



Champions for
Social Care
Improvement

inspection report

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

Holbrook Centre for Autism

Port Way

Holbrook

Belper

Derbyshire

DE56 0TE

12th – 19 January 2004

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.

SCHOOL INFORMATION

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

Mr David Heald

NCSC Classification

Residential Special School

Type of school

Residential Special
Schools

Date of last boarding welfare inspection:

x

Date of Inspection Visit		12th January 2004	ID Code
Time of Inspection Visit		09:00 am	
Name of NCSC Inspector	1	Katarina Djordjevic	074488
Name of NCSC Inspector	2	Nancy Bradley	136454
Name of NCSC Inspector	3		
Name of NCSC Inspector	4		
Name of Boarding Sector Specialist Inspector (if applicable):			
Name of Lay Assessor (if applicable) Lay assessors are members of the public independent of the NCSC. They accompany inspectors on some inspections and bring a different perspective to the inspection process.			
Name of Specialist (e.g. Interpreter/Signer) (if applicable)			
Name of Establishment Representative at the time of inspection		Mr David Heald & Ms Kelly Radford	

CONTENTS

Introduction to Report and Inspection

Inspection visits

Brief Description of the school and Residential Provision

Part A: Summary of Inspection Findings

What the school does well in Boarding Welfare

What the school should do better in Boarding Welfare

Conclusions and overview of findings on Boarding Welfare

Notifications to Local Education Authority or Secretary of State

Implementation of Recommended Actions from last inspection

Recommended Actions from this inspection

Advisory Recommendations from this inspection

Part B: Inspection Methods Used & Findings

Inspection Methods Used

- 1. Statement of the School's Purpose**
- 2. Children's rights**
- 3. Child Protection**
- 4. Care and Control**
- 5. Quality of Care**
- 6. Planning for care**
- 7. Premises**
- 8. Staffing**
- 9. Organisation and Management**

Part C: Lay Assessor's Summary (where applicable)

Part D: Head's Response

- D.1. Head's comments**
- D.2. Action Plan**
- D.3. Head's agreement**

INTRODUCTION TO REPORT AND INSPECTION

Residential Special Schools are subject to inspection by the National Care Standards Commission (NCSC) 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 NCSC in respect of 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. Residential students use the school hall/dining hall for all 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

The Inspectors' findings supported that the whole school staff team are caring and very committed to meeting the complex needs of the individual students. Staff presented as enthusiastic and very knowledgeable about individual student's needs.

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

There was a relaxed atmosphere throughout this inspection.

The Head Teacher has been in post since May 2002 and has made many improvements. He has been ably supported by the Deputy Head Teacher whose liaison role between residential and education has been instrumental in achieving the progress made so far. Both the Head Teacher and Deputy Head Teacher's leadership style presented as inclusive and supportive of all staff. Staff who met with the Inspectors commented that the atmosphere was more relaxed and that they found the Head Teacher approachable and always willing to listen. There were examples during the inspection to confirm that the Head Teacher supported staff in often difficult situations.

Evidence from the inspection supported the Inspectors' view that students are given excellent support to meet their communication needs.

Evidence supported that staff are skilled in managing the difficult behaviours presented by some students. Physical intervention clearly was used as a last resort and incidents of the use of physical intervention are considered by the Inspectors, to be low.

Staff clearly were committed to educating and providing positive experiences of different religious and cultural festivals.

Staff should be commended for their continued efforts to enable students to access community facilities and leisure activities, despite some of the difficult behaviours presented by students.

