

Poole Hospital NHS Foundation Trust

Monitoring visit report

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Monitoring visit: main findings

Context and focus of visit

From October 2018, Ofsted undertook to carry out monitoring visits to all newly directly funded providers of apprenticeship training provision which began to be funded from April 2017 or after by ESFA and/or the apprenticeship levy. This monitoring visit was undertaken as part of those arrangements and as outlined in the 'Further education and skills inspection handbook', especially the sections entitled 'Providers newly directly funded to deliver apprenticeship training provision' and 'Monitoring visits'. The focus of these visits is on the themes set out below.

Poole Hospital NHS Foundation Trust (the Trust) started delivering apprenticeships in October 2017. At the time of the monitoring visit there were 70 apprentices enrolled on a mix of framework and standards-based apprenticeship programmes. All apprentices are employees of the Trust and are working towards qualifications at level 2 and level 3 in healthcare support and adult care worker.

Themes

How much progress have leaders made in ensuring that the provider is meeting all the requirements of successful apprenticeship provision?

Insufficient progress

Trust leaders have not implemented appropriate governance arrangements for the apprenticeship programme. Managers and leaders do not have sufficient oversight of the quality of training delivery. Trust-wide monitoring and reporting processes are underdeveloped. As a result, board members are unable to present the necessary constructive challenge to managers or hold them to account for delivering high-quality training.

Leaders and managers have an insufficient understanding of what constitutes a high-quality apprenticeship programme. Having delivered healthcare diplomas for over 10 years, the Trust made the transition to delivering apprenticeships in October 2017. However, leaders and managers have failed to gain a clear understanding of the additional requirements of an apprenticeship training programme. They do not pay enough attention to the quality of teaching, learning and assessment and safeguarding of apprentices. As a result, the Trust does not have the appropriate resources and processes in place to ensure that the programme is delivered successfully and safely.

Leaders and managers do not plan and manage the programme effectively. Managers do not collect, analyse or use data sufficiently well to inform their curriculum planning or to drive improvements. For example, managers are unable to provide accurate information on the numbers of apprentices who remain on the programme or their progress. Managers have an insufficient oversight of apprentices'

attendance at off-the-job training. Although registers are maintained, these are not analysed to agree interventions for individual apprentices who are making slow progress or to inform future planning. For example, managers have not planned additional off-the-job training for apprentices who are studying functional skills, to ensure that they receive their full theoretical entitlement.

Managers do not use the electronic portfolio reporting system well enough to benefit all apprentices. They do not use the system to record sufficiently detailed, accurate information about individual apprentices' progress. A few apprentices are unable to access assignments or information on the electronic portfolio, and as a result they are not making swift progress.

The self-assessment process is ineffective. Managers do not use it as a tool to drive improvement. Managers do not consult enough to ensure that the process reflects an accurate, or sufficiently critical, picture of the quality of the Trust's apprenticeship programme. Leaders have not implemented processes or procedures to either assure or improve the quality of the apprenticeship programmes, including the quality of teaching, learning and assessment.

The majority of apprentices develop substantial new practical skills and make an effective contribution to the Trust early in their programmes. Most are newly recruited to the Trust. Apprentices display professionalism and maturity in their roles, and most have aspirations to progress in their career within the healthcare sector. They enjoy their jobs and have pride in their work and role as a healthcare professional. Apprentices receive a full wage, comparable with colleagues, and they are supported and valued as members of staff on the wards.

Managers liaise effectively with ward managers to plan off-the-job training during times of high pressure in the hospital. Managers and apprentices ensure that patient care is not compromised.

What progress have leaders and managers made in ensuring that apprentices benefit from high-quality training that leads to positive outcomes for apprentices?

Insufficient progress

Managers do not challenge assessors sufficiently to ensure that apprentices complete on time, and consequently the vast majority are making slow progress and not making the progress that they are capable of. Too many apprentices have passed their planned end date. Assessors and trainers discuss individual apprentices' performance in informal meetings. However, these do not result in timely interventions to address apprentices' slow progress.

A few apprentices are not clear which apprenticeship they are on and do not know when they are due to complete their programmes. This makes it challenging for them to plan their career path within the health service or in higher education. For example, apprentices who wish to apply for university are unclear about the timescales for completing their advanced apprenticeship.

