



Making Social Care
Better for People

inspection report

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

Holly House School

Church Street North

Old Whittington

Chesterfield

Derbyshire

S41 9QR

29th November – 2nd December 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

Holly House School

Tel No:

01246 450530

Address

Church Street North, Old Whittington, Chesterfield,
Derbyshire, S41 9QR

Fax No:

Email Address:

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

Derbyshire County Council

Name of Head Mr Peter Brandt

CSCI Classification

Residential Special School

Type of school

Residential Special
School

Date of last boarding welfare inspection:

03/02/04

Date of Inspection Visit		29th November 2004	ID Code
Time of Inspection Visit		09:00 am	
Name of CSCI Inspector	1	Katarina Djordjevic	074488
Name of CSCI Inspector	2	Nancy Bradley	136454
Name of CSCI Inspector	3	Susan Clarke, Pharmacy Inspector	155508
Name of CSCI 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 CSCI. 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 Peter Brandt & Mrs Susan Thomas	

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INTRODUCTION TO REPORT AND INSPECTION

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

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

This document summarises the inspection findings of the CSCI in respect of Holly House School

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

Holly House is a residential special school catering for children of both sexes with emotional and behavioural difficulties, aged 7 – 14 years. The aim of Holly House is to meet the special educational, emotional and behavioural needs of its students and enable students to return to mainstream school wherever possible.

The residential provision consists of two units, which have their own kitchen/ dining facilities, lounge and bathing facilities. There are four single bedrooms and 6 shared bedrooms. There are activity rooms in both units.

PART A SUMMARY OF INSPECTION FINDINGS

WHAT THE SCHOOL DOES WELL IN BOARDING WELFARE

The boarding accommodation was of a very good standard and the students were provided with a wide range of purposeful leisure activities.

The students were provided with a good level of basic care and were generally happy with the care they received.

The standard of meals at the school was good and they were enjoyed by the students.

WHAT THE SCHOOL SHOULD DO BETTER IN BOARDING WELFARE

Improvements should be made to students' placement plans and risk assessments as they lacked detail about assessed needs, what action should be taken to meet the needs and by whom..

The Complaints procedure should be reviewed and all staff should receive training on what constitutes a complaint. The Head Teacher should ensure that staff are aware of the need to investigate and record complaints adequately.

Staff should receive further Child Protection training to ensure they are clear about their responsibilities.

Improvements should be made to the administration of medication systems.

An assessment of individual training needs of all care staff should be undertaken and a training plan/strategy produced to ensure staff have the skills and knowledge to provide care in line with current professional child care practice and the National Minimum Standards.

CONCLUSIONS AND OVERVIEW OF FINDINGS ON BOARDING WELFARE

The residential provision was closed for approximately two months at the beginning of the new school year/September 2004. This was due to the Head Teacher liaising with the LEA to ensure that the school could meet its stated aims and objectives as detailed in the school's 'Statement of Purpose' and that the requirement for using the residential provision was included on the student 's Statement of Special Educational Needs.

The CSCI is concerned at the lack of progress made by the school in meeting the Recommended Actions of the last report and the findings of this inspection. This inspection has identified the same fundamental issues as the last inspection. There was evidence to support that there was a lack of understanding of what is required by the National Minimum Standards, current child care practices and the responsibilities of the school in some areas.

It is of concern that the professional development needs of the Head of Care had not been addressed as recommended in the last announced inspection report. This was considered to be a key factor in enabling the school to make the necessary progress in meeting the National Minimum Standards.

The Inspectors were pleased to report that where possible the Head Teacher responded to issues identified during the inspection and in some cases took remedial action. By the end of the inspection he had produced an Action Plan to address a number of issues.

This was the first time that the school had been inspected by a specialist pharmacist Inspector of the Commission for Social Care Inspection.

There was a Recommended Action in the last Announced Inspection report for the CCTV to be removed as it was did not meet the criteria detailed in Standard 23.7 to warrant its use. The Head Teacher did not agree with this. However, after liaising with the LEA and taking legal advice the Head Teacher has been instructed not to use the CCTV unless the criteria detailed in Standard 23.7 are met. At the time of this inspection the CCTV was in operation as the criteria did apply to one student. The CSCI will continue to monitor the use of CCTV.

Questionnaires were sent out to all students' parents. Feedback from parents was generally very positive. Parents were particularly impressed with the commitment and patience of the staff. Some parents commented that communication between the school and themselves should be improved.

NOTIFICATIONS TO LOCAL EDUCATION AUTHORITY OR SECRETARY OF STATE

Is Notification of any failure to safeguard and promote welfare to be made by the Commission for Social Care Inspection to the Local Education Authority or Department for Education and Skills under section 87(4) of the Children Act 1989 arising from this inspection?