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

- The school's complaints procedure should be reviewed and adapted to meet the needs of the residential provision to ensure it is accessible to students, parents/carers, placing officers and any other relevant agencies. Staff will need training.
- A review of the school's Child Protection procedures and training for staff should be carried out to ensure all staff are clear about what constitutes a Child Protection issue. Multi-agency training should be provided.
- Improvements to the recording of sanctions and physical intervention should be made to ensure compliance with National Minimum Standards.
- Improvements should be made to the administration of medication procedures and practices.
- Improvements should be made to students' case records to ensure compliance with Standard 17 and Standard 18, and assist in the monitoring and review of care.
- Environmental risk assessments should be carried out and recorded as a matter of priority particularly in relation to the radiators.
- Improvements as detailed in this report to the residential accommodation should be made to ensure the health and safety and wellbeing of the students.
- Significant improvements should be made to recruitment practices to ensure the safety of students and compliance with Standard 27.
- A review of the staff induction and training programme should be carried out to ensure staff employed have the necessary experience, skills and knowledge to enable them to fulfil their roles and responsibilities.

CONCLUSIONS AND OVERVIEW OF FINDINGS ON BOARDING WELFARE

The Inspectors' findings confirmed that students' needs were being met. However, measured against the National Minimum Standards, the school has not met the majority of the standards. The Local Education Authority should use this report as a baseline and draw up an Action Plan.

The Head Teacher has been in post since May 2002 and has already made some improvements. There was a willingness and commitment from the Head Teacher to improve standards. Staff were very positive about the Head Teacher and his management approach.

Residential provision is based on the 24 hour curriculum. Evidence from this inspection supported that the whole staff team are clearly committed to achieving this and meeting individual students assessed needs. Staff worked hard and were very skilled in meeting students' needs and encouraging independence and choice. Staff were particularly skilled in communicating with students and in managing the difficult behaviours presented by students. Staff should be commended for their efforts in enabling students who present very difficult behaviours at times, to access community resources and leisure facilities.

The students appeared content and looked well cared for. They obviously enjoyed the activities they participated in.

The National Care Standards Commission is concerned that the following issues highlighted in an audit carried out by the Standard 33 visitor in January 2003 have not been addressed or fully completed:

1. Replacement of radiators, which presented a potential hazard to students.
2. Replacement of a number of carpets and some of the items of bedroom furniture.

The Local Education Authority must address these issues as a matter of priority to ensure the safety of students and to ensure compliance to National Minimum Standards.

The Local Education Authority must also review the training budgets available to ensure that all staff have the appropriate training and that residential staff are provided with the training outlined in Appendix 2 of the National Minimum Standards.

Questionnaires were sent out to all parents and placing officers of students who board at the school. Feedback received was positive and some parents commented on the 'excellent standard of care'.

Questionnaires were also given out to all staff. The Inspectors were disappointed to note that no questionnaires were returned from the residential staff. Feedback from questionnaires from education, administrative and ancillary staff was positive.

RECOMMENDED ACTIONS IDENTIFIED FROM THIS INSPECTION

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

RECOMMENDED ACTION			
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	RS3	A Lone Working Policy should be produced for the protection of both students and staff.	30.06.04
2	RS3	Written guidance should be produced for staff and students, on when it may be necessary to search a child's possessions.	01.09.04
3	RS4	The school's complaints' procedure should be reviewed/adapted to ensure full compliance with Standard 4.	31.07.04
4	RS4	On completion of the review of the complaint procedure, staff should receive training in this.	01.09.04
5	RS5	The school should review the Child Protection procedures to ensure compliance with Appendix 1 of the National Minimum Standards and update information about the Nominated Child Protection Co-ordinator at the school.	30.06.04
6	RS5	All staff including ancillary and agency staff should receive training in Child Protection procedures. It is recommended that staff all should receive external/multi-agency training.	31.07.04
7	RS5	New staff should receive Child Protection training as soon as possible after they commence employment and not have to wait for the annual training.	31.07.04
8	RS6	The draft Anti-Bullying procedure should be finalised.	31.07.04

