

Mulberry Bush School

Mulberry Bush School Ltd, Abingdon Road, Standlake, Witney, Oxfordshire OX29 7RW

Inspection dates	09/11/2016 to 11/11/2016	
The overall experiences and progress of children and young people	Outstanding	1
The quality of care and support	Outstanding	1
How well children and young people are protected	Good	2
The impact and effectiveness of leaders and managers	Outstanding	1

Summary of key findings

The residential provision is outstanding because

- All children make progress in a range of areas. For some, this is far quicker and/or greater than initial expectations. Parents, foster carers and other professionals spoken to identified areas of improvement, including socialising with other children, being calmer for longer, recognising emotions and being able to engage with the school curriculum.
- There is excellent inter-disciplinary working across education, therapy and residential provision, ensuring that children benefit from consistent and well-informed interventions by all staff involved with them.
- Collaborative working with the child's wider network is highly effective. It starts before admission and continues through to a child leaving the school. Therapeutic support provided helps parents and foster carers as well as children.
- Interactions between staff and children are purposeful, focused clearly on assisting children to develop and demonstrably therapeutic in their effect.
- There are strong links from children's education, health and care plans and local authority care plans to the school's integrated treatment plans. These lead to targets, agreed with children, which are worked towards.
- Managers and staff regularly review children's progress. Records evidence when children have demonstrated the capacity to accomplish specific social and emotional skills. These clearly show improvements from the point at which a child is first assessed and, if they have plateaued, allow therapy teams to promptly adjust the

- approach being taken.
- House activities ensure that children have the opportunity to develop their own interests, share experiences together, develop social skills and enjoy new experiences.
- The school actively develops practice and ensures that this is informed by evidence. Staff training is central to this, with a focus on ensuring that children receive a high-quality service.
- There is a culture in which internal challenge and complaints are welcomed and learning takes place as a result. Children report that managers and staff listen to and act on their views.
- Families and professionals almost universally regard the school as providing an excellent service. Phrases such as 'the support is fantastic', 'they are delivering high-quality work' and 'I have nothing but admiration for the staff working there', were typical of views expressed to inspectors.

Compliance with the national minimum standards for residential special schools

The school does not meet the following national minimum standard for residential special schools:

■ 14.1 Schools operate safe recruitment and adopt recruitment procedures in line with the regulatory requirements and having regard to guidance issued by the Secretary of State.

What does the school need to do to improve further?

- When health and safety assessments undertaken by competent professionals identify actions that the school needs to take, a record should be made of the work to be undertaken, a target date set for it to be done and the date when it is actually completed.
- Risk assessments should be undertaken of hot water taps and action undertaken if it is decided that water exceeds acceptable temperatures.
- Leaders and managers should ensure that complaints are responded to in compliance with the school's complaints policy, fully addressing the issues of concern and alerting complainants to the next stage of the process if they remain dissatisfied. Trustees should monitor the progress of complaints against the policy.

Information about this inspection

The inspection was announced to the head of group living on the morning of the first day of the inspection. An initial meeting was held with the director, executive headteacher, head of group living and her deputy, headteacher, child psychotherapist and referrals manager. Discussions with members of the school council, care staff, senior leadership team and members of the board of trustees took place. Inspectors visited the four residential units at different times of the day and evening, and meals were taken with children. Inspectors met with children, the senior management team and a range of professionals connected with the school. Interviews, some by phone, were held with social workers, parents and carers. A vast array of records, documentation and databases was inspected and assessed.

There were two inspectors on site each day; the lead was accompanied by a social care inspector on the first and one of Her Majesty's Inspectors on subsequent days.

Inspection team

Chris Peel Lead social care inspector

Natalie Trentham Her Majesty's Inspector, social care

Emeline Evans Social care inspector

Full report

Information about this school

Mulberry Bush School is a not-for-profit charity and is approved by the Department for Education as a non-maintained special school. It provides 38 weeks of residential care, education and family work. This provision is for up to 31 boys and girls, aged five to 13 years, who have experienced severe emotional damage in infancy and early childhood. At the time of this inspection, the school had 26 children on roll and all of them were residential pupils. The school specifically provides therapeutic treatment for children who have serious emotional and behavioural difficulties. The school is situated in a village in rural West Oxfordshire, five miles south of Witney. Four houses provide the residential accommodation and are located around a 'village green'. The classrooms are in close proximity, and the layout of the site creates the spirit of a community. The residential provision was last inspected in January 2016.

Inspection judgements

The overall experiences and progress of children and young people

Outstanding

The chair of the board of trustees described the school as 'an environment where people do not live *in* a group but *as* a group: it is a place [where] they can grow as individuals.' This captures the essence of the school, its methods of work and the reason why it is so successful in achieving its aims.

