

Education In Hospital 1 (Airedale)

C/O 21 Owlet Road, Shipley, Bradford, West Yorkshire, BD18 2LU

Inspection dates

9–10 November 2017

Overall effectiveness	Requires improvement
Effectiveness of leadership and management	Requires improvement
Quality of teaching, learning and assessment	Requires improvement
Personal development, behaviour and welfare	Good
Outcomes for pupils	Requires improvement
Overall effectiveness at previous inspection	Requires improvement

Summary of key findings for parents and pupils

This is a school that requires improvement

- Leaders and managers have only recently developed a clear understanding of the areas in need of improvement within the provision. A plan identifying future development has only just been put in place. This has slowed improvement in the quality of teaching and learning since the previous inspection.
- The current system used to check and assess pupils' progress does not yet measure the progress made by pupils over time. This slows the progress of pupils who are in hospital for longer periods of time.
- The quality of teaching and learning requires improvement because staff do not always plan learning in sufficient depth and detail. Next steps for pupils' learning are often identified at the end of lessons but are not always carried through at the next teaching session.
- Teachers do not always contact pupils' home schools as soon as they should. Too often they rely on pupils to provide information and work. This slows the progress of these pupils.
- Post 16 pupils are not always placed on the children's ward. This makes it harder for hospital teachers to locate their whereabouts. As a consequence, none have been identified and taught in the last six months.
- The needs of most-able pupils are not always fully recognised by teaching staff. As a result, those that are in for longer periods of time do not make as much progress as they could.
- The school, due to the transient nature of many of its pupils, has developed a focus on delivering English and mathematics. However, this limits learning for pupils who are in hospital for longer periods of time.

The school has the following strengths

- The hospital teachers are highly skilled at establishing a rapport with their pupils. This enables learning to start as soon as possible.
- The electronic system for registering pupils is effective and efficient. It enables a register to be kept and used to inform pupils home schools of their attendance in hospital.
- Recently appointed leaders and governors are beginning to bring much needed improvements to the quality of teaching, the curriculum and outcomes for pupils.
- Staff work closely with health professionals to care for and nurture pupils who attend school in hospital.

Full report

What does the school need to do to improve further?

- Improve the quality of leadership and management by:
 - developing a more accurate system for measuring and rewarding staff performance.
 - re-evaluating the current targets on the school improvement plan to accelerate progress for improvement.
 - developing a more effective system which will enable hospital teachers to access post 16 pupils who are hospitalised on adult wards
 - developing an effective and accurate system for measuring pupils' progress during their time in hospital.
 - ensuring planned changes to the website are completed.
- Improve the quality of teaching learning and assessment by:
 - ensuring the daily record kept by teachers includes examples of pupils' work so that future work may be more accurately planned.
 - ensuring next steps identified at the end of a learning session are communicated to pupils and are followed up at the time of the next lesson in order to accelerate pupils' progress.
 - increase, when medically possible, the time spent with individual pupils in order to maximise their progress.
- Accelerate the progress made by pupils by:
 - improving systems in order to identify pupils' levels of knowledge and skills more quickly and accurately.
 - ensuring work set for the most able pupils matches their needs and offers them sufficient stretch and challenge to maximise their progress, particularly in English.

Inspection judgements

Effectiveness of leadership and management

Requires improvement

- Since the last inspection there have been changes within the leadership of the hospital pupil referral unit. This unsettled period has slowed the development of better systems to improve the quality of both teaching and learning, and outcomes for pupils.
- The lack of a strategic approach by leaders and the absence of external support in the recent past have slowed the development of systems to plan a clear pathway for improvement. As a result, an effective school improvement plan has only recently been developed. While this current plan needs further development it shows clearly that the new leadership team have begun to bring about change at a fast pace.
- Similarly, an effective system for evaluating staff performance has also only recently been implemented. The new system is beginning to identify strengths and weaknesses within the unit. The leadership team are aware that further refinement is needed.
- The current system in place to measure pupils' progress while attending the hospital school does not enable teachers to develop pupils' learning and plan for future learning. For example pupils' progress is based on a system which measures pupils' own levels of understanding. While this is often effective, staff do not then use this information to set learning targets for individual pupils or plan for the next lesson. This slows pupils' progress overall.
- The curriculum offered to pupils who attend the school is narrower than it could be. Staff recognise the importance of developing pupils' skills in English and mathematics, particularly when pupils only attend for short periods of time. However opportunities are sometimes missed to develop pupils' skills and knowledge in other subject areas, particularly when pupils remain in hospital for longer periods of time.
- Young people over the age of 16 are offered a choice about whether they wish to spend their stay in hospital on an adult ward or on the children's ward. Currently there is not an effective system in place to identify and offer education to these pupils. Staff and leaders are aware of this but currently no action has been taken to resolve this issue.
- The school website is currently described as under construction. As a result, it does not currently meet the Department for Education specification.
- The recently appointed executive headteacher is currently the head of an outstanding secondary school. The newly appointed head of school has previous relevant leadership experience. Together they form a formidable and effective team who are already very clear about the changes needed in order to bring about improvement at a fast pace and are already bringing about change.
- Staff on the hospital ward value the role played by the hospital teaching staff both in ensuring pupils do not fall behind in their school work and in helping to bring a sense of normality to an often stressful and potentially frightening environment.
- Staff from a pupil's home school spoken to during the inspection gave very positive feedback about the work of the hospital teaching team, particularly in relation to pupils who are recurrent admissions to the hospital. Comments such as 'teaching staff always