9	RS6	Staff should receive training to ensure they are clear about what constitutes bullying and what is behaviour management.	31.07.04
10	RS6	Systems for recording and monitoring of incidents of bullying should be developed.	31.07.04
11	RS8	The 'Person's Missing' form kept in students' files should be fully completed.	31.05.04
12	RS10	All staff should receive training on the school's policy on Sanctions. All sanctions applied should be consistent with the agreed policy.	31.07.04
13	RS10	A record of all sanctions applied should be kept as detailed in Standard 10.9. The Head Teacher should monitor and sign the record every half term as required in Standard 32.2.	30.06.04
14	RS10	A record of any use of physical intervention should be kept as detailed in Standard 10.14.	30.06.04
15	RS10	All care staff should receive training in safe and physical intervention techniques.	30.06.04
16	RS11	The school should produce a written procedure for staff to follow when introducing new students to the residential unit.	01.09.04
17	RS13	Individual risk assessments should be carried out for all students to include any risks presented by participation in leisure activities.	31.05.04
18	RS14	All students should have a clear written health plan or similar document covering all points in Standard 14.6.	30.06.04
19	RS14	Clear instructions should always be provided for staff in the management of epilepsy.	31.05.04
20	RS14	The school should continue to seek medical advice/liaise with the relevant professionals to ensure students' continence needs are met and dignity is maintained at all times.	31.05.04
21	RS14	The school's medication policies and procedures and practices should be revised in line with the 'The Administration and Control of Medicines in Care Homes' guidelines produced by the Royal Pharmaceutical Society of Great Britain.	30.06.04
22	RS14	Medication records should always be signed.	01.05.04

23	RS14	All entries on medication records should be in ink, not in pencil.	01.05.04
24	RS14	Accident report forms should be completed for all injuries sustained.	01.05.04
25	RS14	Staff involved in the administration of medication should receive training from an approved person.	30.06.04
26	RS14	The Head Teacher should clarify the issue of responsibility/liability when medication travels with students in taxis.	01.05.04
27	RS15	Adequate heating should be maintained at all times in school (dining) hall.	01.05.04
28	RS15	Students should be offered a choice of hot or cold drinks unless the assessment of needs states otherwise.	01.05.04
29	RS16	Students where able, should sign pocket money records, otherwise two staff signatures should be obtained for all transactions made.	01.05.04
30	RS16	All entries in pocket money records should be made in ink.	01.05.04
31	RS18	One comprehensive file containing information required in Standard 17 and all the information detailed in Standard 18.2 should be available to staff and retained on the Houses.	30.06.04
32	RS18	All entries relating to students welfare should be dated and signed by staff.	01.05.04
33	RS18	Case records/forms, including night reports should give detailed information of any events/incidents including what and why actions were taken.	01.05.04
34	RS22	The deployment of waking night should be reviewed to ensure all students are able to summon assistance.	31.05.04
35	RS22	Arrangements for contacting the person on sleep-in duty should be reviewed to ensure they are easily accessible if needed.	31.05.04
36	RS23	Students' placement plans should indicate the need for physical restrictions (keypads on external doors) within the residential unit.	30.06.04

37	RS23	Written consent for the use of any listening device should be obtained from parents/carers and placing authorities and kept in students' files.	30.06.04
38	RS24	The school's environmental risk assessments should be updated.	01.05.04
39	RS24	Points 1, 2, 4, 6- detailed in the main text of Standard 24 should be addressed.	01.09.04
40	RS24	Points 3,5,7,8,9 detailed in the main text of Standard 24 should be addressed.	30.06.04
41	RS26	The recording system used for weekly fire safety procedures/tests should be reviewed to ensure the maintenance of clear and concise records.	01.05.04
42	RS26	The Head Teacher should ensure that fire alarm tests are carried out weekly and recorded.	01.05.04
43	RS26	Fire drills should be carried out as required by the Fire Authority.	01.05.04
44	RS26	Residential staff should receive Fire Safety training as required by the Fire Authority (annually for day staff and every six months for night staff).	15.07.04
45	RS26	The school should obtain a valid Electrical Installation certificate, a copy of which should be sent to the National Care Standards Commission.	30.06.04
46	RS26	The Control of Substances Hazardous to Health data sheets/risk assessments should be updated.	30.06.04
47	RS26	Ancillary staff should receive Health and Safety training commensurate with their roles and responsibilities.	01.09.04
48	RS27	Improvements to the schools recruitment practices should be made to address points 1- 8 detailed in the main text and to ensure compliance with Standard 27.	31.05.04
49	RS28	The Head Teacher should review the deployment of staff at certain times to address the issues raised in the main text of Standard 28.	01.05.04
50	RS29	A review of the school's Induction programme should be carried out to address the issues raised in this report and to ensure compliance with National Minimum Standards.	31.07.04

