assessments.)

A policy has been produced since the last announced inspection on when it may be necessary to search a student's possessions. However, it did not include the need to record details of the search as required in Standard 3.11.

**Standard 4 (4.1 - 4.8)**

**Children know how and feel able to complain if they are unhappy with any aspect of living in the school, and feel confident that any complaint is addressed seriously and without delay.**

**Key Findings and Evidence**

**Standard met?**

**2**

An inspection of the complaints policy identified that the school had developed its own internal Complaints procedure which has resulted in the following improvements:

- The new complaints record showed that complaints were investigated promptly and there were detailed records of discussions.
- A 'Queries' file had been set up and maintained in the Residential Unit. These were records of minor concerns or instructions received from parents/carers.
- Residential staff had recently received training.

However, the following issues were noted:

- The records did not indicate if the complaint was substantiated/resolved and if the complainant was satisfied with the outcome. There were no letters of acknowledgement of complaints received and letters regarding the final outcome.
- The Complaints leaflet produced by the school itself (and not Derbyshire County Council) did not include the contact number of the local CSCI and did not make it clear that parents/carers can contact the Commission for Social Care Inspection directly.
- The Inspectors were unclear how students/parents were informed about the Commission for Social Care Inspection.

There was also the Derbyshire County Council Complaints procedure, which was accessible.

**Number of complaints about care at the school recorded over last 12 months:**

**Number of above complaints substantiated:**

**Number of complaints received by CSCI about the school over last 12 months:**

**Number of above complaints substantiated:**

## CHILD PROTECTION

The intended outcomes for the following set of standards are:

- The welfare of children is promoted, children are protected from abuse, and an appropriate response is made to any allegation or suspicion of abuse.
- Children are protected from bullying by others.
- All significant events relating to the protection of children accommodated in the school are notified by the Head of the school to the appropriate authorities.
- Children who are absent without authority are protected in accordance with written guidance and responded positively to on return.

### Standard 5 (5.1 - 5.12)

There are systems in place in the school which aim to prevent abuse of children and suspicions or allegations of abuse are properly responded to. These are known and understood by all staff (including junior, ancillary, volunteer and agency staff).

#### Key Findings and Evidence

#### Standard met?

2

The school's Child Protection policy had been reviewed since the last announced inspection. The Head Teacher reported that the policy was with the ACPC for their consideration. The new policy was seen by one of the Inspectors. However, it did not make any reference to the need to notify the CSCI as required in Appendix 1 of the National Minimum Standards.

Most staff have had Child Protection training provided by the LEA's Child Protection trainer. Ancillary staff had been given the opportunity to attend the training but not all staff had attended. Some staff were due to attend Level 2 Child Protection training. The Head Teacher had recently attended a conference 'Protecting children who cannot tell'.

This inspection identified concerns about the care received at home of a child. The Inspectors discussed this with the Head Teacher who agreed there was a need for a Child Protection referral.

**Number of recorded child protection enquiries initiated by the social services department during the past 12 months:**

0

**Standard 6 (6.1 - 6.5)**

The school has, and follows, an anti-bullying policy, with which children and staff are familiar and which is effective in practice. Where possible children in the school contribute to the development of the policy.

**Key Findings and Evidence**

**Standard met?**

3

The school's draft Anti-Bullying procedure had been approved by the school Governors and finalised since the last announced inspection. This met this Standard. A new format had also been produced to identify issues/behaviour, which may lead to bullying. As part of being pro-active in anti-bullying strategies, the school have developed individual positive handling plans. These were monitored by the Head Teacher and the Standard 33 visitor.

The students in residence had many behaviour difficulties and might target other students without this being conscious bullying behaviour. Supervision levels were high, behaviour plans were in place and staff were able to respond quickly and effectively if behaviours became inappropriate.

**Percentage of pupils reporting never or hardly ever being bullied**

X %

**Standard 7 (7.1 - 7.7)**

All significant events relating to the protection of children in the school are notified by the Head of the school or designated person to the appropriate authorities.

**Key Findings and Evidence**

**Standard met?**

3

The school had a written policy on Notifications.