contact us well before the pupil's planned admission date. This allows us time to prepare work and send it to the hospital.' This close working partnership reduces the time pupils lose from their studies and improves their progress over time.

- The system currently in place to register pupils taught in the hospital links directly to TRACKS main base. This centralised approach to record keeping informs home schools of the time their pupils spend in school and this is recorded on their registers.

Governance of the school

- The management committee takes responsibility for the sister hospital pupil referral unit at Bradford Royal Infirmary, TRACKS pupil referral unit for pupils with mental health needs and the home tuition service.
- Recent additions to the management committee, including the chair of the management committee, have strong levels of skills and understanding. Through visits to the unit and through discussions with past and present leaders, they have quickly recognised key issues.
- The local authority, working with the management committee, have brokered the support currently in place from the executive headteacher and his outstanding school. This support and expertise, coupled with the skills of the new head of school, have given the leadership team sufficient capacity to move the unit forward.
- The management committee meets regularly and there is a clear focus on developing each of the pupil referral units individually. This ensures that management committee members have a very clear understanding of the needs of each unit.
- Management committee members have a diverse and broad range of skills. Minutes from recent meetings demonstrate their ability to both support effectively and hold current leaders to account.

Safeguarding

- The pupil referral unit is based within a hospital ward and as such follows hospital safeguarding protocols. However the pupil referral unit has a safeguarding policy which is bespoke to the setting. Staff also have clearly understood protocols which are unique to the school. For example they have their own whistle-blowing policy.
- There are five staff across the four units trained as designated safeguarding leads (DSL). Staff are aware of the protocols and procedures around reporting an incident. However at the start of the inspection it was not clear which of the five DSLs to contact. By the end of the inspection a rota was in place which clearly identified to staff who was on DSL duty at which time.
- Staff within the pupil referral unit work very closely with medical staff to ensure a culture of safeguarding is in place across the ward. For example, hospital teachers have direct access to and contribute to patient notes. Through regular discussions with hospital staff they are kept very closely briefed about any issues identified by hospital staff and tailor their work accordingly.

Quality of teaching, learning and assessment

Requires improvement

- Teachers work very closely with individual pupils and mostly tailor the work set to the individual needs of pupils. However, they do not often collect groups of pupils together to work. This reduces the amount of time during which pupils have access to learning. As a result, at times pupils are ready and keen to learn but teachers are not available to teach them. This slows pupils' learning overall.
- Staff rely heavily on pupils to suggest what they would like help or support with in learning. This works well for incidental learning sessions where pupils are only in hospital for short periods of time. However this approach works less well when pupils are in for longer periods of time and reduces the depth of learning and progress made by individual pupils.
- The teaching role within the unit is shared by two or more teachers and a teaching assistant. Staff keep clear records of the work they complete with pupils. Records are often kept electronically so that different staff can see what has gone before. However record keeping is often descriptive and does not evaluate pupils' progress in sufficient depth. Records rarely include examples of pupils' work and, as a result, it is difficult for leaders and managers and other staff to evaluate pupils' progress and plan effective follow on work.
- Pupils receive constant feedback in teaching sessions. Most of the feedback is oral and is given appropriately at the time during the teaching session. However planning notes from different staff show that where a pupil may need further practice or more support to learn this is not consistently followed up at the next session. As a result, pupils may continue to make similar mistakes and learning does not accurately build upon pupils' previous understanding.
- Hospital teachers are exceptionally skilled at engaging the pupils in their care. They are frequently required to teach pupils of different ages and with a diverse ability range. They have an almost chameleon-like ability to switch between pupils and to develop a rapport with each one. For example, pupils often arrive in the school room feeling unwell and sometimes upset and scared. Once engaged on practising an aspect of school work they were unsure about, they relax and forget their concerns and enjoy the opportunity to be a pupil rather than a patient.
- Staff quickly develop strong relationships with the parents of pupils. Parents' positive feedback on the service was reflected in comments such as 'My child has so much enjoyed coming to the hospital school. She says her mathematics lessons were the best she has ever had and now feels much more confident with her times tables.'