51	RS29	Staff should not commence duties without having received a thorough Induction.	01.05.04
52	RS29	All new staff should receive training in Child Protection, Fire Safety and physical intervention prior to commencement of duties or as soon as possible after commencement. Staff training programmes should be rotating to ensure it provides for both existing staff and new staff.	01.05.04
53	RS29	The school should provide a training programme, which addresses the issues detailed in Appendix 2 of the National Minimum Standards.	01.09.04
54	RS32	The Head Teacher or senior member of staff delegated by the Head Teacher should monitor and sign all records detailed in Standard 32.2.	30.06.04

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	RS3	The school should continue in their efforts to appoint some male staff to work in the residential unit.
2	RS10	The school should produce an Exclusion Policy.
3	RS15	The Head Teacher should review the use of the school dining hall for students using the residential unit to ensure the provision of a homely environment.
4	RS16	The system for recording pocket money should be reviewed and a form be produced to include separate columns for income, expenditure, balance and signatures.
5	RS26	A review of where all the Health and Safety records are kept should take place to ensure an accessible system is in place for monitoring purposes.

6	RS29	All staff should receive an annual appraisal.
7	RS30	A review of the formal supervision procedure should take place to ensure that the role and function of supervision is fulfilled.
8	RS30	The Head of Care should receive training on the role and function of supervision.
9	RS30	The Head of Care should receive regular formal supervision and records kept.
10	RS31	The Head Teacher should ensure that staff have the appropriate /sufficient experience when taking on the role of Key Worker.

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	YES
• School Doctor	YES
• Independent Person	NO
• 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	NO
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	12/01/04
Time of Inspection	09.30
Duration Of Inspection (hrs.)	70
Number of Inspector Days spent on site	7

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 NCSC 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?	3
---------------------------	---------------	---

The school had a Prospectus, which met all points of Standard 1.3 except it did not include the number of residential places. The Prospectus was produced by the Head Teacher. The Head Teacher reported that the Prospectus was currently being reviewed in consultation with the school's Governors.

Evidence from this inspection supported that the school meets the needs of students admitted. Where it had been identified that the school cannot meet the needs of individuals, steps were taken to find a more suitable placement.

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?	3
---------------------------	---------------	---

Evidence from this inspection confirmed that every effort is made to involve students wherever possible, their parents, and significant others in decision making, not only the day to day lives of students but in long term planning. The school's Prospectus emphasised the importance of parents/carers and staff working closely together.

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.

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.

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. However, there was no Lone Working Policy. The Inspectors noted during the inspection that there were occasions where staff worked alone.

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. The Inspectors noted that risk assessments had not been carried out in respect of bathing. Students were able to choose who assisted them with personal care and activities. At the time of this inspection there were no male staff employed in the residential unit.

There was no guidance available to staff on when it may be necessary to search a student's possessions.

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?**

1

An inspection of the school's complaint's procedure and discussion with the Head Teacher and Head of Care identified the need for further developments. The school/residential unit were not recording any concerns raised by parents and carers.

The school's Prospectus briefly details the procedure for making complaints about the curriculum but no reference to complaint/concerns about the residential provision. The Prospectus did not inform parents/carers that they could make a complaint directly to the National Care Standards Commission.

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

0

Number of above complaints substantiated:

0

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

0

Number of above complaints substantiated:

0

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?

1

The school had Child Protection policies and procedures, which had not been reviewed since April 2002. Some information in the procedures was out of date. The policies and procedures did not meet the requirements of Appendix 1 of the National Minimum Standards. The Head Teacher reported that the school adheres to the Derbyshire Area Child Protection Committee procedures. The Head Teacher reported that the forms used for reporting a Child Protection issue were being reviewed at the time of the inspection.