Children experience life in a community that is inclusive and accepting. For many, it is the first time that they have had a settled placement in which their needs can be met. They come with highly distressing and traumatising experiences, manifested in coping mechanisms that make it extraordinarily difficult to live harmoniously with others. A dedicated team, made up of specialists in the fields of education, therapy and residential care, provides for the children. Staff help them to manage powerful emotions so that they can regulate their behaviour, live more happily with others and achieve.

All children make progress, even if rarely on a consistent trajectory. For some, it is slow and incremental, but leading to significant change over time. For others, there can be remarkable bursts of improvement from the point of admission. One parent described how her son had gained social skills, no longer fought against having to learn and how, after 18 months, they 'could function as a family'. A foster carer commented on the 'phenomenal progress' a child had made in socialising with other children and managing endings in just one half-term at the school.

To achieve this, staff provide warm, nurturing but structured environments. They regard behaviour as a form of communication. Through a process of reflection, they help children to make sense of their feelings and to name them. Staff assist and encourage children to express themselves in different ways. This leads to significant emotional development and, as children become less chaotic, they are more open to learning academically, socially and personally.

Staff take the opportunity to help children to understand themselves and the world around them through everyday events, such as mealtimes. For example, discussion about children's wish to have a new garden playhouse after another house had one delivered was used to help them to think about jealousy; the disappointment of not having something new was used to generate an enthusiasm to make their existing play house better rather than to fuel resentment.

Each house has spaces for relaxing, undertaking activities such as board games, eating together and a garden with a range of play equipment. Communal areas are decorated with lots of informative, home-made displays. Children's bedrooms are well organised, and personalised to reflect individual interests and likes. Although some damage is evident, resulting from children's behaviour, maintenance staff generally affect repairs promptly so that a homely atmosphere is sustained. The houses are arranged around a play area that features a large climbing frame. There are other nearby facilities, such as a popular ball pool.

The ability of children to regulate their feelings and corresponding behaviour is marked by progress through three stages, set out by the school, that have their own set of expectations and privileges. Children spoken to have a clear understanding of the stage that they are on, and those who have attained the third are proud of their achievement.

Children have a range of means through which to express their wishes and feelings, from individual discussions with members of staff, through boxes in each house in which they can put notes about their concerns or ideas, to the school council. Children said that staff take what they say seriously and act on their views whenever possible. This gives a sense of self-efficacy and being able to influence the world around them through constructive means.

Staff make every effort to ensure that children contribute to and understand processes in the school and the wider looked-after system. Discussions take place to help them to understand their treatment plans and involve them in setting targets and rewards for their development.

Children are encouraged to complain when concerned about the ways in which things are being done. These issues are carefully considered and resolutions reached. When appropriate, managers or staff offer apologies. This is part of an ethos of everyone, children and staff alike, being able to challenge in order to improve the experience of living or working in the school. Children, thus, have role models for accepting responsibility and examples of behaviour being capable of changing and experiences improving as a result.

The spirit of acceptance and of seeking to understand and explore together pervades the school. It leads to the forming of remarkable levels of trust so that children have the emotional security to think about their experiences and to work out different ways of being in the world. The process can be transformative, so that children's life chances far exceed what they might otherwise have been.

The quality of care and support

Outstanding

The school implements a psychodynamic therapeutic model. It employs therapists who have a range of skills and approaches, enabling needs-led, integrated therapeutic plans to be developed. These result in demonstrable improvements in young people's behaviour and understanding of their emotional and social needs. A multi-disciplinary 'treatment team' around each child considers the particular approaches being used, reviews the progress being made and considers the next steps.

The team develops relationships with the wider network, so that a holistic approach is taken in the care offered to each child. Regular meetings are held with parents or foster carers and professionals from other agencies, such as child and adolescent mental health teams and placing authorities. These facilitate a shared understanding of the child and identification of what helps, what does not and what is realistic. Although there are inevitable differences of opinion, the great majority of children benefit from the consistency of approach that emerges.

Changes in staff, both within the school and the professional network, are carefully managed to reduce the impact on children. There is a continuity of care, which enables children to have a choice of people they can go to for support and guidance. Residential staff help children to make attachments with them, in which therapeutic interactions

take place. Learning from these is then transferred to other relationships.

Professionals spoken to unanimously praised the quality and effectiveness of the support offered to children. One commented, 'Staff are brilliant; they absolutely understand the children and how to work with them. It is exciting to work with people who are so good at what they do. Practice is high quality. They really work to find a good environment for these children.'

Some social workers expressed relief at having found an appropriate placement for children who had previously experienced more than one breakdown. Staff take great care over the admission of children and transitions within it. All those in the child's support network, particularly parents or carers, are involved in the process, which helps to ensure that it is successful. A mother commented, 'It's hard to send your son away to school, but I fell in love with it.' The conviction that the school is the right placement means that children find the transition less daunting than they might otherwise do.

