

Oak Lodge School

Oak Lodge School for the Deaf, 101 Nightingale Lane, London SW12
8NA

Residential provision inspected under the social care common
inspection framework

Information about this residential special school

Oak Lodge School is a maintained residential special school for young people aged 10 to 19 years. It is operated by the London Borough of Wandsworth. It provides an inclusive multi-modal communication environment for deaf young people and hearing young people who have language, communication and/or auditory processing difficulties. Many of the young people have additional needs, such as emotional and/or behaviour difficulties, visual impairment and/or health needs. The school offers up to 100 educational places and up to 17 residential places. The school is a signing community. The residential provision is located in the school building. Young people may reside there for up to four nights a week during term time. A new head of care has recently been appointed.

Inspection dates: 26 to 28 September 2017

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

good

How well children and young people are helped and protected

good

The effectiveness of leaders and managers

Outstanding

The residential special school provides effective services that meet the requirements for good.

Date of previous inspection: 6 December 2016

Overall judgement at last inspection: outstanding

Key findings from this inspection

This residential special school is good because:

- An exceptional management team is leading the school. The team identifies the strengths and weaknesses and has a school improvement plan to address the same.
- There is excellent oversight and monitoring, especially by a governing board with a wide range of skills and experience. An independent visitor has good rapport with young people and spends a great deal of time with them to gain their views, using British sign language (BSL) or sign supported English (SSE).
- Safeguarding practice has been strengthened. New systems streamline the process for reporting and monitoring concerns.
- There is close attention to young people's emotional and mental well-being with support structures in place for young people who are struggling.
- The approach to e-safety is very good. Staff are knowledgeable, young people are educated, and staff provide opportunities for parents to understand the risks in the cyber world.
- Young people make good progress in their social interaction, behaviour and communication skills. They enjoy their residential experience and gain independent living skills.
- Young people who are new to the residential setting have a good induction. They are able to visit and have a taster day before staying overnight.
- Training in delegated healthcare tasks means that staff provide good care for young people who have additional complex health needs.
- Staff are skilled in BSL and SSE. They are competent, committed and motivated to meet the needs of the young people in their care.
- Staff create exceptional care plans in conjunction with parents and other professionals.

The residential special school's areas for development are:

- Risk reduction measures from the independent fire risk audit need to be completed and the time of trial evacuations recorded.
- Instructions in risk assessments to minimise risks while eating need to be clearly defined. Risk assessments for sleeping accommodation need to be completed.
- The date that medication is opened needs to be recorded and the shelf life of that medication, once opened, established.
- The methods available for young people to make a complaint need to match the various ways young people communicate.

What does the residential special school need to do to improve?

Compliance with the national minimum standards for residential special schools

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

- 7.1 The school complies with the Regulatory Reform (Fire Safety) Order 2005.
- 5.1 Suitable sleeping accommodation is provided for children. It is well organised and managed with risk assessments undertaken and the findings acted upon to reduce risk for all children. Where children are aged 8 years or over, sleeping accommodation for boys is separate from sleeping accommodation for girls.
- 11.1 The school ensures that: arrangements are made to safeguard and promote the welfare of children at the school; and such arrangements have regard to any guidance issued by the Secretary of State.

Recommendations

- Add the time of the trial fire evacuation to the record.
- Record the date that medication is opened and establish the shelf life of medication once opened.
- Ensure that young people know how to make a complaint. In particular, consider the different formats that young people could use.

Inspection judgements

Overall experiences and progress of children and young people: good

Young people embrace the experience of the residential setting. They appreciate the signing community and trust the adults around them to meet their needs. Staff make time for them. For example, staff are sensitive to when a young person wants to communicate in private, thus changing their schedule at short notice. However, some young people are unaware of the complaints procedure. The new head of care plans to introduce various formats for young people who have communication challenges so that they are able to make a formal complaint. There have been no complaints since the last inspection.

Young people make good progress. For example, young people who have social communication difficulties are able to function as a group and make friends. Deaf young people learn how to communicate to purchase train tickets so they can travel independently. Young people who arrive with limited signing ability now have conversations with other deaf young people. Young people learn how to budget, shop and cook. They work as a group to decide on the healthy options for the menu, based on everyone's preferences.

Staff support young people to participate in a range of activities in the residential setting, such as board games and cooking, and other activities in the community, such as swimming. They have been successful in developing relationships with their neighbours, such as a nearby home that accommodates elderly people. Young people enjoy working in the elderly people's garden and their encounters with older people.

Staff welcome young people who stay at the school for the first time. They make sure the right care plans are in place. For example, staff visit the family home to complete an assessment with the young person and their parents. Young people enjoy a taster evening and build confidence to stay overnight. A parent spoke highly of the induction and her child's experience. She said, 'It is fantastic there.' A young person, new to overnight stays, was observed to be fully integrated with the other young people and clearly enjoying the experience.