**NUMBER OF THE FOLLOWING NOTIFIED TO CSCI DURING THE LAST 12 MONTHS:**

- **conduct by member of staff indicating unsuitability to work with children**
- **serious harm to a child**
- **serious illness or accident of a child**
- **serious incident requiring police to be called**

0
0
0
0

<b>Standard 8 (8.1 - 8.9)</b>		
The school takes steps to ensure that children who are absent from the school without consent are protected in line with written policy and guidance.		
<b>Key Findings and Evidence</b>	<b>Standard met?</b>	<b>2</b>
Staffing and supervision levels were high and the students had little opportunity to go missing. However, the school had a policy on absconding. The policy did not include reference to points 2, 4 and 5 of Standard 8.3. The school uses the Derbyshire Police Missing Person's form. The forms seen by the Inspectors were fully completed and included a photograph. The Head Teacher reported that they work closely with the police.		
<b>Number of recorded incidents of a child running away from the school over the past 12 months:</b>		<b>0</b>

## CARE AND CONTROL

The intended outcomes for the following set of standards are:

- Children have sound relationships with staff based on honesty and mutual respect.
- Children are assisted to develop appropriate behaviour through the encouragement of acceptable behaviour and constructive staff response to inappropriate behaviour.

### Standard 9 (9.1 - 9.8)

Relationships between staff and children are based on mutual respect and understanding and clear professional and personal boundaries which are effective for both the individuals and the group.

Key Findings and Evidence	Standard met?	3
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The school had policies and procedures, which gave clear guidelines and boundaries for staff working with students. An inspection of documentation and observation of practices confirmed that relationships between staff and students were based on respect. Feedback from parents was positive about the relationships between staff and their children. There was clearly a strong commitment from all staff who demonstrated patience and understanding of students' needs. Staffing levels were good at the time of this inspection. Deployment of staff enabled students to exercise choice and independence as much as possible.

**Standard 10 (10.1 - 10.26)**

**Staff respond positively to acceptable behaviour, and where the behaviour of children is regarded as unacceptable by staff, it is responded to by constructive disciplinary measures which are approved by the Head of Care.**

**Key Findings and Evidence**

**Standard met?**

**3**

The school had policies and procedures on the following: Behaviour Management; Physical Intervention; Sanctions.

Since the last announced inspection the school have adopted TEAM TEACH as their preferred method of physical intervention. All staff had received training. Training was also offered to ancillary & catering staff. The Inspectors' findings concluded that the use of physical intervention was minimal. Records demonstrated appropriate and regular use of diversion/distraction techniques. However, the new physical intervention forms did not always make it clear where the incident had taken place. There were 'Support and Intervention Plans' for individual students which were followed by both education and residential staff.

An inspection of the physical intervention & sanctions records confirmed that Standard 10.9 and 10.14 were met. There was also documentary evidence of effective monitoring by Head Teacher and the Standard 33 visitor.

There was evidence of students having opportunity to discuss incidents.

Regular Residential staff meetings are now being held and students' progress and behaviour is discussed.

The school had a copy of the LEA's draft Exclusion policy. However, the Head Teacher reported that there had not been the need to exclude any pupils.

## QUALITY OF CARE

The intended outcomes for the following set of standards are:

- Children experience planned and sensitively handled admission and leaving processes.
- The school's residential provision actively supports children's educational progress at the school.
- Children have ample opportunity to engage in purposeful and enjoyable activities both within school and in the local community.
- Children live in a healthy environment and the health and intimate care needs of each child are identified and promoted.
- Children are provided with healthy, nutritious meals that meet their dietary needs.
- Children wear their own clothing outside school time, can secure personal requisites and stationery while at school, and are helped to look after their own money.

### Standard 11 (11.1 - 11.6)

Admission and leaving processes are planned and agreed with the child – and as appropriate, with parents and carers and placing authorities – as far as possible and handled with sensitivity and care by those concerned.

Key Findings and Evidence	Standard met?	3
<p>There was a Local Education Authority procedure for admission to Special Schools. The school Prospectus gave details of the admission policy. The school had produced a written procedure for staff to follow when introducing new students to the residential unit, since the last announced inspection.</p> <p>The Head Teacher reported that he did not have ultimate control on admissions and circumstances regarding final decisions remains with the Local Education Authority. The Head Teacher also reported that there were occasions where the school was not provided with sufficient background information for students being admitted</p> <p>There was also documentary evidence to support that the school worked closely with other relevant agencies such as Connexions. The Inspectors were pleased to note that some students went out on Work Placements.</p>		

**Standard 12 (12.1 - 12.7)**

**Care staff and the school's residential provision and activities actively contribute to individual children's educational progress, and care staff actively support children's education, ensuring regular attendance, punctuality and a minimum of interruption during the school day.**

**Key Findings and Evidence**

**Standard met?**

3

There was a written policy outlining residential contribution to education, which clearly stated the residential provision is based on the 24 hour curriculum. Activities were based on individual's identified learning needs to acquire daily living skills. The Inspectors observed students participating in games, which helped develop their skills. Since the last announced inspection, the older students now prepare some evening meals in the residential unit which also involves them shopping for the ingredients. and participating in cooking. Students accessed community resources as part of their learning.