Managers have been too slow in introducing the arrangements for standards apprenticeships. Most apprentices are not being supported or prepared well enough for end-point assessments. Most apprentices are unclear about the assessment criteria and the grades that they may achieve. As a result, they are not on track to achieve their full potential.

Assessors and trainers do not use reviews sufficiently well to check and record apprentices' skills and knowledge or to set meaningful and appropriate targets. Assessors do not place enough emphasis on measuring the development of apprentices' behaviours and attitudes. Ward managers do not contribute to the apprentices' reviews, but instead have separate review meetings with the apprenticeship manager. Apprentices are given insufficient feedback from these meetings about their progress and work performance.

Too many trainers and assessors do not have up-to-date or sufficiently advanced qualifications to deliver high-quality training. They lack a wide range of vocational experience to ensure that apprentices receive stimulating and challenging learning. For example, the highest level of vocational qualification that assessors hold is BTEC Diploma level 3. The vast majority have held clinical positions no higher than senior healthcare support worker within the hospital. Functional skills tutors do not have sufficiently high qualifications or knowledge to support apprentices well.

All apprentices receive off-the-job training through weekly study days, and the majority value this time to complete assignments and share experiences with their peers. However, too many theory sessions in study days are dull, and apprentices do not gain enough useful knowledge that helps them in their roles.

Apprentices receive useful on-the-job training and they gain good practical skills and knowledge while working on the wards with medical staff. They are supported well by ward managers, who benefit from their apprentices' development in self-confidence, maturity and professionalism, especially when dealing with older or vulnerable patients. Apprentices gain knowledge and skills in processing clinical information about patients and they demonstrate a good understanding of when to seek appropriate medical support. The majority of apprentices develop their written English, and this improves the quality of their recording on patients' notes.

Assessors visit apprentices in the workplace frequently and support them on their study days. They provide apprentices with ongoing support between visits, and apprentices benefit from assessors' pastoral support. For example, one apprentice who was absent from work for three months was contacted regularly by her assessor and supported when she returned to work. This allowed the apprentice to maintain good progress and she expects to complete within her planned timescale.

How much progress have leaders and managers made in ensuring that effective safeguarding arrangements are in place?

Insufficient progress

Senior leaders have insufficient knowledge and understanding of the safeguarding requirements for independent training providers. Leaders and managers have not reviewed the safeguarding and 'Prevent' duty measures to satisfy themselves that they meet the government's requirements for apprentices. Leaders do not place sufficient emphasis on ensuring that the safeguarding arrangements to protect apprentices are effective. The culture of safeguarding within the education team is weak, and insufficient priority is given to apprentices' safety and welfare. Managers have not reviewed safeguarding policies and procedures, and as a result too many are not up to date.

Managers and education staff have not received appropriate training on safeguarding within the past 12 months. As a result, some training staff lack knowledge and confidence in discussing extremism and radicalisation, British values and safeguarding with apprentices. Staff are not able to develop apprentices' knowledge to the level expected. Consequently, the majority of apprentices lack understanding of key matters such as British values and how to keep themselves safe from radicalisation and extremism and when online. Most apprentices receive information on these topics at induction, but this is not reinforced during their apprenticeship programme.

The Trust's recruitment managers have not established sufficiently detailed and robust procedures for recruiting education staff. Managers do not systematically recruit all staff in accordance with the government's guidance on safer recruitment. Managers do not ensure that Disclosure and Barring Service (DBS) records are accurately maintained. They are therefore unable to confirm that individual staff members have the appropriate checks. The majority of recruitment files that were sampled did not contain confirmation of up-to-date DBS records for education staff.

The designated safeguarding lead has a good understanding of how to refer safeguarding and 'Prevent' duty concerns to the appropriate authorities. Safeguarding staff within the Trust have established good relationships with external agencies, including the local authority. The designated safeguarding lead for apprentices has not received the appropriate training. However, this was swiftly rectified while the inspection took place and the lead will shortly undertake training.

The vast majority of apprentices feel safe and they know whom to contact if they have any concerns. They adhere to the Trust's health and safety policies and wear appropriate personal and protective equipment on the wards.

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