YES

Notification to be made to: **Local Education Authority
Secretary of State**

YES
NO

The grounds for any Notification to be made are:

The Inspectors issued four Urgent Welfare Notices, which required the school to produce an Action Plan within one week detailing how the issues of concern would be addressed. The Urgent Welfare Notices were in relation to the following:

1. The poor quality of students' placement plans and risk assessments. They gave insufficient details regarding the student's identified needs, how needs should be met and by whom.
2. The appropriateness of the placement for one student. The Inspectors considered that the complex needs and behaviours presented by the student could not be met by the staff team at the school and that the student presented a significant risk of harm to other students, staff and potentially to himself.
3. There was no documentary evidence to support that some staff had had relevant recruitment checks including List 99/CRB checks.
4. The Inspectors considered the risk assessment carried out in respect of the two tier roof spikes (anti- climb cacti fitted to the roof) to be unsatisfactory and were concerned that the risk assessment did not accurately reflect the level of risk posed to the students.

IMPLEMENTATION OF RECOMMENDED ACTIONS FROM LAST INSPECTION

Recommended Actions from the last Inspection visit fully implemented?

NO

If No, the findings of this inspection on any Recommended Actions not implemented are listed below:

No	Standard	Recommended actions	

1	RS1	The school should revise the Prospectus and other related documents to accurately describe the services actually currently provided. Some progress has been made. The revised draft document was due to be presented at the next school Governor's meeting.	31.07.04
2	RS2	The school should write and implement a policy and procedure in respect of consultation with students and the recording of such consultations.	31.07.04
3	RS2	The school should provide staff with training in relation to race and culture awareness.	01.09.04
4	RS3	The school should write and implement a policy and procedure in respect of working with students of the opposite sex.	31.05.04
5	RS4	The school should review the complaints policy, procedure and practice to ensure that complaints, investigations and outcomes are recorded.	30.06.04
6	RS4	The school should provide training to staff in relation to the investigation of complaints.	30.06.04
7	RS5	The school should revise the Child Protection policy and procedure in line with Appendix 1 of the National Minimum Standards. Some progress has been made.	30.06.04
8	RS5	The school should provide child protection training to all staff, including ancillary staff. Some progress has been made.	30.06.04
9	RS6	Where bullying behaviour has been identified, the student's care plan should include strategies for managing the behaviour.	30.06.04
10	RS7	The school should put in place a notification system in accordance with Standard 7. Some progress has been made.	31.07.04
11	RS10	All sanctions should be recorded in accordance with Standard 10.9. Some progress has been made.	30.06.04
12	RS10	All physical restraints should be recorded in accordance with Standard 10.14.	30.06.04
13	RS12	The school should ensure that systems are in place to provide consistent care and behaviour management planning across both school and residential settings.	31.07.04

14	RS14	The school should ensure that health plans are written in accordance with Standard 14.6.	30.06.04
15	RS17	The school should devise and implement a care planning system that incorporates assessed needs, risk assessments, behaviour management plans and outcomes.	30.06.04
16	RS17	The school should ensure that behaviour management plans provide clear and detailed guidance to staff on the management of behaviours of concern.	30.06.04
17	RS18	The school should ensure that students' files contain the information listed in Standard 18.2	30.06.04
18	RS22	The school should ensure that care plans itemise the individual support required by students and record the effectiveness and outcomes of the support provided	30.06.04
19	RS27	The school should ensure that staff are recruited and records are maintained in accordance with Standard 27.2.	31.05.04
20	RS29	The school should devise a training strategy and plan to provide training in accordance with Appendix 2 of the National Minimum Standards.	30.06.04
21	RS31	The Local Education Authority should review the professional development needs of the Head of Care and to ensure that support and training is in place.	31.07.04
22	RS32	The school should devise and implement monitoring systems in accordance with Standard 32.2.	01.09.04

RECOMMENDED ACTIONS IDENTIFIED FROM THIS INSPECTION

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

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	RS2	The school should write and implement a policy and procedure in respect of consultation with students and the recording of such consultations. This is repeated from the last inspection report.	31.05.05
2	RS2	The school should provide staff with training in relation to race and cultural awareness. This is repeated from the last inspection report.	31.05.05
3	RS3	All records relating to students should be locked away at the end of the school day/ whilst not in use in the residential unit.	28.02.05
4	RS3	The school should write and implement a policy and procedure in respect of working with students of the opposite sex. This is repeated from the last inspection report.	31.05.05
5	RS4	The complaints procedure should be reviewed to ensure it meets the Standard, including making reference to the students' and parents' right to directly complain to the CSCI. This is repeated from the last inspection report.	30.04.05
6	RS4	The school should provide training to staff in relation to what constitute a complaint, the investigation of and outcome of complaints. This is repeated from the last inspection report.	30.04.05

