

SC425985

Registered provider: Autism Initiatives (UK)

Full inspection

Inspected under the social care common inspection framework

Information about this children's home

This privately run children's home may only provide care and accommodation for up to seven children. It may provide care and accommodation for children who have learning disabilities. It must reduce the number of children by the number of people aged 18 and over for which it also provides care and accommodation.

Inspection dates: 13 to 14 June 2017

Overall experiences and progress of children and young people, taking into account

requires improvement to be good

How well children and young people are helped and protected

requires improvement to be good

The effectiveness of leaders and managers

inadequate

The children's home is not yet delivering good help and care for children and young people. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.

Date of last inspection: 27 March 2017

Overall judgement at last inspection: declined in effectiveness

Enforcement action since last inspection: none

Key findings from this inspection

This children's home requires improvement to be good because:

- The registered manager does not have adequate oversight of the home's operation because numerous documents require updating and signing. Also, the independent visitor's reports lack evaluation of the records viewed and have not been sent in a timely way to Ofsted.
- Some young people do not have a care plan or education plan on their file. This does not ensure that members of staff are working towards an agreed plan. Further to this, the manager has not robustly challenged the local authorities to secure these documents.
- Recruitment records are not sufficiently robust because there is no information about staff members' Disclosure and Barring Service checks.
- New members of staff have not received adequate supervision. This means that their practice is not formally scrutinised.
- The home does not have a workforce plan and the home's training matrix has not been updated. Moreover, staff meetings do not cover recent research that can inform staff practice. Therefore, staff members' continued professional development is not evident.
- The restraint records are not clear because they do not describe the hold used and there is no follow up discussion with young people. Notifications about incidents in the home lack detail. This does not ensure that all parties clearly understand why an intervention was necessary.
- Young people's wishes, views and feelings are not consistently acted upon or responded to. Relationships between young people are improving. However, the home has not discussed with young people the impact of bullying or negative behaviour and the affect this may have on each other.
- Checks on all visitors are not robust. For example, an inspector was not asked for her identification badge.
- The home requires a deep clean and some furnishings need replacing. This detracts from it being a homely environment.

The children's home's strengths:

- Although some young people do not have education plans, most of the young people have excellent attendance at school and they are progressing well.
- All young people are in good health and receive good support to manage their health needs. For example, one young person has lost weight as part of a planned process and another is receiving dental treatment.
- The company has employed a therapist to work with young people on their mental health and emotional well-being. He has delivered training to the staff team members and worked closely with them on strategies to reduce incidents. As a result, one young person's self-harming episodes have reduced.
- Most parents and several professionals are complimentary about this home. They say that young people are progressing well.

- Any allegation against a member of staff is responded to robustly. The home works closely with all safeguarding professionals.
- The registered manager has resigned and the company has quickly identified a new manager. There has been a recent recruitment drive and several new members of staff have started work. This has lessened the need for agency cover. However, when agency staff are used, the home ensures that the same people are used so that young people receive consistency of care.

Recent inspection history

Inspection date	Inspection type	Inspection judgement
27/03/2017	Interim	Declined in effectiveness
24/11/2016	Full	Good
03/02/2016	Interim	Improved effectiveness
15/07/2015	Full	Good

What does the children's home need to do to improve?

Statutory requirements

This section sets out the actions that the registered person(s) must take to meet the Care Standards Act 2000, Children's Homes (England) Regulations 2015 and the 'Guide to the children's homes regulations including the quality standards'. The registered person(s) must comply within the given timescales.