There was evidence to support that residential staff and education staff worked well together. The Head of Care reported that she met regularly with teaching staff. The Deputy Head Teacher continues to work on the residential Unit every Tuesday evening, which allows residential key workers to meet with education staff. However, staff identified the need for improved communication, in particular formal handover sessions between education and care staff. This would improve consistency of care and ensure confidentiality.

Teaching staff confirmed that they met with students' key workers before the Individual Education Plan meetings.

**Standard 13 (13.1 - 13.9)**

**Children have ample opportunity to engage in purposeful and enjoyable activities both within the school and in the local community.**

**Key Findings and Evidence**

**Standard met?**

**2**

The score of 2 has been given, as individual risk assessments for activities have not been fully completed. However, the Inspectors do not consider that the score reflects the high level of service provided in this area.

Documentary evidence and observations by the Inspectors supported that students were given a range of activities based on both individual needs and group needs. Students were provided with opportunities to learn new skills including accessing community activities/resources. Students were also given opportunities to experience other cultural and religious festivals.

The Inspectors saw evidence of student involvement in projects in the school. The students had been instrumental in developing a Sensory garden, which was near completion and was due to be opened by the Duchess of Devonshire. Two of the older students had planted the gardens around the bungalow, which is used as the post 16 education unit.

There was evidence to support that there was a balance between free time for students and organised activities. A range of indoor and outdoor activities was provided based on individual and group needs. The Inspectors noted that the challenging behaviours often presented by students did not prohibit them from using community leisure facilities. Staff are to be commended for this.

The Inspectors were informed that some students using the residential provision went on holiday supported by residential staff in May 2004.

Individual risk assessments in relation to activities were in the process of being developed.

**Standard 14 (14.1 - 14.25)**

The school actively promotes the health care of each child and meets any intimate care needs.

**Key Findings and Evidence****Standard met?**

1

This was the first time that the school had been inspected by a specialist Pharmacist Inspector of the Commission for Social Care Inspection. The medication records and medication for two students were examined. These were seen to be generally in good order. Medication on each Residential Unit was stored in a locked metal cupboard. A file on each Residential Unit held the school medicine records for the students on that unit. There was a named photograph of the students with their medication records. For each student there was a form signed by a parent listing the prescribed medication to be administered to that student. This form also listed any non-prescribed preparations that a parent provided and wanted to be administered either regularly or when needed. These forms were seen to be up-to-date. Dated records of medication received into the school for each student were made. These did not include the quantity of medication received and were not always signed.

A separate sheet of paper was used to record the administration of each medication that a young person received. The name of the medication and the times when it was to be administered had been printed on this sheet. The strength of the medication and the dose to be administered had not been recorded. The name of the medication on the printed sheet and the name on the medication label were different for a number of medications. The Pharmacist Inspector discussed with staff the difference between the 'brand' and 'drug' name of medications. The medication records seen had been completed appropriately with a signed record of administration or reason for non-administration of a medication. The actual time of administration had been recorded. Medication records had been monitored, and the sheet signed, by the Deputy Head Teacher.

Similar medication records were made for non-prescribed medication that parents had requested staff to administer. These preparations had been marked with the student's name. A record for one student was for the administration of 'Calpol'. The preparation supplied by the parent was 'Calpol 6+', which is a different strength. The actual quantity of this administered had not been recorded.

Staff were aware that a prescribed liquid medication had a limited expiry date once opened, and recorded the date that a new container was started. One bottle of tablets seen had a dispensing date of 27/7/04. It was discussed with staff that it is good practice not to use any medication dispensed in a bottle after six months from the date of dispensing. The labels on some medications had been altered by parents. In one case this had made the printed administration information difficult to read.