7	RS4	The Head Teacher should ensure that all concerns and complaints are investigated and recorded as required by this Standard.	31.03.05
8	RS5	The school should revise the Child Protection policy and procedure in line with Appendix 1 of the National Minimum Standards. This is repeated from the last inspection report. On completion of this, it should be submitted to the local ACPC for consideration.	31.03.05
9	RS5	The school should provide child protection training to all staff, including ancillary staff. Staff should be clear about their responsibilities in following up potential Child Protection issues. This is repeated from the last inspection report.	30.04.05
10	RS6	The school should take further action to address the high incidents of bullying.	31.05.05
11	RS6	Where bullying behaviour has been identified, the student's care plan should include strategies for managing the behaviour. This is repeated from the last inspection report.	28.02.05
12	RS7	The school should ensure that they notify promptly the relevant agencies including the CSCI of the events detailed in Standard 7. This is repeated from the last inspection report.	31.03.05
12	RS8	The policy on 'Absence of a child without authority' should be reviewed to include the need to record discussions held with the student on their return.	31.05.05
13	RS9	Care staff should receive training in positive care and control.	01.09.05
14	RS10	The school's behaviour management policy should be reviewed to ensure it contains full details of the systems for rewards and sanctions and the physical intervention policy.	31.05.05
15	RS10	Guidance on the application of sanctions should be produced for staff.	31.05.05
16	RS10	Improvements should be made to the recording of sanctions applied to ensure that it meets Standard 10.9 and that sufficient detail is recorded. This is repeated from the last inspection report.	31.05.05

17	RS10	Further improvements should be made to the recording of incidents of physical intervention. The record should be kept in the residential unit.	31.03.05
18	RS12	The school should ensure that systems are in place to provide consistent care and behaviour management planning across both education and residential settings.	31.03.05
19	RS13	Student's individual risk assessments should include any risks identified in relation to participation in on- site and off-site activities including transport.	31.03.05
20	RS14	The refrigerator for medication should be able to be locked when in use.	31.03.05
21	RS14	The information supplied on the medication consent form and information from case conferences should match with the name, dose and frequency of medication that is being administered.	28.02.05
22	RS14	The medication consent form must be kept up-to-date.	28.02.05
23	RS14	The school should hold only medication listed on the medication consent form for a student.	28.02.05
24	RS14	The name of the medication printed on the pharmacy-dispensing label should be the name used on the medication records.	28.02.05
25	RS14	The instructions on the pharmacy-dispensing label should match the medication administration that is taking place. The reason for any discrepancy should be documented.	28.02.05
26	RS14	The school should request the parent or carer to ask the GP to put the current instructions on the prescription.	28.02.05
27	RS14	Only staff authorised to administer medication should do so. If teaching staff should not be asked to administer medication, this should be stated in the policies.	28.02.05
28	RS14	Medication should only be administered from a container labelled by the dispensing pharmacist.	28.02.05
29	RS14	Medication should not be accepted from parents if it is not in a pharmacy-labelled container.	28.02.05
30	RS14	If staff refuse to administer a medication, because it is not in a container labelled by the dispensing pharmacist, they should document the incident.	28.02.05

31	RS14	Strips of medication should be returned to the pharmacy-labelled container after use and not left loose inside the student's plastic box.	28.02.05
32	RS14	The pharmacy-dispensing label on the medication must be legible.	28.02.05
33	RS14	All medication held should be in date.	28.02.05
34	RS14	Medication must not be re-dispensed by staff into another container to be administered at a later time.	28.02.05
35	RS14	Medication must not be re-dispensed by staff into another container to be administered at a later time.	28.02.05
36	RS14	<ol style="list-style-type: none"> 1. The medication policies should describe the systems used in the school. 2. It should be made clear in the policy that the school do not administer 'homely' remedies and what action staff should take if a student needed one to be administered. 3. It should be made clear in the medication error policy that medical advice should always be sought and not only if there is an immediate detrimental effect. 	30.04.05
37	RS17	Improvements should be made to ensure a holistic placement plan based on assessed needs is in place for each student using the residential provision. The plan should give clear details on how the needs will be met and by whom. An Urgent welfare Notice was issued at the time of the inspection to address this Recommended Action.	
38	RS17	Placement plans should be reviewed regularly and amended as necessary to reflect significant changes in the student 's needs or progress in his/her development.	31.01.05
39	RS17	Individual risk assessments should give clear details of what identified risks are and what actions to take to minimise or eradicate risks. These should be reviewed in conjunction with the placement plans. An Urgent welfare Notice was issued at the time of the inspection to address this Recommended Action.	
40	RS17	Staff should receive training in care planning, risk assessment and the role of key working.	31.03.05

41	RS18	The school should ensure that students' files contain all the information listed in Standard 18.2. This is repeated from the last inspection report.	28.02.05
42	RS18	Written entries in the students' case files should be clearly signed and dated at all times.	14.02.05
43	RS18	Staff should receive training/instruction in recording skills to address the issues identified in Standard 18.	31.03.05
44	RS19	Staff personnel files kept in school should contain all information detailed in Standard 19.2.	31.03.05
45	RS23	A written policy on the use of the CCTV should be produced.	30.04.05
46	RS23	Copies of the Environmental Health Officer's reports should be kept in the school and be available for inspection.	31.05.05
47	RS26	An environmental risk assessment should be carried out. This is repeated from the last inspection report.	28.02.05
48	RS26	A valid electrical installation certificate must be obtained. This is repeated from the last inspection report. A copy sent to the CSCI.	31.03.05
49	RS26	Fire drills in the residential unit should be carried out in line with the Fire Regulations/the Fire Authority.	28.02.05
50	RS27	The school should ensure that staff are recruited and records are maintained in accordance with Standard 27.2. This is repeated from the last inspection report.	31.03.05
50	RS27	The school must be able to produce documentary evidence that agency staff and taxi drivers used at the school have undergone the relevant checks as detailed in Standard 27.2 and Standard 27.9.	31.03.05
51	29	The school should devise a training strategy and plan to provide training in accordance with Appendix 2 of the National Minimum Standards. This is repeated from the last inspection report. This should be based on identified individual training needs and a personal development plan be produced for each staff member.	30.04.05
52	RS30	Staff including the Head of Care should receive supervision at the frequency detailed in Standard 30.2 and records kept.	30.04.05
53	RS30	Staff should receive an annual appraisal.	30.06.05