Requirement	Due date
<p>5: Engaging with the wider system to ensure children's needs are met</p> <p>In meeting the quality standards, the registered person must, and must ensure that staff—</p> <p>if the registered person considers, or staff consider, a placing authority's or relevant person's performance or response to be inadequate in relation to their role, challenge the placing authority or the relevant person to seek to ensure that each child's needs are met in accordance with the child's relevant plans. (Regulation 5 (c))</p> <p>This is specifically in relation to evidencing that robust challenges are made to secure essential documentation.</p>	30/07/2017
<p>44: Independent person: visits and reports</p> <p>The independent person must produce a report about a visit ("the independent person's report") which sets out, in particular, the independent person's opinion as to whether—</p> <p>children are effectively safeguarded and the conduct of the home promotes children's well-being. The independent person must provide a copy of the independent person's report to HMCI. (Regulation 44 (4)(a)(b)(7)(a))</p> <p>This also includes evaluating the records held within the home.</p>	30/07/2017
<p>11: The positive relationships standard</p> <p>The positive relationships standard is that children are helped to develop, and to benefit from, relationships based on mutual respect and trust, an understanding about acceptable behaviour and positive responses to other children and adults.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff encourage each child to take responsibility for the child's behaviour, in accordance with the child's age and understanding. Also, to understand and communicate to</p>	30/07/2017

children that bullying is unacceptable. (Regulation 11 (1)(a)(2)(iii)(xii))	
<p>36: Children's case records</p> <p>The registered person must maintain records ("case records") for each child, which are kept up to date and signed and dated by the author of each entry. (Regulation 36 (1)(b)(c))</p>	30/07/2017
<p>33: Employment of staff</p> <p>The registered person must ensure that all employees receive practice-related supervision by a person with appropriate experience. (Regulation 33 (4)(b))</p>	30/07/2017
<p>10: The health and well-being standard</p> <p>The health and well-being standard is that the health and well-being needs of children are met.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff help each child to achieve the health and well-being outcomes that are recorded in the child's relevant plans. (Regulation 10 (1)(a)(2)(a)(i))</p> <p>This is specifically in relation to ensuring that young people's health plans are kept up to date and have all the known information recorded within them, including about young people's emotional health and work undertaken on their identity.</p>	30/07/2017
<p>13: The leadership and management standard</p> <p>The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that helps children aspire to fulfil their potential and promotes their welfare.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>lead and manage the home in a way that is consistent with the approach and ethos, and delivers the outcomes, set out in the home's statement of purpose; and</p> <p>demonstrate that practice in the home is informed and improved by taking into account and acting on research and developments in relation to the ways in which the needs of children are best met. (Regulation 13 (1)(2)(a)(g))</p> <p>This is specifically in relation to using research to inform staff practice.</p>	30/07/2017
7: The children's views, wishes and feelings standard	30/07/2017

<p>The children's views, wishes and feelings standard is that children receive care from staff who take their views, wishes and feelings into account in relation to matters affecting the children's care and welfare and their lives.</p> <p>In particular, the standard in paragraph (1) requires the registered person to—</p> <p>ensure that staff help each child to understand how the child's views, wishes and feelings have been taken into account and give the child reasons for decisions in relation to the child. (Regulation 7 (1)(a)(2)(a)(iii))</p>	
<p>8: The education standard</p> <p>The education standard is that children make measurable progress towards achieving their educational potential and are helped to do so.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff help each child to achieve the child's education and training targets, as recorded in the child's relevant plans. (Regulation 8 (1)(a)(2)(a)(i))</p> <p>This is specifically in relation to securing young people's education and health care plans (EHCP's) and personal education plans (PEP's).</p>	30/07/2017
<p>12: The protection of children standard</p> <p>The protection of children standard is that children are protected from harm and enabled to keep themselves safe.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that staff assess whether each child is at risk of harm, taking into account information in the child's relevant plans, and, if necessary, make arrangements to reduce the risk of any harm to the child. (Regulation 12 (1)(2)(a)(i))</p> <p>This is in relation to ensuring that the most up-to-date risk assessment is within the young person's file and that all members of staff have signed them and are implementing them.</p>	30/07/2017
<p>14: The care planning standard</p> <p>The care planning standard is that children receive effectively planned care in or through the children's home.</p> <p>In particular, the standard in paragraph (1) requires the registered person to ensure—</p> <p>that each child's relevant plans are followed; and</p>	30/07/2017