Some students received medication mixed in food or drinks. There was no written statement from the prescribing doctor that this was necessary for that student or safe to mix with the foodstuffs concerned. Some staff had received external medication training from a pharmacist. It was stated that all staff had received basic first aid training and that two members of staff had attended a 4-day course. It was clarified that neither of these courses had provided training on first aid for children of the age group in the school. The medication policies had not been updated since the previous inspection. Staff stated, when asked, that a child would be sent home if they were unwell and that the school did not hold any non-prescribed 'household' remedies to administer in these circumstances.

The Head Teacher reported that he had raised the issue regarding who was responsible/liable for medication when students travelled to and from school by taxi, with the transport section of the LEA. As an interim measure he had written some guidelines for staff to follow. The Inspectors advised the Head Teacher to raise it through his Line Management.

Written health plans were seen in two of the students' files and were found to meet Standard 14.6. These gave a clear account of needs and support/treatment required of the individual students.

Personal care and hygiene issues were dealt with sensitively.

Accident report forms were completed appropriately. The Inspectors were pleased to note that accident report forms were completed when injuries were sustained during physical intervention.

**Standard 15 (15.1 - 15.15)**

Children are provided with adequate quantities of suitably prepared wholesome and nutritious food, having regard to their needs and wishes, and have the opportunity to learn to prepare their own meals. Where appropriate special dietary needs due to health, religious persuasion, racial origin or cultural background are met, including the choice of a vegetarian meal for children who wish it.

**Key Findings and Evidence**

**Standard met?**

4

The Inspectors considered that the catering and provision of meals is managed to a high standard.

The Inspector met with the cook. There were risk assessments in the kitchen and appropriate temperature charts were kept. The cook informed the Inspector that advice is sought from the Dietician when necessary. The Environmental Health Officer had recently visited and the school were awaiting the report. The cook reported that one recommendation was made to decorate the kitchen. The cook reported that all the catering staff were undertaking NVQ training. There was good communication between catering staff and students.

On examination, the menus demonstrated a well balanced diet with choices. However, the menus were set menus provided by Derbyshire County Council, Catering services. The Inspectors were unclear how or if students and their parents/carers were consulted and involved in developing the set menus. The Inspectors noted that there was a high usage of convenience foods and very little opportunity for home baking. In addition to the puddings, fresh fruit was available and students were actively encouraged to have fresh fruit. The Inspectors observed some students having both a hot pudding and fresh fruit.

The Inspectors joined the students for breakfast, lunch and tea. The Inspectors were pleased to note that since the last announced inspection, students now have breakfast in the residential units and some of the older students prepare some of their evening meals in the residential units. The school hall is still used for lunch and for the evening meal for the younger students. A choice of hot and cold drinks is now available to students. The Inspectors observed the older students being supported to make hot drinks.

**Standard 16 (16.1 - 16.7)**

Children are provided for adequately on an individual basis and encouraged to exercise their own preferences in the choice of clothing and personal requisites. Children who require assistance to choose what they wear and/or how they spend their money are provided with the assistance they need, in a way which maximises their choice.

**Key Findings and Evidence**

**Standard met?**

3

Observations confirmed that all students had their own toiletries. Clothing looked well laundered.

Improvements have been made to the system for keeping and recording of students' pocket money. Two staff now sign the records in ink. Some students kept their own (duplicate) books and signed for monies. In line with the PECS, pictures of different coins were used to assist students to manage their accounts.

## CARE PLANNING AND PLACEMENT PLAN

The intended outcomes for the following set of standards are:

- Children have their needs assessed and written plans outline how these needs will be met while at school.
- Children's needs, development and progress is recorded to reflect their individuality and their group interactions.
- There are adequate records of both the staff and child groups of the school.
- In accordance with their wishes, children are able and encouraged to maintain contact with their parents and families while living away from home at school.
- Children about to leave care are prepared for the transition into independent living.
- Children receive individual support when they need it.

### Standard 17 (17.1 - 17.8)

There is a written placement plan specifying how the school will care for each boarding pupil in accordance with his or her assessed needs, the school cares for that child in accordance with that plan, monitors progress in relation to that plan, and updates that plan as necessary.