54	RS31	The Local Education Authority should review the professional development needs of the Head of Care to ensure that support and training is in place. This is repeated from the last inspection report.	31.03.05
55	RS31	The school should take action to ensure that a minimum ratio of 80% of staff have completed the NVQ Level 3 in the Caring for Children and Young People.	01.09.05
56	RS32	The school should implement the recently devised monitoring systems in accordance with Standard 32.2.	31.03.05

ADVISORY RECOMMENDATIONS

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

No	Refer to Standard*	Recommendation
1	RS1	The 'Welcome booklet' for the residential unit should be updated to reflect the changes in policies and procedures.
2	RS14	The maximum and minimum temperatures of the refrigerator for medication should be recorded daily, when it is in use, and lie between 2°C and 8°C.
3	RS14	Gaps should not be left between entries in the medication records.
4	RS14	Medication should be returned to parents before long holidays and fresh supplies obtained at the beginning of the next term.
5	RS15	The school should review the lunchtime meal to give students more time and make it a more relaxing event.
6	RS29	Records/details of the in-house training provided during the weekly staff meetings should be kept.

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	YES
• Chair of Governors	YES
Tracking individual welfare arrangements	YES
Survey / individual discussions with boarders	YES
Group discussions with boarders	NO
Individual interviews with key staff	YES
Group interviews with House staff teams	NO
Staff Survey	YES
Meals taken with pupils	YES
Early morning and late evening visits	YES
Visit to Sanatorium / Sick Bay	YES
Parent Survey	YES
Placing authority survey	YES
Inspection of policy/practice documents	YES
Inspection of records	YES
Individual interview with pupil(s)	NO
Answer-phone line for pupil/staff comments	NA

Date of Inspection

29/11/04

Time of Inspection

09.30

Duration Of Inspection (hrs.)

52

Number of Inspector Days spent on site

6

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

THE NUMBERS OF BOARDERS DURING THE INSPECTION VARIED EACH NIGHT. THE FIGURES BELOW GIVE THE NUMBERS OF CHILDREN/YOUNG PEOPLE WHO USE THE RESIDENTIAL PROVISION.

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

NUMBER OF BOARDERS AT TIME OF INSPECTION:

BOYS

GIRLS

TOTAL

Number of separate Boarding Houses

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

The scale ranges from:

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

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

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

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

STATEMENT OF THE SCHOOL'S PURPOSE

The intended outcome for the following standard is:

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

Standard 1 (1.1 – 1.9)

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

Key Findings and Evidence	Standard met?	3
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The school's 'Statement of Purpose' has been reviewed as recommended in the last announced inspection report. The Head Teacher has liaised with the Local Education Authority to ensure that where it has been identified that a child would benefit from accessing the residential provision this is included in the child's Statement of Special Educational Needs.

The school's prospectus was being reviewed and was in draft form. This was due to be presented at the next School Governor's meeting. This was more 'child friendly'. The 'Welcome booklet' had not been reviewed to reflect the changes in policies and procedures since the last announced inspection. However, the Head Teacher reported that this would be updated to reflect the review of the policies and procedures and to ensure it is more 'child friendly'/accessible to the students.

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?	2
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In the residential setting there was good observational evidence that the students were informally consulted about day to day living arrangements and issues. The students seen were confident in expressing views and opinions. There was no evidence of these views and opinions having been recorded. Residents' meetings were not held in the Unit. There was no policy in respect of consultation with students.

School Council meetings were held. However, the Head Teacher reported that these had not taken place as often as he would have liked.

The Head Teacher reported that the school produces a Newsletter.

Staff had not yet received training regarding working with students and families from differing ethnic, cultural and religious origins. The Head of Care was due to attend some training in January 2005.

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 was a policy on Confidentiality, which included guidance on searching a student's belongings. There was a sheet for recording searches. Information about the students was stored confidentially in the residential unit. However, the Inspectors were concerned that files and information used by the Inspectors, which included student's files, medication records and Child Protection records were not locked away at the end of the inspection day.

The Head Teacher reported that staff did not assist with personal care. Observations by the Inspectors supported that staff were sensitive to the needs of the students and were respectful. However, the school had not produced a policy and procedure for working with students of the opposite sex as required in the last Announced Inspection report.

Issues regarding the use of the CCTV have been discussed in Standard 23.

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

The school's internal complaint's policy has been reviewed since the last announced inspection. There was a policy on pupil complaints. However, this did not meet the requirements of Standard 4.3. The policy did not state that students and their parents could make a complaint directly to the CSCI.