Not all staff had received Child Protection training. Discussions with some staff indicated that they were unclear as to what constituted a Child Protection issue.

One of the Child Protection enquiries was initiated by the Head Teacher.

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

2

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?	1
----------------------------------	----------------------	---

The school had produced a draft Anti-Bullying procedure, which was awaiting approval from the school Governors.

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. However, the Inspectors noted an incident of bullying during this inspection. It was unclear if these incidents were recorded and monitored by the Head Teacher.

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 NCSC DURING THE LAST 12 MONTHS:

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

Standard 8 (8.1 - 8.9)		
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.		
Key Findings and Evidence	Standard met?	1
The school reported that they had a policy on absconding. This was not viewed by the Inspectors. The Head Teacher reported that they work closely with the police. Students' files examined by the Inspectors contained a 'Person's Missing form'. However, these were incomplete.		
Number of recorded incidents of a child running away from the school over the past 12 months:		X

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
---------------------------	---------------	---

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 good/effective communication between education staff, ancillary staff and residential staff, which resulted in positive outcomes for the students. 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?

1

The school had policies and procedures on the following: Behaviour Management; Physical Intervention; Sanctions – this was in draft form.

Discussion with the Head Teacher and a review of records supported that sanctions were rarely used. An examination of the records supported that sanctions were very rarely used which was positive. The Head Teacher also stated that when sanctions were applied they were applied on the same day and for one day only. However, one record examined showed that one sanction had been applied for one week, which was contrary to the policy and was unacceptable. The records of sanctions did not meet Standard 10.9. Forms seen by the Inspectors did not contain the signature of the Head Teacher.

The Pre-Inspection Questionnaire indicated that staff receive HEART (Handling Emotion, Aggression and Restraint Techniques) training. However, inspection of documentation and discussions with staff identified that not all staff had received the training.

The forms for recording incidents and physical interventions were examined by the Inspectors. These did not meet the requirements of Standard 10.14. The Head Teacher recognised that the forms were inadequate and reported that the forms were being used as a 'stop gap'. The Head Teacher reported that they were due to be reviewed in the near future.

There was evidence in the forms to demonstrate diversion and distraction techniques were used to manage difficult behaviours. It was evident from reading the forms that the use of physical intervention is minimal and used as a last resort. The reports indicated that students were given the opportunity to discuss incidents. This practice was also observed by the Inspectors.

There was evidence to support that the staff work closely with the police, where appropriate in managing difficult behaviours.

The Standard 33 visit reports indicated that records of physical intervention and sanctions are looked at but the actual records had not been signed by the person undertaking the visit. The report of 8 July 2003 identified that the school needed to introduce systems for recording of physical interventions and sanctions to ensure compliance with Standard 10.9 and Standard 10.14. The Inspectors were concerned that the report of a visit, which took place on 18 September 2003, stated that the systems being used for the recording of sanctions applied and the use of physical intervention met National Minimum Standards. This is contrary to the findings of the Inspectors.

The school did not have an exclusion policy.

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?	2
<p>There was a Local Education Authority procedure for admission to Special Schools. The school Prospectus gave details of the admission policy. There was no written procedure for staff to follow when introducing new students to the residential unit. However, discussions with staff supported that they were clear about what the procedure was and that it was clearly based on individual's needs.</p> <p>The Head Teacher reported that he did not have ultimate control on admissions and that there were occasions when decisions were made by the Local Education Authority. The Head Teacher reported that on these occasions he informed the Local Education Authority of his concerns. 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>On examination of student's case records, there were Transition Plans in place. 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, 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 works on the residential every Tuesday evening. This enables residential staff to meet with teaching staff.

Teaching staff confirmed that they met with students' key workers before the Individual Education Plan meetings. The Head Teacher and Head of Care reported that they were hoping to develop more formal systems for residential key workers to meet regularly with teaching staff.