Staff prepare for children's move into the school and then the move from the reception and assessment house to one of the longer-term dwellings extremely well. This is done at the child's pace and when everyone is comfortable with the timing. Managers understand that transitions within the school happen best when they acknowledge the loss of familiar contacts and introduce new staff before the move occurs. Staff carefully evaluate information gained about a child before deciding on a placement or house move. Impact risk assessments do not record all the thinking that staff do to ensure the safety of all children, but highlight what they need to do to minimise known risks.

Staff similarly prepare children and families exceptionally well for leaving. This a collaborative exercise that begins well before the eventual move. One parent described a process that included sharing expertise about how to choose a new school, staff going on joint visits, preparing reports and leaving books, a celebratory send-off and sufficient ongoing contact so that the child knows that staff still have them in mind. A leavers' club, leavers' plans and supported visits all prepare children practically and emotionally for the step that they are taking. Staff write exemplary transition reports to pass on all that they have learned about the child, so that the new provision gains from the wealth of knowledge that has been built up.

The detailed and comprehensive knowledge that staff have of children is combined with a thorough understanding of the treatment methods used with them. Training about these starts with the school's induction programme and continues with a foundation degree course that includes but exceeds the regulatory requirements for residential workers. This is an exceptional investment in the skills of staff and is a significant factor in the success of the school.

Children are encouraged to maintain healthy lifestyles through, for example, healthy eating discussions, wall displays and regular height and weight checks.

Managers have developed a process for translating education, health and care plans into objectives for children, which are further distilled into targets set to work on. Children help to choose them and they are well aware of current targets. Progress is regularly reviewed, and when children have demonstrated the capacity to accomplish key social and emotional skills (although not necessarily always to apply them) this is recorded on 'assessment of pupil progress' charts. It is thus possible to map children's progress from the point of starting the record to the most recent review. If attainment is seen to plateau, treatment teams take steps to understand why this is and to devise new

strategies.

Creative reward schemes used engage and encourage children to improve their experiences of living together. One example is a 'pompom pot', into which pompoms are put when an example of good behaviour is seen. Once the pompom pot is filled, the children all go on a special outing.

How well children and young people are protected

Good

The attachments between children and those that care for them, together with the established culture of accepting challenge, are the basis for strong safeguarding practice. Children feel able to speak to staff about issues that concern them and are aware of boxes put in each house by which they can report issues. Those who have been at the school before the start of this academic year also know of the independent advocate, and some recalled meeting her. Rather than relying on placing authorities (many at considerable distance) to organise return to care interviews after children have gone missing, the service that supplies the advocate also undertakes these. This demonstrates the commitment to giving children an opportunity to raise any worries that may have prompted them to run away.

Children have regular contact with their parents or carers and wider family members and usually have several calls arranged each week.

Staff have a sound knowledge of the procedures in place to address child protection concerns. The safeguarding policy was amended during the inspection, to make it clear what staff should do if a safeguarding lead is implicated. Other policies are in place and are followed. The designated officer of the local authority expressed satisfaction with the school's approach to safeguarding issues and noted a good relationship with the member of staff with whom they had most dealings.

A behaviour management policy identifies measures that staff should take to reward acceptable, or to discourage unwanted, behaviour. Staff implement sanctions that, when possible, demonstrate a connection between behaviour and its consequence.

Staff and managers maintain records of all incidents of sanctions and use of reasonable force. Samples seen show that their use is proportionate, avoided when possible through de-escalation techniques, and is well monitored. The system allows managers to interrogate data to highlight patterns and trends, such as the times when incidents are more frequent. This enables managers to implement strategies to help children to avoid problematic situations. Children's views are added to the record when they are given. For some, being repeatedly reminded about incidents about which they may feel some shame could be detrimental, so staff rightly use their discretion over when and whether to ask.

Over time, incidents of risky behaviour reduce and/or become less severe. For example, children may continue to abscond but stay in the vicinity of the school rather than run as far as they used to. They have a good understanding of the school's expectations of conduct. Staff help children to understand the impact of their behaviour and how others might feel about it. There is an emphasis on good community living, including respect

and tolerance of others.

The member of staff who has responsibility for health and safety matters for the school has had no additional training to that of other employees, but competent professionals are brought in to undertake more complex assessments and remedial work. Actions following recommendations from consultants undertaking works in relation to health and safety are not clearly documented, to enable effective review and to determine whether there are any outstanding works to be completed.

Risk assessments have not been completed for hot water taps, some of which are hot enough to scald. Given the age and vulnerability of the children, this is a hazard to them.

Medication is securely stored, and appropriate records are kept, monitored and overseen by the school nurse, who is a registered paediatric nurse. Controlled, prescribed medication is only given to children for whom it is prescribed. Treatment for children is clearly recorded on their files and accessed only by those staff who need to know.