The school stated that staff had received training on the handling complaints. However, evidence from this inspection suggests a lack of understanding about the handling of complaints including what constitutes a complaint and recording requirements. The Inspector was informed that a parent had phoned that day to raise concerns and that this had been recorded in the office daily telephone log, which is accessible to all staff. The Inspectors were informed that the school had not had any complaints received since the last announced inspection from parents/carers or students. However, it was of concern that it came to light from discussions with staff that a concern had been raised by one student's parents about the conduct of a member of care staff. The Head Teacher or Head of Care had not raised this with the Inspectors at any time during this inspection. The Inspector raised this at the feedback meeting and the Head Teacher confirmed that parents of one student had been to see him to express concerns.

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 CSCI 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 Child Protection policy has been reviewed since the last announced inspection. However, it did not include points 7 and 12 of Appendix 1 of the National Minimum Standards. The revised policy had not been submitted to the local Area Child Protection Committee for consideration.

Child Protection training has been provided for care staff but not ancillary staff since the last announced inspection.

An examination of care records indicated a lack of understanding about staff responsibilities in following up Child Protection issues.

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 a detailed policy to deal with bullying. The school subscribed to Derbyshire Education Department Anti-Bullying Scheme. The school gained the initial award in November 2003. The Head Teacher reported that bullying is discussed regularly in school assembly. The school's policy on sanctions stated that sanctions would be applied to any acts of bullying. The school had recently introduced a 'Say it and Sort it' box for trying to tackle bullying where students could put in any concerns relating to bullying. The Head Teacher reported that he had not yet received any concerns through this system. There were lots of posters in the school about bullying.

The Head Teacher reported that incidents of bullying are audited and student surveys are also carried out.

From examination of records, the Inspectors found that there was a high level of bullying in the school. Strategies for managing bullying behaviour did not appear explicitly in any of the care plans inspected.

Percentage of pupils reporting never or hardly ever being bullied

65 %

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?**

1

A policy regarding notification to appropriate authorities had been produced since the last announced inspection. However, information provided in the Pre-Inspection Questionnaire regarding significant events, discussion of these with the Head Teacher and an examination of records highlighted that the school had not been informing the Commission for Social Care Inspection as required. This included notification of the Police being called to the school. However, by the end of this inspection the Head Teacher had produced a policy on Police involvement, which included instructions for staff to notify the Commission for Social Care Inspection.

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

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

0

0

0

2

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
<p>The policy on 'Absence of a child without authority' had been reviewed in June 2004. However, the Inspectors were concerned that the policy stated that the parents and not the school were responsible for contacting the Police if a child went missing from the school. This issue and the school's duty of care were discussed with the Head Teacher at the time of the inspection. The Head Teacher revised the policy immediately to ensure the school were fulfilling their responsibilities. The policy did not state that there was a need to record details of discussions held with the student on their return.</p> <p>Risk assessments were carried out in respect of a student absconding. However, those seen by the Inspectors lacked details about actions to be taken to minimise the risk.</p>		
Number of recorded incidents of a child running away from the school over the past 12 months:		34

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?	1
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The relationships between students and residential staff were observed to be of a satisfactory standard. Care staff presented as caring and committed to providing a good basic level of care. Discussions with staff indicated that they had an awareness of individual needs. Attention was given to the encouragement of acceptable behaviour. Observations made by the Inspectors identified that students were clear about what was acceptable behaviour and the boundaries. This included encouraging socially acceptable behaviours at meal times for example.

However, the Inspectors identified the same issues as the last announced inspection in terms of the general approach to the task of caring for other people's children. The approach was still one of 'common sense' rather than professional childcare practice. The Inspectors are of the opinion that for some staff this may be due to a lack of professional training in recent child care practice and legislation.

Feedback and discussion with staff identified that the approach from some staff could be intimidating and oppressive. It was reported that some staff shout at students, which was considered by the staff expressing the concerns, an inappropriate method to manage behaviour. This was discussed at the feedback meeting.

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

Some improvements have been made since the last announced inspection. The school's behaviour management policy has been reviewed since the last announced inspection. However, it did not include all details of the system of rewards, sanctions and the physical intervention policy on which behaviour management at the school is based.

Staff received HEART (Handling Emotion, Aggression and Restraint Techniques) training in June 2004. Since the last announced inspection the Deputy Head Teacher has produced a policy on the 'Use of Restrictive Physical Intervention', which the Inspector considered to be a useful document.

The policy on sanctions had been reviewed since the last announced inspection and now included a list of prohibitive sanctions. The policy also gave an explanation of each sanction. However, there were no guidelines on the application of sanctions. Staff used their own discretion, which potentially made for a lack of consistency and staff vulnerable to criticism about the fairness of sanctions applied.

Two books were kept to record sanctions, one for junior students and the other for senior students. The quality of recording in these books was poor and left the reader unclear. The book did not include a section for students to write their views and sign the record. It was of concern that these issues had not been identified by the Head of Care. When reviewing the record book, the Head Teacher must consider how the system will allow for students to comment and sign the record whilst maintaining confidentiality.