The approach to mental and emotional well-being is good. Care and education staff work well to communicate about young people's welfare across their disciplines. Key staff researched statistics on mental health for deaf people. Senior managers acted on findings. They put into place systems to advise on any urgent issues, as well as mapping welfare and behaviour over time to look for trends. Key staff have a strong relationship with their nominated young person. They advocate for young people to access other services if necessary, such as deaf child and adolescent mental health services.

The approach to physical health is good. Staff have developed an excellent relationship with the local hospitals. They have access to a school nurse for advice. Senior managers ensure that staff are trained in delegated healthcare tasks, such as tube feeding. Health professionals assess the competency of staff to undertake such

tasks. Staff are aware of the medication procedures and are trained in medication administration. However, they do not routinely record when they open liquid medication and the shelf life of that medication once opened.

Young people have contact with their families according to their preferred communication method, often using video conferencing so that they can sign to their family members. Families may visit the setting and take the young person out, for example for a birthday meal.

How well children and young people are helped and protected: good

This is a school where young people are safe. They feel secure and behave well. There have been no physical interventions, offending behaviour or missing person episodes since the last inspection. Well-detailed care plans advise staff on how to support each young person. The head of care details the risks to young people in individual risk assessments. Some control measures, such as what 'close monitoring' means, are undefined. There is the potential for young people to be at risk, for example when eating, when staff do not have clear explanations on how to best support them.

This is a school where there is an inclusive environment. Everyone is accepted here, there is no discrimination. Staff are on hand to help young people express themselves appropriately. Staff are skilled in de-escalation techniques. They use a restorative justice approach to maintain relationships. They support young people to reflect on their behaviour and the impact on others so that they do better next time.

Leaders, managers and staff show a thorough knowledge of e-safety. They educate young people and parents on safe internet use. The approach is embedded into the culture. Staff visit the subject multiple times and from many angles. Young people demonstrate that they know what to do in the event of a concern, such as responding appropriately to an unknown 'friend' in the social media world and alerting staff. Young people accept their responsibility to keep themselves safe, such as signing 'digital contracts.'

The head of care identifies the best possible sleeping arrangements depending on the young people who are staying. Staff check rooms regularly during the night as well as using door sensors to monitor movement. Staff have not individually risk assessed the accommodation to underpin the necessity of this for each young person. Some young people say the checks are too frequent.

Staff are clear on who is the designated safeguarding lead (DSL). They use the mechanisms in place to report concerns. The system is effective. The DSL becomes aware of any issues very quickly and is able to take appropriate action, for example in the event of an allegation or disclosure. She is experienced at filtering concerns and makes a decision about the involvement of other agencies, such as social services.

Staff adopt safer recruitment practice so that only adults deemed suitable to work with young people are employed.

An independent auditor has carried out a fire risk assessment and recommended some corrective actions, such as repairing fire doors that are not closing. Although staff have plans to carry out these corrective measures, the actions identified as high risk are not complete. Trial evacuations take place at regular intervals. However, staff do not routinely record the time of the evacuation in the records to demonstrate that young people know how to leave the building safely at all times.

The effectiveness of leaders and managers: outstanding

A strength of this school is the management team. The team has high expectations and generates a culture for staff to deliver the best possible care. The new head of care brings a wealth of experience and insight. She brings many ideas to provide new opportunities and experiences for young people. The governing board consists of a variety of people with a diverse range of skills. They are effective at overseeing safeguarding. Since the last inspection, senior leaders have restructured the safeguarding team and the recording process. Key individuals monitor and analyse trends, reporting weekly to the overarching safeguarding team, as well as providing a report to the governing body. Senior leaders ensure that the necessary support is in place for each young person, such as specialist therapy for deaf people.

Staff make a comprehensive assessment of each young person, including a visit to the family home, to write detailed care plans. They format these to give a clear, succinct account of each young person's needs. Staff work exceptionally well with other professionals, such as the occupational therapist. They ensure that any specialist equipment or modifications to the environment are in place to support young people with additional needs.

Of particular note is the monitoring of the quality of care. The head of care arranges for an independent visitor (IV) to regularly attend the residential provision. The IV is proficient at signing. She makes time for the young people, spending enormous amounts of time with them in their residential setting, building rapport and listening to their views. She provides a report to the senior management team on her view of the provision. This provides objective oversight and challenge to continually improve care.

Staff are highly skilled in BSL and SSL. Some staff are deaf themselves and have a personal insight into the challenges a deaf person faces in the wider community. They are a model of success. Staff are motivated to meet the needs of the young people in their care to the highest standard. As a result, young people's life chances are enhanced.

The head of care provides the necessary training for staff, including working with deaf young people who have additional complex needs. Staff say that they feel valued and are equipped to meet the individual needs of each young person. They are proud of the progress that young people make, such as in communication, independent living skills and social interaction.

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. Independent interpreters assisted the inspectors in this process. In addition, the inspectors have tried to understand what the school 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 Children Act 1989 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 national minimum standards.

Residential special school details

Social care unique reference number: SC042132

Headteacher/teacher in charge: Mrs Pat Ashworth

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Inspector

Keith Riley, social care inspector (lead)



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