<p>that, subject to Regulation 22 (contact and access to communications), contact between each child and the child's parents, relatives and friends, is promoted in accordance with the child's relevant plans. (Regulation 14 (1)(2)(c)(d))</p> <p>This is in relation to ensuring that all young people have a local authority care plan and that care plans are updated. Also, that clear arrangements for contact are recorded in the young person's contact plan and that any restrictions regarding absent parents or unsuitable adults are recorded.</p>	
<p>23: Medicines</p> <p>The registered person must make arrangements for the handling, recording, safekeeping, safe administration and disposal of medicines received into the children's home.</p> <p>In particular, the registered person must ensure that a record is kept of the administration of medicine to each child. (Regulation 23 (1)(2)(c))</p>	30/07/2017
<p>32: Fitness of workers</p> <p>The registered person must recruit staff using recruitment procedures that are designed to ensure children's safety.</p> <p>The requirements are that—</p> <p>full and satisfactory information is available in relation to the individual in respect of each of the matters in Schedule 2. (Regulation 32 (1)(2)(3)(d))</p> <p>This is specifically in relation to having information on the result of all staff members' Disclosure and Barring Service checks.</p>	30/07/2017
<p>35: Behaviour management policies and records</p> <p>The registered person must ensure that within 24 hours of the use of a measure of control, discipline or restraint in relation to a child in the home, a record is made which includes a description of the measure used and its duration.</p> <p>Also, that within five days of the use of the measure, the registered person or the authorised person adds to the record confirmation that they have spoken to the child about the measure. (Regulation 35 (3)(a)(iv)(c))</p>	30/07/2017
<p>39: Complaints and representations</p> <p>The registered person must ensure that a record is made of any complaint, the action taken in response, and the outcome of any investigation. (Regulation 39 (3))</p>	30/07/2017
<p>6: The quality and purpose of care standard</p> <p>The quality and purpose of care standard is that children receive care from staff who understand the children home's overall aims</p>	30/07/2017

and the outcomes it seeks to achieve for children and use this understanding to deliver care that meets children's needs and supports them to fulfil their potential.

In particular, the standard in paragraph (1) requires the registered person to—

ensure that the premises used for the purposes of the home are designed and furnished so as to meet the needs of each child. (Regulation 6 (1)(a)(b)(2)(c)(i))

This is specifically in relation to ensuring that the home is clean, well maintained and that furnishings are suitably replaced when damaged.

* These requirements are subject to a compliance notice.

Recommendations

- The registered person should have a system in place so that all serious events are notified, within 24 hours, to the appropriate people. The notification must include details of the action taken by the home's staff in response to the event. ('Guide to the children's homes regulations including the quality standards', page 63, paragraph 14.13.) This is specifically in relation to ensuring that the notification is clear and factual.
- The registered person should have a workforce plan, which can fulfil the workforce related requirements of Regulation 16, schedule 1 (paragraphs 19 and 20). The plan should be updated to include any new training and qualifications completed by staff while working at the home. ('Guide to the children's homes regulations including the quality standards', page 53, paragraph 10.8)
- Ensure that all children's case records are kept up to date. ('Guide to the children's homes regulations including the quality standards', page 62, paragraph 14.3) This is specifically in relation to ensuring that young people's files are in a good order.
- The registered person should build a strong safeguarding culture in the home. ('Guide to the children's homes regulations including the quality standards', page 43, paragraph 9.8.) This is specifically in ensuring that all visitors' credentials are viewed and that all visitors are taken through the emergency evacuation procedure.

Inspection judgements

Overall experiences and progress of children and young people: requires improvement to be good

This home looks after young people who have autism and associated learning disabilities.