Key Findings and Evidence	Standard met?	1
<p>The Inspectors looked at three students' case files. Some progress had been made since the last announced inspection in obtaining and recording details about students' needs and how these should be met. A record of individual's morning and evening routines and activity programmes were kept. However, these did not form part of a holistic care plan and risk assessment and lacked details on all areas of need and how needs should be met and by whom.</p>		
<p>Daily log records were not kept for students. This potentially made it difficult to monitor progress made by the students and review the care plans and risk assessments. There had been improvements to night time recording. A new format had been devised for night time monitoring of students. The Inspectors considered this to be a useful format as it also gave contact details of the senior on call and emergency telephone numbers of maintenance services. However, recording sheets did not allow for separate recording for each individual student and were not signed and dated.</p>		

**Standard 18 (18.1 - 18.5)**

Each child has a permanent private and secure record of their history and progress which can, in compliance with legal requirements for safeguards, be seen by the child.

**Key Findings and Evidence****Standard met?**

2

There had been some improvements in collating all the required information. All information was now kept in one large school file. Each file contained a front sheet with some of the information required in Standard 18.2 and all past and current information. The Inspectors found it difficult to easily access the required current information and did not consider it to be an effective working file.

It was noted that many of the documents were not dated or did not contain the name of the author.

**Standard 19 (19.1 - 19.3)**

The school maintains clear and accurate records on the staff and child groups of the school, and major events affecting the school and children resident there.

**Key Findings and Evidence****Standard met?**

2

The Inspectors identified that the school had all records required under Standard 19.2 with the exception of the following:

- details relating to staff personnel files. This has proved difficult for the Head Teacher as staff recruitment is dealt with by the LEA's central personnel department and traditionally all personnel records are kept at the personnel department. However, some progress has been made by the school in trying to obtain copies of personnel details as required. The Head Teacher reported that he was still having difficulty obtaining recruitment details for the catering staff as they are employed by Catering Services, which is a separate department to the Education department. The Commission for Social Care Inspection raised this issue in a meeting with the Head of the LEA's Special Educational Needs, who agreed to look into this.
- The cook reported that menus have to be sent to the Catering services office at County Offices.

**Standard 20 (20.1 - 20.6)**

Subject to their wishes, children are positively encouraged and enabled by the school to maintain contact with their parents and other family members (unless there are welfare concerns) while living at school.

**Key Findings and Evidence****Standard met?**

3

There were good systems for communication with parents/carers. All students had Home-School Link books. There was evidence of regular phone contact with some parents. There was evidence to confirm that students were supported to contact or receive calls from their parents/carers. Feedback from parents stated that communication from the school was good.

**Standard 21 (21.1 - 21.2)**

Where a pupil is in care and will be leaving care on leaving the school, the school agrees with the young person's responsible authority what contribution it should make to implement any Pathway or other plan for the pupil before the pupil leaves school. These arrangements are in line with that young person's needs, and the school implements its contribution where feasible from at least a year before the pupil is expected to leave care or move to independent living. The school works with any Personal Advisor for the child.

**Key Findings and Evidence****Standard met?**

9

None of the students who were case tracked by the Inspectors were in care and due to leave care on leaving the school.

**Standard 22 (22.1 - 22.13)**

All children are given individualised support in line with their needs and wishes, and children identified as having particular support needs, or particular problems, receive help, guidance and support when needed or requested.

**Key Findings and Evidence****Standard met?**

3

The Inspectors considered that students were receiving a high quality service based on their assessed needs. The whole staff team are to be commended for their commitment and dedication.

Documentary evidence, observations by the Inspectors, discussions with staff and feedback from parents and placing officers support that students' needs were being met. The care provided was clearly based on individual's assessed needs. There were systems to monitor and review students progress at regular intervals.

The Inspectors met with most residential staff who demonstrated a good knowledge and understanding of students' needs, and programmes.

A number of therapies were being accessed by students including speech and language therapy, music therapy and Shiatsu. There were clear lines of accountability regarding the use of these therapists.

The Inspectors were please to note that the school had reviewed the deployment of night staff, which has also included the employment of a third waking night staff member. The Inspectors were informed that this is being monitored by the Deputy Head Teacher and the Head of Care.

## PREMISES

The intended outcomes for the following set of standards are:

- Children live in well designed, pleasant premises, providing sufficient space and facilities to meet their needs.
- Children live in accommodation that is appropriately decorated, furnished and maintained to a high standard, providing adequate facilities for their use.
- Children are able to carry out their ablutions in privacy and with dignity.
- Children live in schools that provide physical safety and security.