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**

Documentary evidence and observations by the Inspectors supported that students are given a range of activities, which provide opportunities to learn new skills including accessing community activities/resources. Students were also given opportunities to experience other cultural and religious festivals.

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 of individual and group needs. The Inspectors noted that the difficult behaviours often presented by students did not prohibit them from using community leisure facilities. Staff are to be commended for this.

The Inspectors were concerned that individual risk assessments were not routinely produced.

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

The Head Teacher informed the Inspectors that all the Local Education Authority schools had a Health Promotion Policy.

On examination of the students' files, there were no written health plans.

An examination of one student's file highlighted shortfalls in information regarding the management of epilepsy and management of continence. Issues regarding the management of continence and maintaining students' dignity were discussed with the Head Teacher and Head of Care who informed the Inspectors that they had been liaising with health professionals who had not been able to find a satisfactory solution.

There was evidence to support that students are assisted sensitively with personal care/hygiene.

An inspection of the medication procedures identified the following:

- Policies and procedures were not in line with the 'The Administration and Control of Medicines in Care Homes' guidelines produced by the Royal Pharmaceutical Society of Great Britain.
- Staff had not received training from an approved person on the administration of medication.
- Recording of medication was in pencil and records were not always signed and dated.

Discussion with the Head Teacher identified the need to clarify who was responsible/liable for medication when students travelled to and from school by taxi.

The qualified First Aiders were clearly identified in the residential unit.

An examination of records identified that staff did not always complete accident report forms where an injury(ies) had been recorded on the physical intervention forms.

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?

3

On examination, the menus demonstrated a well balanced diet with choices. 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 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 cook reported that all the catering staff were undertaking NVQ training. There was good communication between catering staff and students. The Inspectors considered that the catering and provision of meals is managed to a high standard.

The main school dining hall is used for all meals. The Inspectors considered this to be inappropriate as the hall is large and impersonal and not conducive to providing a homely atmosphere. The Inspectors joined the students for breakfast, lunch and tea. There was a relaxed atmosphere although the environment did not contribute to this. Students were supported where necessary and encouraged to make decisions and choices. The dining hall was cold at certain meal times. The Inspectors noted that students were not offered a hot drink throughout this inspection, despite one of the student 's files stating that the student liked a cup of tea. This issue was raised with the Head of Care who stated that students could ask for a hot drink if they wanted one. However, the Inspectors informed her that this was not acceptable and hot drinks should be offered as a matter of routine, unless there was a reason which would be detrimental to the health and well being of the student.

All residential staff had received Basic Food Hygiene training.

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?

2

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

An inspection of the pocket money system identified the following:

- Only one staff member was signing the pocket money records when any transaction was made. It is the Inspectors view that two signatures should be obtained to ensure the protection of both students and staff.
- Staff were recording in pencil.
- Two students had large amounts of money in their account.

The Inspectors were pleased to note that two students keep duplicate records of transactions.

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
---------------------------	---------------	---

The Inspectors looked at three students' case files. It was difficult to accurately assess this standard as information required under this Standard was kept in different places. There was no cohesiveness in recording of information. This made it difficult to case track and monitor the care provided and any events, which affect the student.

Students' placement plans did not cover all the points in Standard 17.5. Each student had a set of targets to work towards which were set and agreed between education and residential staff. Observations of the Inspectors confirmed that these targets are worked on as part of students' daily routines.

Individual risk assessments had not been carried out for students. This was of particular concern where students bathed alone.

Evidence from the inspection supported the Inspectors' view that students are given excellent support to meet their communication needs.

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?**

1

The three students' files examined by the Inspectors did not contain all the information required in Standard 18.2.

Many of the records, including policies and procedures viewed by the Inspectors were not signed or dated. Night time records did not give sufficient detail on support given to students during the night.

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?**

1

The school kept all records required under Standard 19.2 with the exception of the following:

- Personnel files. This is discussed in Standard 27.
- When cross-referencing records, injuries recorded on physical intervention forms were not always recorded on accident report forms.