The young people have different levels of verbal communication that members of staff know and understand well. As a result, young people are encouraged to be involved in their care and make some decisions about their life. However, one young person had written a letter to the manager requesting that the home have a dog. This has not yet been formally responded to. Another young person likes to costume dress and his health plan states that some clothes are inappropriate and that he is limited to accessories. The young person's social worker said that this was a difficult area for his parents and work was being undertaken with a therapist in school and with his parents regarding how the young person chooses to express their individuality. However, there is no information about these sessions and the work undertaken in the home's documents and young person's files. Another young person wishes to eat alone. She said that she becomes anxious when sitting with other young people. She said that, '(Manager's name) does not believe me and makes me sit with the others. She ignores me when I ask.' These examples indicate that young people's wishes, views and feelings are not always listened to and acted upon. Moreover, there was very little evidence about how a young person is being supported to explore their identity.

In contrast to this, young people say that they are confident that they can raise a complaint with the manager and that they have either a parent, advocate or independent person who they can talk to. However, the complaints book could not be found during the inspection. This does not ensure that there is an accessible system for young people to raise concerns.

Young people are accommodated at this home under different arrangements. Some are placed at this home through an education health care plan (EHCP) and spend periods of time at home in the holidays, whereas others are placed by the local authority. However, the home does not have all the relevant documentation to support each young person's care needs. One young person did not have a care plan. Another young person's care plan was out of date, referring to a past school and including details of a previous foster care placement. Moreover, some young people do not have an education health care plan or a personal education plan. This lack of clarity does not offer assurances that everyone is in agreement with the plans for young people or that members of staff have the correct information.

Generally, young people are making progress at this home. One parent said, 'In the six months that she has been here, she has made massive improvements. She is more confident and will now talk to staff when she is feeling low. This has reduced her self-harming behaviour.' Another parent said, 'Due to the progress that he has made, we are considering having him home when he turns 18 years of age.' A professional also said, 'He has made excellent progress here. He is able to control his feelings now and has much more confidence.' In contrast to this, one parent described the home as a 'babysitting' service and felt that her son had progressed as far as he could here. A professional said that although communication between her and the home had improved, the home needed to ensure that all parents were kept informed about their child. She continued to say that the poor staffing last year and earlier this year had really affected the young person's progression, but acknowledged that staffing had improved.

Young people are in good health. The home works with a range of health professionals and the young people's parents to ensure that all appointments are attended. Therefore, young people receive additional treatments when required. All members of staff are trained in medication procedures and most have a first aid qualification. The home works closely with a dietician and this has been successful in reducing some of the young people's weight on a planned basis. The home has also included activities that support good exercise. One young person now walks to school and others enjoy going to the gym. The organisation has recently employed a mental health specialist. He has delivered training to staff on mental health issues and has discussed different approaches to working with young people with autism. He mentors members of staff and they discuss strategies and de-escalation techniques. This is working well. One young person is now talking to staff when she feels low. This has significantly reduced her self-harming behaviour. Her mother said, 'It has been brilliant. I cannot believe that she was in a hospital last year and now we are making arrangements for her first overnight stay.' Records of health appointments and subsequent actions are kept on the home's computer. However, this information is not taken forward to the young people's health plans. There is also some confusing information in regards to young people's health. One young person's health plan does not mention asthma but his hospital support plan does. Another young person's hospital support plan was blank. This is significant, as she often requires hospital treatment. Therefore, hospital staff would not know how to best support her. Moreover, the home's policy is for two members of staff to sign for all medication that is administered to young people, but there have been several occasions when this has not happened. Overall, although young people are in good health, the home's records do not give a clear picture of their health needs and how these are to be met.

Most young people attend the organisation's school. They have excellent attendance and are progressing well. One young person has left school and is working on his independence skills. The home is working hard to identify a voluntary work placement, so that he can gain further skills. Another young person is refusing to attend school. A tutor comes to the home daily and the young person engages well. However, she does not have an education health care plan or a personal education plan. Therefore, there is no information on her academic ability, the support she requires, how the home is supporting her to attend education or what steps are being taken to encourage her back into school. Another young person's education plan has incorrect information within it. For example, the correct address of the home. The responsible individual said that all young people have education plans at school. However, there is not a copy of them at the home. As a result, members of staff do not have all the information to successfully support young people in education.