Incident report forms were used to record any incidents of difficult behaviours including the use of physical intervention. These were monitored and signed by the Head Teacher. Although there had been some improvement in the recording of details, there were still occasions where the forms lacked detail of what actually happened, how it was managed and the final outcome. In addition to the Incident report forms, books were kept in the staff room for each class to record any incidents of physical intervention. This did not meet Standard 10.14.

QUALITY OF CARE

The intended outcomes for the following set of standards are:

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

Standard 11 (11.1 - 11.6)

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

Key Findings and Evidence	Standard met?	3
<p>The school had a written admission policy. It was referred to in the school's prospectus and the residential unit booklet. The policy was also included in the staff policy handbook. A written policy covering the reception of new students into the residential unit and students leaving the school had been produced since the last announced inspection. This was seen by the Inspectors and found to be satisfactory.</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?**

1

Residential staff assisted in classrooms when required and teaching staff participated in evening activities with the students, alongside residential staff. However, there had been little progress in joint working between the teaching and residential staff. Liaison between teaching and residential staff was reported to be very infrequent and that residential staff did not discuss behaviour management plans with teaching staff. It was difficult to see how consistent behaviour management planning across the educational and the residential setting could be achieved when there was little contact between teaching and residential staff to discuss such issues. Teaching staff reported that they had not been involved in drawing up or seen the students' placement plans and risk assessments.

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

There was a wide range of activities available to the students on the school site with a well-used gym, all-weather play area, music room, games room as well as computer games jig saws etc. The students reported that they enjoyed these activities. The Inspectors spent an evening with the students. On one evening students were engaged in craft activities in preparation for Christmas.

Very good attention was given to outside activities and there were regular trips out to engage in a variety of activities from skiing to fishing. Good links had been established with a local football club and regular training sessions took place.

General risk assessments were in place for activities but risk assessments for individual students were not in place.

Standard 14 (14.1 - 14.25)

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

Key Findings and Evidence

Standard met?

1

This was the first time that the school had been inspected by a specialist pharmacist Inspector of the Commission for Social Care Inspection. Medication was stored in a locked cupboard in the residential unit's medical room from which all medication is administered. A refrigerator for medication was also available for use, which was not lockable. The Head of Care stated that the refrigerator had not been needed since it was purchased over a year ago.

The medication records and medication for three students were examined. For each student there was a medication consent form listing the student's medication, which had been completed by a parent. The administration records for each student were kept with this. The strength and dose of medications administered had been recorded. The brand name had been used for some medications on the administration record but the pharmacy-dispensing label stated the generic drug name. On one medication record there were gaps left between records of administration. The Head of Care stated that these would have been occasions when the student did not stay overnight. The number of gaps did not correspond to the number of days between records. Records for other students, who did not stay every night, had been completed with no gaps in the records. For one student the frequency of administration of a medication listed on the medication consent form was different to the frequency of administration taking place. At one student's case conference in August 2004 it had been identified that he was prescribed two medications. It had not been queried why only one medication had been listed on the recent medication consent form. Several weeks prior to the inspection staff had been asked to administer the second medication for the first time. Staff stated that they refused to administer it because it had not been supplied in the original packaging with appropriate labelling. This incident had not been documented. The monitoring of medication records by a senior member of staff had been documented. Records of medication receipt and disposal were seen.

Each student's medication was kept in an individual plastic box in the medication cupboard. Strips of several medications were loose inside the plastic boxes and not in the original labelled container. One strip of medication did not have an original container with it, the medication consent form did not list it and it was out of date. Instructions had been written on the plastic box stating 'one tablet when required'. Medication for a student who stayed overnight very occasionally had been retained from previous terms and had been dispensed over six months previously. The label on this preparation was very worn and could not be read accurately. For one student the dosage of a medication listed on the pharmacy dispensing label had been altered by a parent. The medication records indicated that the altered dosage had been administered since at least seven weeks previously. The supply being used had been dispensed two weeks previously. The school had not requested the parent to ask the GP to put the current instructions on the prescription. An empty unlabeled medicine bottle was seen in one student's plastic box. When asked staff stated that this had been supplied containing a tablet. The student's parent had told staff that it was a vitamin tablet and asked staff to administer it which they had done.

The medication policies do not accurately describe the systems used in the school. It is not stated that the school do not administer 'homely' remedies or what action staff should take if a student needed one to be administered. The medication error policy stated immediate

medical attention must be obtained if there was an immediate detrimental effect. It did not make it clear that medical advice must be sought even if there was not an immediate detrimental effect. The Head of Care and pharmacist Inspector discussed the different stages of self-administration and the records needed.

Staff stated when asked that if medication was needed outside the school the dose needed was transferred to another container and this was carried in a locked box by a member of staff. One member of teaching staff informed the Inspectors that they had been asked to administer lunchtime medication. The Head of Care stated that she was unaware of this and that only approved care staff should administer medication. A list of the approved care staff and their initial was kept with the medication records. This was not reflected in the medication policies, which did not make it clear that teaching staff should not administer medication.

An examination of care files identified that there were some health details but no clear written health care plan.

All staff except one had Basic First Aid training in November 2004.