### Standard 23 (23.1 - 23.9)

The school is located, designed and of a size and layout that is in keeping with its Statement of Purpose. It serves the needs of the children and provides the sort of environment most helpful to each child's development, and is sufficient for the number of children.

Key Findings and Evidence	Standard met?	3
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Keypads were fitted to external doors of the Residential Unit to safeguard the students' welfare. These did not prevent the students leaving the Residential Unit.

Listening devices were used in respect of one student. The school had obtained written consent from the student 's parents.

There was evidence of the school maintaining and appropriate links with the local community.

**Standard 24 (24.1 - 24.19)**

The school provides adequate good quality and well-maintained accommodation for boarding pupils, which is consistent with their needs.

**Key Findings and Evidence****Standard met?**

1

A number of issues from the last announced inspection report had been addressed resulting in the following improvements:

- The radiators had been replaced in the Residential Unit.
- Carpets in the hallways had been replaced.
- Another lounge, which was used as an activity room, had been provided to try and address the concern raised about Acorn lounge being too small for the number of students using it.
- All bedrooms had been decorated and personalised. Not all the bedrooms had chairs.

An inspection of the residential unit and the outside areas identified the following:

1. A number of roof tiles were loose. As a result, part of the garden was fenced off as a health and safety measure. A Recommended Action was made in the last announced inspection report for these to be repaired. The Head Teacher reported that the work was due to take place in April 2005.
2. The window frames were in a poor state of repair. A Recommended Action was made in the last announced inspection report for these to be repaired. The Head Teacher reported that funding had been allocated from his next financial year's budget for the work to take place.
3. Lighting in Oak lounge and Acorn lounge was still poor.

**Standard 25 (25.1 - 25.7)**

The school has sufficient baths, showers and toilets, all of good standard and suitable to meet the needs of the children. The school has appropriate changing and washing facilities for incontinent children where necessary.

**Key Findings and Evidence****Standard met?**

2

The school had sufficient bathing and toilet facilities. The bathrooms had been made homely. Students' personal toiletries were kept in baskets in locked cupboards. There were symbol instructions in the bathrooms to assist students with personal care. The water from a washbasin in one of the bathrooms was found to be too hot. The Deputy Head of Care reported this immediately. However, staff do not carry out regular water temperature tests.

**Standard 26 (26.1 - 26.10)**

**Positive steps are taken to keep children, staff and visitors safe from risk from fire and other hazards, in accordance with Health and Safety and Fire legislation and guidance.**

**Key Findings and Evidence**

**Standard met?**

**1**

An annual Health and Safety audit/inspection is carried out by the National Union of Teachers. There were copies of the audits. These were examined by one of the Inspectors and confirmed that inspections were carried out at regular intervals.

Health and Safety records are kept in the main office and the Head Teacher now had overall responsibility for Health and Safety issues.

The water temperatures were controlled. However, the Inspectors noted that water in one of the bathrooms became quite hot after a while. A Recommended Action has been made in the previous Standard.

The system for recording fire alarm tests and fire drills had been reviewed and improvements made since the last announced inspection. The Inspector examined these records, which confirmed that fire drills are once a term and a nighttime drill has been undertaken. Training records support that all staff had completed Fire Safety training as required by the Fire Authority. The Inspectors were concerned to see doors being wedged open. One of the Inspectors was told that the lounge doors were wedged open during the night. This practice must cease immediately.

An examination of the Control of Substances Hazardous to Health file showed that the risk assessments had been updated as required.

The school had a valid Gas Safety certificate (28<sup>th</sup> Jan 05). The Electrical Installation work was being carried during the Inspection. The Portable Appliance Testing records were up to date.

The Head Teacher reported that the school had recently been surveyed for Asbestos. The school does not currently test the water supply for Legionella.

The Head Teacher was in the process of compiling environmental risk assessments.

## STAFFING

The intended outcomes for the following set of standards are:

- There are careful selection and vetting of all staff, volunteers, and monitoring of visitors to the school to prevent children being exposed to potential abusers
- Children are looked after by staff who understand their needs and are able to meet them consistently.
- Children are looked after by staff who are trained to meet their needs.
- Children are looked after by staff who are themselves supported and guided in safeguarding and promoting the children's welfare.

### Standard 27 (27.1 - 27.9)

Recruitment of all staff (including ancillary staff and those employed on a contractual/sessional basis) and volunteers who work with the children in the school includes checks through the Criminal Records Bureau checking system (at Standard or Enhanced level as appropriate to their role in the school), with a satisfactory outcome. There is a satisfactory recruitment process recorded in writing.