Staff are employed using safer recruitment procedures, but recording has occasionally lapsed so it is unclear whether managers have rigorously investigated gaps in employment history or whether all references have been verified or by whom. Interview records are inadequate to show how candidates have answered questions and thereby demonstrated their competence.

Staff benefit from high-quality and frequent safeguarding training. Recent input has included early warning signs, forced marriages and 'sexting'. One member of staff identified how training had helped her be more conscious about a child's life outside the school and to consider the potential for radicalisation when writing an assessment.

Children report instances of unpleasant or aggressive behaviour by peers, which they perceive as bullying. However, they said that staff are aware of this and intervene. The nature of the difficulties of children placed at the school mean that anti-social behaviour will occur, but intimidation or targeting of others is not tolerated. Staff are proactive in diffusing situations and recognise signs that children are struggling.

Staff give children choices and provide them with support before they exhibit negative behaviours. When group dynamics mean that such behaviours may escalate, strategies are put in place to prevent them from getting out of hand. During the inspection, one house had had several instances of anti-social behaviour displayed, but shortly after, when an inspector visited, staff had restored calm, and children were sitting together, reading, colouring or watching a DVD.

The impact and effectiveness of leaders and managers

Outstanding

The school has recently appointed a new headteacher and head of group living, after previous incumbents had moved on after many years in the roles. It is to their credit that this has not led to any noticeable disruption in the life of the school. Leadership remains strongly focused on enhancing the lives of pupils and continuously improving services.

Senior managers are highly experienced both in working with severely traumatised children and in inspiring a staff team to provide care of the highest quality. Leaders convey to the staff their ambition for the school to be a centre of excellence and equip

them with the training and supervision to achieve it. Training is provided regularly and enhances the ability and capacity of staff to help children. Managers regularly appraise the effectiveness of training and update it to include the most recent research and current issues.

The school is itself participating in research projects to examine the effectiveness of its approach, contributing to the body of knowledge in this field and sharing expertise.

Staff are resilient and highly skilled people. Some find it difficult to take breaks and have brought this to the attention of managers who are reviewing how to ensure that such breaks happen. Workers feel fully supported by managers, which enables them to give their best when working with children. There are sufficient numbers of staff planned each day and good cover arrangements in place to address any shortfalls should they arise. This ensures that individual children's needs are met.

The board of trustees takes its role to monitor the operation of the school very seriously, assisted by the monthly reports of its appointed independent visitor. The experience of the board's chair and of the trustee who have responsibility for safeguarding means that they are particularly suited to their duties. However, the board was not sufficiently robust in monitoring a complaint about the care of a child. In this case the school's own policy was not followed and this was not identified by the board.

Managers have been particularly effective in working with other agencies, families and carers to the benefit of children at the school. Parents and carers report that they are actively involved in relevant plans, and those who are able to attend meetings find them insightful. Therapeutic teams work closely with other health professionals as required, ensuring that a holistic approach is taken to meeting children's needs. Professionals think that reports prepared for statutory reviews are comprehensive and helpful. Some would like more information about therapeutic progress at other times.

There are great advantages in having education and therapy services on the same site, and these are utilised. Managers ensure that inter-disciplinary working promotes children's engagement and attainment in both.

What inspection judgements mean

The experiences and progress of children and young people are at the centre of the inspection. Inspectors will use their professional judgement to determine the weight and significance of their findings in this respect. The judgements included in the report are made against 'Inspections of boarding and residential provision in schools: the inspection framework'.

Judgement	Description
Outstanding	A school where the experiences and progress of children and young people consistently exceed the standard of good and result in sustained progress and achievement. The outcomes achieved by children and young people are outstanding and the impact that the boarding/residential provision has had in supporting this progress and achieving these outcomes is clearly evidenced.
Good	A school providing effective services, which exceed minimum requirements. Children and young people are protected and cared for and have their welfare safeguarded and promoted.
Requires improvement	A school where there are no serious or widespread failures that result in children and young people's welfare not being safeguarded or promoted. However, the overall outcomes, experiences and progress of children and young people are not yet good.
Inadequate	A school where there are serious and/or widespread failures that mean that children and young people are not protected or their welfare is not promoted or safeguarded or their care and experiences are poor and they are not making progress.

School details

Unique reference number 1020986

Social care unique reference number SC013039

DfE registration number 931/7005

This inspection was carried out under the Children Act 1989, as amended by the Care Standards Act 2000, having regard to the national minimum standards for residential special schools.

Type of school Residential special school

Number of boarders on roll 26

Gender of boarders Mixed

Age range of boarders 5 to 12

Headteacher Fiona Dall

Date of previous boarding inspection 18 January 2016

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