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

The standard of meals at the school was good and they were enjoyed by the students. The cooks were aware of the preferences of the students and took these into account when these students were resident. Apart from vegetarian diets, there were no special diets required at the time of the inspection. The cook reported that special dietary needs could be catered for.

There was good communication between the cooks and the students in respect of preferences and between the cooks and staff in respect of any eating difficulties. The cook felt that the lunchtime meal was hurried and students should be given more time.

The Inspectors joined students for breakfast, lunch and tea. The meals taken in the residential unit were structured but relaxed and were a social occasion. There was ample evidence that students' were given choices and offered second helpings. The Inspector supported the view expressed by the cook that the lunchtime meal could be more relaxing. It is acknowledged that this would be dependent on the needs and behaviour of individual students.

Standard 16 (16.1 - 16.7)

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

Key Findings and Evidence

Standard met?

3

The students were only resident for very brief periods and the provision of personal requisites and clothing was dealt with by parents. However, it was noted that PE kits provided by the school were communal. This was discussed with the Head Teacher who, by the end of this inspection had ordered individual PE kits for all the students who used the residential unit.

The Head of Care reported that staff do not keep pocket money on behalf of students. The students were provided with a lockable cash tin in their bedrooms.

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

As part of the case tracking process the Inspectors examined three student's files. These had been re-organised since the last announced inspection to try and meet the Recommended Actions made in the previous report. However, placement plans seen were of a poor quality. They gave insufficient details regarding a student's identified needs and did not give clear and sufficient details on how needs should be met and by whom. A new risk assessment format had been produced since the last announced inspection, which was considered to be a useful tool. However, risk assessments seen lacked detail about what the actual risk was and how it should be managed.

A key worker system had been introduced in the residential unit. However, it was evident that staff were not clear about the roles and functions of a key worker.

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

Student s' care files had been re-organised and contained some of the information required by Standard 18.2. Copies of the following were not kept in the individual files:

- Incident report forms which detailed incidents of physical intervention
- Accident report forms
- Absent without leave forms.

Written entries in case files were not always clearly signed and dated. Entries in case records/daily diary reports were unclear and lacked detail of what happened, how incidents were managed and the outcome. In some instances, terminology used was considered unprofessional and created a poor impression.

Standard 19 (19.1 - 19.3)

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

Key Findings and Evidence**Standard met?**

2

The majority of the information required in Standard 19 was kept at the school with the exception of information on staff. This has been discussed further in Standard 27.

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

As the students were resident only for limited periods of time, maintaining contact with parents was not a major issue. The students were provided with a pay phone and could also use the staff phone, if necessary.

There was evidence to support that there was contact between some students and their parents/carers.

Standard 21 (21.1 - 21.2)

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

Key Findings and Evidence**Standard met?**

9

This Standard is not applicable to Holly House school.

Standard 22 (22.1 - 22.13)

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

Key Findings and Evidence**Standard met?**

1

The lack of detailed, individual planning has been reported elsewhere in this report and a number of Recommended Actions made. The absence of such planning made it difficult to assess whether individual support was being identified and provided as required. However, as part of the case-tracking, it was evident that the school was not able to meet the needs of one particular student.

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?	2
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The school was in a good location and provided well-proportioned accommodation for the various residential school activities.

After liaising with the LEA and taking legal advice the Head Teacher has been instructed not to use the CCTV unless the criteria detailed in Standard 23.7 are met. At the time of this inspection the CCTV was in operation as the criteria did apply to one student. The CSCI will continue to monitor the use of CCTV. However, there was no written policy on the use of the CCTV.

The most recent Environmental Health Officer report was not available at the school. The cook informed the Inspector that these were held centrally at County Offices.

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?	3
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The residential accommodation was of a very high standard and provided the students with well furnished and decorated bedrooms, a variety of activity areas and a homely kitchen and lounge area.

The wash hand basins, which were in communal corridors had been removed and fitted in all bedrooms.

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 bathrooms, including baths, showers and toilets were of a high standard.

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

The Inspectors were concerned that an environmental risk assessment had not been carried out. Two Inspectors visited the school in September 2004 to discuss Child Protection issues and to look at progress made in meeting some of the Recommended Actions from the previous Announced Inspection report. One Inspector noted that anti-climb cacti (two-tier roof spikes) were fitted to the roofs. The Head Teacher reported that these had been in place a number of years and had been agreed with the LEA. However, the school had not carried out a risk assessment. The Head Teacher was advised to carry out a risk assessment and keep a written record as a matter of priority. At the pre-inspection planning meeting held the week before the inspection, a written risk assessment had not been produced. A risk assessment had been produced by the time of this inspection. However, the Inspectors were concerned that the actions recorded to minimise the risk were inadequate one of which relied on all the students being able to read a notice. The Inspectors issued an Urgent Welfare Notice in respect of this.

Attention was being given to water temperature control.

The school had a valid gas safety certificate. There was no valid electrical installation certificate although the Head Teacher had obtained quotes for this test to be carried out.

An inspection of fire safety records identified that separate fire drills are not carried out for the residential unit.