All of the young people have days out or overnight stays with their parents. Several parents commented on the improving behaviour of their children that allows them to visit more. One young person said, 'I love seeing my family and I look forward to going home.' Another young person said, 'I am going on an overnight visit soon. It would be good to have a plan in place.' Contact plans only give the details of the parents and their addresses. They do not discuss the arrangements for contact. For example, whether

staff take the young person or whether parents pick them up. There is no information on times or dates and they do not discuss any restrictions regarding absent parents or any identified unsuitable adults. This does not ensure that members of staff know the arrangements or that young people are fully safeguarded.

On the day of inspection, the inspectors found that bathrooms, toilets, carpets and dining tables required cleaning. The settee and armchair covers were stained and had unacceptable graffiti drawn on them. Some paintwork required attention and young people required help in tidying their bedrooms. This is not conducive to a homely environment. Moreover, a member of staff was sitting on a kitchen worktop next to freshly baked food. This is not hygienic and does not set a good example to young people.

How well children and young people are helped and protected: requires improvement to be good

In general, young people said that they were safe and well cared for at this home. This was supported by comments from parents and professionals.

At the home's last interim inspection, the home was asked to ensure that young people were enabled to build positive relationships with each other and with staff. This is now happening with staff because there is a more settled staff team. A parent said, about a member of staff regarding her child, 'They know her well and she trusts them.' A professional said that staffing in the home was better and that members of staff knew her young person well. One young person said that she was still frightened when other young people were 'fighting' with each other. She also said that one young person sent her nasty texts. In contrast to this, a parent and another young person said that the relationships between young people had significantly improved. However, the home has not completed any individual work or group sessions with young people on bullying or on how their negative behaviour may affect other young people. This does not demonstrate how young people are being helped to develop and learn effective communication skills that will mean they interact more positively with each other.

Young people have not been reported missing from this home. Members of staff clearly demonstrated their roles and responsibilities in this area. A good risk assessment identifies each young person's vulnerability, communication skills and reporting times. As a result, clear information is available, if an incident was to occur. Similarly, all members of staff are fully trained in safeguarding procedures, including around child sexual exploitation. This is refreshed regularly. A new member of staff was able to draw on this training when speaking with an inspector. She was very clear on her role and responsibility to report concerns, who to report to and to observe young people for signs of being unhappy.

Professionals, parents and young people spoken to did not raise any concerns in this area.

Some young people have been held for their own or others' safety. All staff are trained

in how to de-escalate situations and in holding young people safely. However, the records of restraint are not clear. For example, one states 'attempted to direct away'. It did not say whether this was verbally or with physical assistance. Another record states 'lasted 30 minutes'. It was unclear whether the incident lasted 30 minutes or the restraint did. Additionally, the home has not completed de-brief sessions with young people to get their views on the incident. This does not ensure that members of staff learn or understand young people's views and feelings from their perspective. When these incidents have occurred, the home has formally notified Ofsted. However, at times, the notifications have lacked detail about the incident and the actions that the home has taken. This does not ensure that there is a good reporting system or that all parties have all the information required to assess the approach and the appropriateness of the action that the home is taking.

Incidents of negative behaviour are reducing at this home. This is because of a combination of things. Staffing levels have improved and two young people have now settled into the routine of the home. Young people have a variety of risk assessments that address their risk-taking behaviour. However, one young person had five risk assessments on her file all covering self-harming behaviours. One of these was the most up-to-date one, but was the last one in the relevant section. The risk score had increased, although members of staff, parents and professionals said that her incidents had decreased. There was no explanation within the document for the change and members of staff had not signed to say that they had read it. This conflicting information means that members of staff do not necessarily have the most up-to-date information to work with young people safely. Moreover, young people's files are not structured well because old information has not been archived and could be wrongly used.

All certificates for insurance, electrical and gas supplies are renewed regularly. Young people and members of staff complete regular evacuations from the home, in case of an emergency. However, more rigour is required to check the identity of all visitors and to ensure that visitors are aware of the home's procedures for evacuation. This will help to safeguard young people and visitors.