#### Key Findings and Evidence

#### Standard met?

1

Significant improvements have been made to recruitment practices in the school. A checklist based on Standard 27.2 had been produced since the last announced inspection to aid in the recruitment process. One Inspector looked at a sample of recruitment details of staff employed since the last announced inspection. However, the following issues were noted:

1. Not all applicants had given a full employment history and there was no documentary evidence that any gaps had been explored at interview.
2. Records of interviews were now being kept but were not signed by the author and dated.
3. Some staff had started without the school having obtained satisfactory CRB checks, although the Head Teacher reported that some staff had had the check in their previous job. CRB checks had been applied for. However, arrangements had not been made to ensure the staff were not working unsupervised. There was no written record of what actions had been taken to safeguard the students.

**Total number of care staff:**

9

**Number of care staff who left in last 12 months:**

2

**Standard 28 (28.1 - 28.13)**

The school is staffed at all times of the day and night, at or above the minimum level specified under standard 28.2. Records of staff actually working in the school demonstrate achievement of this staffing level.

**Key Findings and Evidence**

**Standard met?**

3

Staffing levels were adequate at the time of this inspection. Since the last announced inspection improvements have been made to staffing levels and the deployment of staff, which have addressed the issues raised in the last announced inspection. This has included increased waking night staff cover. A male member of staff has been appointed to a waking night post.

There were clear arrangements for covering staff absences.

**Standard 29 (29.1 - 29.6)**

**Staff receive training and development opportunities that equip them with the skills required to meet the needs of the children and the purpose of the school.**

**Key Findings and Evidence**

**Standard met?**

**3**

Some improvements had been made to the induction process for new staff. New staff confirmed they had received an induction and were able to describe what it had entailed. They felt that the induction had been very thorough and had been well supported by the management team and fellow team members. However, the standard induction information had not been updated since the last announced inspection and some information was incorrect/out of date. There was a checklist relating to some of the induction process, which had been signed by new staff once they had been given the information. However, it did not give full details of the whole induction process.

Excellent progress has been made in developing the staff training programme which has been based on Appendix 2 of the National Minimum Standards. Training needs are discussed and identified in supervision and also form part of the school's Continuing Professional Development Plan. All residential staff had received the following training: PECS (The Picture Exchange Communication System); TEACCH (Treatment and Education of Autistic and related Communication Handicapped Children); HEART (Handling Emotion, Aggression and Restraint Techniques); Child Protection provided by the LEA's Child Protection trainer; Basic First Aid (this has been discussed in Standard 14); Basic Food Hygiene; Fire Safety training as required by the Fire Authority; Complaints. Other courses attended by some staff include 'Administration and Care of Medicines and Control of Substances Hazardous to Health (COSHH).

The majority of residential staff had the NVQ Level 3 in Caring for Children and Young People or equivalent. One of the night staff were due to enrol on the course in April 2005.

Administrative staff and ancillary staff had received some training specific to their roles and responsibilities and child focused training.

**Standard 30 (30.1 - 30.13)**

**All staff, including domestic staff and the Head of the school, are properly accountable and supported.**

**Key Findings and Evidence**

**Standard met?**

**2**

Improvements had been made to the structure and recording of supervision since the last announced inspection. Supervision now addresses issues detailed in Standard 30.4. However, records seen by the Inspector did not indicate that previous records had been checked to ensure any agreed actions had been addressed. Not all staff had copies of their supervision records. The Head of Care reported that staff were given the choice of having copies.

The Head of Care had weekly meeting with the Deputy Head Teacher and records of these were kept.

Residential staff were receiving supervision every half term. However, there was no documentary evidence to support that new staff were having one to one supervision at least fortnightly during the first two terms of their employment.

Residential staff meetings are now held regularly and minutes of these meetings were seen by the Inspectors.

## ORGANISATION AND MANAGEMENT

The intended outcomes for the following set of standards are:

- Children receive the care and services they need from competent staff.
- Children enjoy the stability of efficiently run schools.
- The governing body, trustees, local authority, proprietor or other responsible body monitors the welfare of the children in the school.

**Standard 31 (31.1 - 31.17)**

The school is organised, managed and staffed in a manner that delivers the best possible childcare.