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

No new care staff had been employed since the last announced inspection. However, an inspection of staff personnel files confirmed that all details required in Standard 27.2 were not available. The Head Teacher had recently started to get copies of List 99 and Police checks for staff employed from the LEA's personnel department. This had identified that there was no record of one member of the residential staff having had any such checks. An Urgent Welfare Notice was issued in relation to the matter, which required the Head Teacher to take appropriate action to ensure the protection and safety of all the students. This was addressed within a week of the notice being issued.

The Head Teacher reported that the school uses an agency for supply teachers and teaching assistants. Written confirmation was not obtained from the agency verifying that individual staff had received the relevant recruitment checks.

The Head Teacher was unable to provide written confirmation that all taxi drivers have had a CRB check. The LEA has produced a Code of Practice regarding the roles and responsibilities of taxi drivers. Some of the information was of concern to the Inspectors including the statement that taxi drivers may restrain students. The Head Teacher shared this concern and was unable to confirm if taxi drivers received any training in the use of restraint.

Total number of care staff:

5

Number of care staff who left in last 12 months:

0

Standard 28 (28.1 - 28.13)

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

Key Findings and Evidence**Standard met?**

3

There were no staff vacancies in the residential unit. However, the Head Teacher reported that the closing of the residential unit at the beginning of the new school year had affected the morale of the residential staff resulting in a number of staff taking sick leave. Staff sickness in the residential unit is traditionally low.

Staffing levels were good for the numbers of students using the residential provision at the time of this inspection.

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

The staff training file seen by the Inspectors did not include details of training for residential staff. This was discussed with the Head of Care who informed the Inspectors that residential staff kept their own training certificates. The Pre-Inspection Questionnaire stated that residential staff receive regular in-house training during the weekly residential staff meetings. However, records/details of this in-house training were not kept.

The school did not have a staff training plan/strategy based on identified training needs. Staff did not have a personal development plan.

The Inspectors were informed that Fire Safety training, Moving and Handling and Child development training was being provided for residential staff on 10 December 2004. The Inspector enquired of the Head of Care what the training on child development entailed. The Head of Care was unclear about this.

Discussions with care staff identified varying attitudes towards training and development. One staff member had undertaken several external courses independent of the school. Not all staff were studying for the NVQ level 3 in Caring for Children and Young People. The Inspectors were given conflicting information as to why some staff had not enrolled on the course.

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

The Inspectors were given conflicting information about the frequency of supervision. One care staff member reported that they had received six sessions in the last year. In discussion with the Head of Care, the frequency of supervision was clarified. The Head of Care reported that supervision was not being provided at the frequency required. She stated that she was looking to attend training on supervision skills as she had identified this as a personal training need.

The Inspectors were concerned that the Head of Care was not receiving regular supervision and therefore had not been given the opportunity to review and assess her professional development needs.

Staff had not received an annual appraisal since June 2003.

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?

1

The Head of Care has completed the NVQ 4 in Working with Children and Young People since the last announced inspection. She also has the NVQ Assessor's Award. However, the findings of this inspection have identified significant shortfalls in the skills and ability of the Head of Care and her apparent lack of understanding of what is required to meet the National Minimum Standards. This was raised at the previous inspection and needs to be addressed urgently.

The school will not meet the minimum ratio of 80% of staff having completed the NVQ 3 by January 2005.

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

60 %

Standard 32 (32.1 - 32.5)

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

Key Findings and Evidence

Standard met?

2

There were systems in place for recording most of the various issues itemised in Standard 32.2 and 32.3. However, there was no system in place for formally monitoring these records. The Head Teacher reported that these tasks had recently been delegated between the senior management team and that a formal monitoring system would be implemented in the near future.

Standard 33 (33.1 - 33.7)

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

Key Findings and Evidence**Standard met?**

3

Standard 33 visits were being completed in accordance with National Minimum Standards in respect of frequency and recording. The last visit took place on 12 July 2004 and the report referred to the introduction of a new Standard 33 visit report format. This was discussed with the Head of Care. A visit did not take place between September and the end of October 2004, as the residential unit was not operating.

PART C

LAY ASSESSOR'S SUMMARY

(where applicable)

Empty box for Lay Assessor's Summary.

Lay Assessor _____ **Signature** _____

Date _____

PART D

HEAD'S RESPONSE

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

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

Please limit your comments to one side of A4 if possible

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

Amendments to the report were necessary

NO

Comments were received from the provider

YES

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

NO

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

YES

Note:

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

D.2 Please provide the Commission with a written Action Plan by 9 March 2005, which indicates how recommended actions and advisory recommendations are to be addressed and stating a clear timescale for completion. This will be kept on file and made available on request.

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

Action plan was required

YES

Action plan was received at the point of publication

YES

Action plan covers all the statutory requirements in a timely fashion

YES

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

NO

Provider has declined to provide an action plan

NO

Other: <enter details here>

D.3 HEAD'S AGREEMENT

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

D.3.1 I _____ of Holly House School 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 Holly House School am unable to confirm that the contents of this report are a fair and accurate representation of the facts relating to the inspection conducted on the above date(s) for the following reasons:

Print Name _____

Signature _____

Designation _____

Date _____

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

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