The effectiveness of leaders and managers: inadequate

The manager was registered with Ofsted in February 2011. She is suitably experienced and holds a leadership and management qualification. She has resigned and is currently working her notice period. A new manager has been identified and a handover period has been agreed. The deputy manager has also resigned. A senior member of staff was unsure about the arrangements for the running of the home and where documents were kept. It was evident at this inspection that there is a lack of oversight of the home and of young people's records. This has not yet affected the progress that most young people are making, but it has the potential to do so if not resolved.

There is a significant shortfall in the home having the correct documents to care for young people. For example, some young people do not have care plans or education plans. Moreover, there are numerous documents and records that require updating and signing by either members of staff, professionals and or parents. This does not ensure

that everyone is working towards an agreed plan that everyone understands. In addition to this, the manager has not challenged the local authority robustly when requesting the information required.

A recruitment drive has ensured that staffing at the home has improved. There have been four new members of staff appointed. However, there are still four vacancies with two other members of staff working their notice. Most members of staff cover the shortfalls through overtime and the home uses agency staff when required. As good practice, the manager is ensuring that the same agency staff are working at the home, so that young people receive consistency of care. The staff recruitment files are poorly organised. For example, one file starts with the staff member's offer of employment letter and another starts with their application. References were scattered throughout the file. The files did not contain any information on the staff members' Disclosure and Barring Service checks. The manager produced a matrix of staff disclosure numbers and dates when they were received, but this did not identify whether the check was clear or not. As a result, the home cannot demonstrate that the recruitment procedures are robust enough to fully safeguard young people.

Most of the staff team members have a suitable qualification in childcare. New members of staff are registered on the required course. Staff complete all mandatory training before starting to work at the home. The staff team members say that they have regular training in a variety of subjects. For example, in mental health and autism. This means that they have the skills to care for young people safely. However, the home does not have a workforce plan which can fulfil the workforce related requirements of Regulation 16, schedule 1. For example, details of the process and agreed timescales for staff to achieve induction, probation and any core training, managing and improving poor performance and timescales for supervision of practice. The home's training matrix is not up to date. Therefore, it is unclear whether any necessary refresher training has been undertaken by those members of staff who need it. In conjunction with this, staff meetings do not readily cover research and practice. Moreover, a new member of staff has only received 30 minutes supervision in the five weeks that she has been here. These shortfalls do not show how members of staff are supported to improve, develop or that they have opportunities to reflect on their practice.

At the last inspection, the home was asked to ensure that Regulation 44 reports fully evaluated the effectiveness of the quality of care and outcomes for young people. This report has not improved. This is evident in the findings of this inspection. For example, the independent visitor has not raised actions around missing documents, lack of signatures on documents or of the content of documents, such as health plans. Further to this, they do not consult with professionals, parents or young people regularly. The last report relied heavily on the consultations that the home has had with these people. Moreover, the report has not been sent to Ofsted in a timely way. This does not ensure that a robust independent view is given on the quality of care at the home and that the manager receives good information to help her improve the service.

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people. Inspectors considered the quality of work and the differences made to the lives of children and young people. They watched how professional staff work with children and young people and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and young people and their families. In addition, the inspectors have tried to understand what the children's home knows about how well it is performing, how well it is doing and what difference it is making for the children and young people whom it is trying to help, protect and look after.

Using the 'Social care common inspection framework', this inspection was carried out under the Care Standards Act 2000 to assess the effectiveness of the service, how it meets the core functions of the service as set out in legislation, and to consider how well it complies with the Children's Homes (England) Regulations 2015 and the 'Guide to the children's homes regulations including the quality standards'.

Children's home details

Unique reference number: SC425985

Provision sub-type: Children's home

Registered provider: Autism Initiatives (UK)

Registered provider address: Sefton House, Bridle Road, Bootle, Merseyside L30 4XR

Responsible individual: Katharine Silver

Registered manager: Helen Smith

Inspectors

Pam Nuckley: social care inspector

Karen Willson: social care inspector

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