**Key Findings and Evidence**

**Standard met?**

3

Staff who met with the Inspectors praised the support given to them from the management team. Members of the management team were reported to be approachable and always had/made time to listen to their views and concerns. Staff felt included in the development and day to day running of the school. Staff with different roles/functions (ancillary staff in particular), felt valued. The Inspectors found evidence during this inspection to support their views.

The Head of Care had the relevant experience of working at a senior level in a childcare setting. However, the NVQ 4 qualification held by the Head of Care was in relation to working with adults. She reported that she was investigating the possibility of undertaking extra units in relation to children and young people. The Head of Care had completed the NVQ 4 Registered Managers Award since the last announced inspection. The Head of Care did not feel that the course had fully covered her training needs in relation to management skills. The Inspectors' findings supported this view.

Staff rotas indicated there was time to carry out the tasks detailed in Standard 31.5.

**Percentage of care staff with relevant NVQ or equivalent child care qualification:**

X %

**Standard 32 (32.1 - 32.5)**

The Commission for Social Care Inspection is informed within 24 hours if a receiver, liquidator or trustee in bankruptcy becomes responsible for the school. Such persons on becoming responsible for the school have ensured that the school continues to be managed on a day to day basis by a Head who meets recruitment and qualification requirements for a Head under these Standards. Such a temporary Head must make sure that the operation of the school meets the requirements of these standards in relation to the day to day running of the school.

**Key Findings and Evidence****Standard met?**

2

There was evidence to support that the management team monitor and sign some of the records detailed in Standard 32.2. A system had been implemented since the last announced inspection to ensure compliance with this Standard. However, the Head Teacher and Deputy Head Teacher acknowledged it needed further development.

**Standard 33 (33.1 - 33.7)**

The governing body, trustees, local authority, proprietor or other responsible body receive a written report on the conduct of the school from a person visiting the school on their behalf every half term.

**Key Findings and Evidence****Standard met?**

3

A representative from the Local Education Authority has continued to visit the school every half term as required by this Standard. A report had been produced for each visit. Improvements have been made to the format of the visit and the report. The visitor now also monitors records of complaints and recruitment practices. The reports also clearly identified what action was required and by whom and matters arising from previous visits.

**PART C**

**LAY ASSESSOR'S SUMMARY**

**(where applicable)**

Empty box for Lay Assessor's Summary

**Lay Assessor** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**PART D**

**HEAD'S RESPONSE**

**D.1 Head's comments/confirmation relating to the content and accuracy of the report for the above inspection.**

We would welcome comments on the content of this report relating to the Inspection conducted on <enter date(s) of inspection here> and any factual inaccuracies:

Please limit your comments to one side of A4 if possible

**Action taken by the CSCI in response to Head's comments:**

Amendments to the report were necessary

NO

Comments were received from the provider

YES

Head's comments/factual amendments were incorporated into the final inspection report

NO

Head's comments are available on file at the Area Office but have not been incorporated into the final inspection report. The inspector believes the report to be factually accurate

YES

**Note:**

In instances where there is a major difference of view between the Inspector and the Head both views will be made available on request to the Area Office.

**D.2 Please provide the Commission with a written Action Plan by 11 May 2005, which indicates how recommended actions and advisory recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request.**

**Status of the Head's Action Plan at time of publication of the final inspection report:**

Action plan was required

YES

Action plan was received at the point of publication

YES

Action plan covers all the statutory requirements in a timely fashion

YES

Action plan did not cover all the statutory requirements and required further discussion

NO

Provider has declined to provide an action plan

NO

Other: <enter details here>

**D.3 HEAD'S AGREEMENT**

**Head's statement of agreement/comments: Please complete the relevant section that applies.**

**D.3.1 I \_\_\_\_\_ of Holbrook Centre confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) and that I agree with the recommended actions made and will seek to comply with these.**

**Print Name** \_\_\_\_\_  
**Signature** \_\_\_\_\_  
**Designation** \_\_\_\_\_  
**Date** \_\_\_\_\_

**Or**

**D.3.2 I \_\_\_\_\_ of Holbrook Centre am unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) for the following reasons:**

**Print Name** \_\_\_\_\_  
**Signature** \_\_\_\_\_  
**Designation** \_\_\_\_\_  
**Date** \_\_\_\_\_

**Note: In instance where there is a profound difference of view between the Inspector and the Head both views will be reported. Please attach any extra pages, as applicable.**

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