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. The Inspectors observed students being supported to take phone calls from their parents/carers. Feedback from one parent questionnaire suggested that in addition to the Home-School Link book more contact was needed from the school.

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?**

0

None of the students using the residential unit at the time of this inspection were in care.

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?**

2

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 Head of Care of another Local Education Authority Residential Special School visits students to provide an opportunity for students to raise any concerns /discuss any problems.

It was reported that both waking night staff were based in Acorn lounge during the night but were responsible for supporting the students in Oak unit. The Inspectors were concerned about availability of staff if students in Oak needed assistance. This was discussed with the Head of Care who stated that the Senior on duty who was also on sleep-in would hear the students if they needed assistance.

The Inspectors were also concerned that one of the staff sleep-in rooms was situated on the first floor away from the main area and there were no immediate contact systems available.

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?	1
---------------------------	---------------	---

Keypads were fitted to external doors of the residential unit. This was to safeguard the students' welfare. However, none of the students' placement plans examined stated that this.

Listening devices were used in respect of some students. However, written consent had not been obtained from parents/carers or the placing authority.

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

The school's environmental risk assessments had not been updated since 1998/1999.

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. The Head Teacher reported that this had been like this for some time.
2. The window frames were in a poor state of repair.
3. The gas heater in Acorn lounge, which staff reported was never used, presented a hazard despite having a small protective guard.
4. Acorn Lounge was considered to be too small for the number of students using the unit.
5. The lighting in Oak lounge was poor.
6. The heating was inconsistent. The Head Teacher informed the Inspectors that this was being addressed.
7. On inspection of the units, the radiator in the larger bathroom in Acorn Unit was too hot and presented a risk.
8. Carpets in the hallways were in a poor state of repair. Some carpets were ill fitting and presented a trip hazard. The Head Teacher reported that there were plans to replace the carpets in the hallways.
9. Some bedrooms had been personalised with the students having chosen the décor. However, the décor in a number of bedrooms was poor and impersonal. None of the bedrooms had chairs.

The Head Teacher reported that there was plans to replace the fencing at the rear of the school and to improve the school play area.

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?**

3

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 Personal Care Policy was also on the walls in the bathrooms. A recommendation has been made in a previous standard regarding carrying out individual risk assessments for students.

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.

Health and Safety records were kept in different locations throughout the school and were difficult to locate as different personnel had responsibilities for certain areas. There was a lack of co-ordination.

The water temperatures were controlled

The system for recording fire alarm tests and fire drills was poor. An inspection of the weekly fire alarm test records showed considerable gaps. Records were unclear as to when the last fire drill had taken place. Residential staff had not received Fire Safety training as required by the Fire Authority.

An examination of the Control of Substances Hazardous to Health file showed that the risk assessments had not been updated since 1998.

The school had a valid Gas Safety certificate. A valid Electrical Installation certificate was not available at the time of the inspection. The Portable Appliance Testing records were up to date.

Ancillary staff had not received any Health and Safety training despite having requested training.

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

The Inspector looked at the personnel files for 8 members of staff. Recruitment practices were found to be poor. The following issues were identified:

1. There was no documentary evidence to support that proof of identity had been obtained, as detailed in Standard 27.2 (i)
2. Not all staff had had a satisfactory CRB check.
3. There were no references for two of the waking night staff. Some files only contained one reference.
4. The reference request form used by the school did not ask referees to state any known reason why the person should not be employed to work with children.
5. There was no documentary evidence to support that direct contact by the school is made with each referee to verify references.
6. There were gaps in employment history for two employees. There was no evidence to support that these gaps had been explored.
7. The files did not contain a record of the interview.
8. There were no records available to support that agency staff and staff employed by other local authority departments had had the relevant recruitment checks.

The Head Teacher informed the Inspector that there were no students on placement at the school and that students were very rarely 'employed' at the school.

