

Ofsted
Piccadilly Gate
Store Street
Manchester
M1 2WD

T 0300 123 4234
www.gov.uk/ofsted



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Julia Allen
Headteacher
Devon Hospitals' Short Stay School
Schoolrooms, Bramble Unit
RD&E Hospital
Barrack Road
Exeter
Devon
EX2 5DW

Dear Mrs Allen

Short inspection of Devon Hospitals' Short Stay School

Following my visit to the school on 24 April 2018 with Andrew Penman, Ofsted Inspector, I write on behalf of Her Majesty's Chief Inspector of Education, Children's Services and Skills to report the inspection findings. The visit was the first short inspection carried out since the school was judged to be good in September 2012.

This school continues to be good.

The leadership team has maintained the good quality of education in the school since the last inspection. Parents and carers who expressed a view are united in their praise for the education that you and your staff provide. Lessons, they say, are tailored to the individual strengths and interests of their children. Parents also speak very highly of the support and care which they receive from school staff during what can be stressful and, occasionally, traumatic times.

You have created a strong team that works flexibly and creatively in particularly challenging circumstances. One of the challenges is that the school is on two sites which are over an hour's drive apart, with one being at Exeter and the other at the North Devon District Hospital in Barnstaple. Through arranged visits between the sites and through the use of information and communication technology (ICT) for videoconferences, you ensure that staff keep in close contact. Use of ICT for this purpose has improved since the previous inspection, and now supports staff to maintain a sense of working together, sharing practice and making improvements to their work.

Being based within a children's ward in a hospital, there are inevitably daily changes to the pupils you teach and to the organisation of the day. Some pupils are with you for weeks or months, some for a day or so. Some pupils, due to their medical needs, return for short or longer stays. You ensure that staff adapt to whatever the situation is for each pupil and adjust their planning to pupils' needs. This may

include going out to pupils' own homes. In close partnership with medical staff, adjustments are made on a daily, if not hourly, basis. Pupils' work shows that staff are skilled at quickly assessing pupils' knowledge and understanding, and at planning activities that interest, challenge and extend their thinking. All pupils who responded to a survey agreed that teachers help them to do their best in lessons. Similarly, all parents who responded agreed that their children make good progress and are taught well.

The management committee provides strong challenge as well as being knowledgeable and supportive. For example, they recently requested a range of case studies to be compiled so that they have a clearer view of the progress that pupils make. Staff have found this useful and, together, you continue to develop systems to identify and evaluate the progress that pupils make.

At the previous inspection, there was a recommendation to improve resources, both inside and outside, for children who attend the Reception class. At the Barnstaple site, staff have created a stimulating learning base which invites children to be inquisitive and enjoy their learning. At the Exeter site, the outside provision has been developed and now provides an outdoor learning resource that can be used all year round. You agree, however, that learning activities need to be more carefully planned, to ensure that children can access high-quality learning experiences that match their interests and stages of development.

Safeguarding is effective.

The leadership team has ensured that all safeguarding arrangements are fit for purpose. You set high expectations to make sure that staff have the training and updates that they need to keep pupils safe. Management board members visit often to make regular checks and to take time to listen to the views of staff. You work in partnership with hospital leaders to review safeguarding arrangements. For example, arrangements for secure entry to the ward are under review, as you have raised this as an area to improve.

You form positive partnerships with the schools that pupils attend when not at hospital. This, along with close communication with parents, ensures that you and your staff have very detailed knowledge of pupils' needs, the challenges they face, and any additional risks to their safety that there may be. This helps to keep pupils safe.

Inspection findings

- We agreed some particular areas to focus on during the inspection. The first was to look at how effectively leaders ensure that pupils make improvements, particularly pupils who have special educational needs (SEN) and/or disabilities. We looked at this because it was a recommendation in the previous inspection report that systems for recording the progress being made for these pupils should be improved.
- You ensure that staff regularly visit and have contact with 'link' schools. This

supports staff to have an accurate view of the expectations for pupils' progress, including for those who have SEN and/or disabilities. Staff proactively communicate with pupils' home schools, requesting detailed assessment information which they then build on to produce activities that successfully meet pupils' needs.

- Teachers and teaching assistants rapidly respond to pupils when they arrive, making them feel at ease and interested in learning activities, which may be carried out at a child's bedside or in the classrooms. As a result, pupils, including those who have SEN and/or disabilities, make good progress.
- We also looked at how effectively subject leaders check the quality of teaching to ensure that teachers' expectations are high. Subject leaders look at pupils' work each term to check expectations and provide feedback to staff. However, some leaders do not visit lessons to see learning taking place, for example in mathematics.
- As a result, these subject leaders do not have an accurate view of the strengths or next steps in teaching and learning across the two sites. The school development plan includes actions to observe teaching and learning. However, they are not sufficiently robust and do not have precise timescales. Therefore, some agreed actions do not take place in a timely way. This makes it difficult to have challenging conversations with staff that enable them to improve the quality of their work.
- Finally, we explored the liaison with home schools and parents to ensure that they receive good information about the progress pupils make. Staff provide a detailed report on the learning achievements and attitudes to learning for each pupil who is at the school for five days or more. This ensures that pupils' learning can continue to be planned effectively when they leave the school. Staff work flexibly and support the transition between hospital and the return to school, including going out to teach pupils in their own homes during this period. Parents and pupils are very appreciative of this positive approach.
- You agreed that for those pupils who make return visits to the hospital, usually for an on-going medical condition, more could be done to build on and further improve their achievements over time. For example, pupils' work is kept and added to, but the presentation and organisation of work does not consistently promote a sense of pride.

Next steps for the school

Leaders and those responsible for governance should ensure that:

- improvement plans provide a robust framework and timescales for improvement, which enable staff to be held to account for the quality of their work
- the progress of pupils who make return visits is further improved by ensuring that work is presented and organised in a way that promotes a pride in work
- the quality of learning experiences for children who attend early years classes is consistently at least good across the two sites.

I am copying this letter to the chair of the governing body, the regional schools commissioner and the director of children's services for Devon. This letter will be published on the Ofsted website.

Yours sincerely

Tonwen Empson
Her Majesty's Inspector

Information about the inspection

Meetings took place throughout the day with the headteacher. Together, we looked at pupils' work. Inspectors also looked at a range of school documents, including the development plan and subject action plans. Meetings were held at both sites in Exeter and Barnstaple with subject leaders.

Safeguarding documents and arrangements, including those for recruitment, were checked. Visits were made to observe learning and talk to staff at both sites. Learning was also observed at a pupil's house.

Parents' views were taken into account from the 10 responses to Ofsted's online survey, Parent View, comments were made in a book at the Barnstaple site, discussions with a parent and a letter was sent to the inspection team. The eight responses to a pupil survey and the eight responses to a staff survey were also taken into account.

Inspectors met with the chair and safeguarding lead of the management board. Phone calls took place with a representative from Devon local authority, a headteacher who has pupils who attend the school and with the school's improvement partner. There was also a meeting with a representative from the medical staff who works with school staff.