Total number of care staff:

X

Number of care staff who left in last 12 months:

X

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?**

1

Staffing levels were adequate at the time of this inspection. However, on the evening that Inspectors spent time on the units, there was an occasion during the shift where there was only 1 member of staff with three of the students on one unit, whilst the other unit had two staff with students who were more able.

There were no male staff employed in the residential units at the time of the inspection.

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?**

1

There was a standard training package, which was used for induction of new staff. There was evidence that some staff had received induction training. There were no records of Induction for night staff. The Head of Care confirmed that she provided the induction and goes through the programme all in one session with the exception of Child Protection which is discussed within the first two weeks of starting work. The Inspectors were concerned that all the information was covered in one session and that one staff member's induction had lasted one hour. The Head of Care informed the Inspector that new staff 'shadow' other staff. The Inspectors were concerned to find that one of the night staff who had been employed at the beginning of the new school year had not met the students before starting, and the induction was 'a lengthy chat' with the Head of Care on the first night. The Inspectors acknowledge that the member of staff was not working alone. This member of staff had not received any fire safety training or Child Protection training since taking up the post in September 2003.

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; Basic First Aid; Basic Food Hygiene. Not all staff had received Child Protection training. Residential staff had not received Fire Safety training as required by the Fire Authority. Staff did not receive all the training identified in Appendix 2 of the National Minimum Standards.

There was documentary evidence to support that some but not all staff had annual appraisals.

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?

1

Daily handovers take place. However, residential staff meetings did not take place. This was discussed with the Head Teacher and Head of Care during the inspection.

There was documentary evidence to support that most residential staff received regular supervision. However, an inspection of some supervision records indicated that supervision was informal and did not fulfil the role and function of supervision. Records did not include what actions were needed, who was responsible and no follow up on agreed actions from previous sessions.

The Head of Care did not receive formal supervision but had weekly meetings with the Deputy Head Teacher. There were no records of these meetings.

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?

2

Staff who met with the Inspectors praised the support given to them from the Head Teacher. They reported that he was approachable and was inclusive of staff in the development and day to day running of the school. They also commented how there was a more relaxed atmosphere in the school and that staff with different roles/functions (ancillary staff in particular), felt valued.

The Head of Care had the relevant experience commensurate with the post. At the time of this inspection the Head of Care was undertaking the NVQ 4 Registered Managers Award, which she hoped to complete in March 2004.

Residential staff were working towards the NVQ Level 3.

The Inspectors were concerned at the allocation of Key Worker duties to a recently appointed member of staff. The staff member had had childcare experience but not with children and young people with Autism.

Staff rotas indicated there was time to carry out the tasks detailed in Standard 31.5. The school Prospectus gave information to parents/carers detailed in Standard 31.10 except contact details of the local Social Services department and the National Care Standards Commission.

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

X %

Standard 32 (32.1 - 32.5)

The National Care Standards Commission 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 Head Teacher monitors and signs some of the records detailed in Standard 32.2.

The Head Teacher informed the Inspectors that he is working with the School Governors in their taking a more proactive role in the running of the school, including in the development of policies and procedures and general training. He planned to provide training for Governors.

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?**

2

A representative from the Local Education Authority has visited the school every half term as and produced a report for each visit as required by this Standard. The person conducting these visits had also completed an audit of services against National Minimum Standards in January 2003 and had identified some areas for attention. It was intended for the audit to form the basis for short and long-term developments.

During subsequent visits, the lack of progress with these areas for attention had not always been highlighted.

The Inspectors were concerned that the report of a visit, which took place on 18 September 2003, stated that the systems being used for the recording of sanctions applied and the use of physical intervention met National Minimum Standards. This is contrary to the findings of the Inspectors.

PART C

LAY ASSESSOR'S SUMMARY

(where applicable)

[Empty box for Lay Assessor's Summary]

Lay Assessor _____ **Signature** _____

Date _____

Inspector _____ **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 NCSC in response to Head's comments:

Amendments to the report were necessary

YES

Comments were received from the provider

YES

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

YES

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

NO

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 26 May 2004, 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.