Personal development, behaviour and welfare

Good

Personal development and welfare

- The school's work to promote pupils' personal development and welfare is good.
- Staff work closely with members of the medical team to ensure pupils' welfare needs

are met. Staff also work closely with parents to enable them to support their children during their time in hospital.

- Ensuring pupils are able to keep up with school work is a key focus of education in hospital. This often reduces pupils' levels of anxiety particularly during key times, for example during national examinations.
- Pupils' self-esteem is often low when they are in hospital. Staff work hard to boost their self-worth and ensure they feel valued, for example by encouraging pupils to keep in touch with friends and contacting home schools to give staff updates on pupils' progress.
- Pupils often feel scared when in hospital. Brief discussions with pupils during the inspection showed that all felt happy and safe when attending lessons in the school room.

Behaviour

- The behaviour of pupils is good.
- Despite the high levels of stress pupils are often under their behaviour is nearly always good in lessons delivered in the school room or by their bedside.
- Records show pupils are often very keen to come to school and will actively seek out hospital teaching staff and ask to be taught while on the hospital ward. Attendance data is fed back to home schools who often log attendance in hospital on individual pupils records
- Some pupils refuse to attend school when invited, and when they do not attend it is often because they are too unwell. Hospital staff work closely with the hospital teaching team to ensure pupils are given every opportunity to attend. For example, when necessary they give help and advice on barrier nursing techniques to enable pupils to learn even when infectious.

Outcomes for pupils

Requires improvement

- Pupils' progress within the unit requires improvement overall because pupils are not always given sufficient time to learn. This is because sessions are usually set for individual pupils and for 30 minutes only. Follow up work is sometimes set but this is not always followed up in a meaningful way. An example of this could clearly be seen during the inspection as pupils waited outside the school room in the afternoon after a brief session in the morning.
- Pupils arrive in the unit with a wide range of different needs and with very different skills and knowledge. Current systems do not give staff sufficient information about the abilities of different pupils fast enough. As a result, work carried out with pupils does not always meet their needs as accurately as it could, particularly the most able.
- Last year school records show that pupils who attended the unit made more progress in mathematics than in English. Because staff do not currently keep records of pupils' work, it was not possible to ascertain accurately the reason behind this. However

during the time of the inspection, no English was taught within the unit and pupils' records showed that for those pupils who had been in for longer periods a larger percentage of their teaching time had been dedicated to mathematics.

- Teachers do not routinely keep records of work completed by pupils. However, they do keep electronic copies of examples of pupils' work and sometimes of pupils' actual work, for pupils who are recurrent admissions to the unit. A larger proportion of pupils in this group have special educational needs and records show that staff are skilled at engaging this group of pupils and overall their progress is good. Discussions with leaders from these pupils' home schools confirm this.
- The progress made by disadvantaged pupils is not separately measured by unit staff as pupils' offer of education is based upon their health needs alone. The unit does not receive pupil premium funding for any pupils.

School details

Unique reference number	133753
Local authority	Bradford
Inspection number	10036539

This inspection of the school was carried out under section 5 of the Education Act 2005.

Type of school	Pupil referral unit
School category	Pupil referral unit
Age range of pupils	4 to 19
Gender of pupils	Mixed
Number of pupils on the school roll	0
Appropriate authority	Local authority
Chair	Sally Birkbeck
Head of school	Hannah Whittaker
Telephone number	01274582995
Website	www.tracks.bradford.ac.uk
Email address	office@tracks-ed.org
Date of previous inspection	22-23 September 2015

Information about this school

- The school does not meet requirements on the publication of information related to special educational needs, exclusion, charging and remissions, and on how complaints are handled on its website.
- The school is a pupil referral unit which is based in ward 17 in Airedale hospital. It forms part of TRACKS which consists of four services which include a second pupil referral unit based in Bradford Royal Infirmary, a unit for pupils with mental health needs who are unable to attend school and the local authority's home tuition service.
- The unit works to meet the needs of pupils who are aged between four and nineteen who are in hospital but are considered well enough to receive education.
- Due to the rural location of the hospital, pupils who attend come from a wide geographical area, including North Yorkshire, Cumbria, Bradford, Keighley, Ilkley and surrounding areas.

- Since the last inspection a new leadership team has been put in place consisting of a head of school and an executive headteacher.
- Two teachers and a teaching assistant currently work within the unit.
- The school does not use alternative provision.

Information about this inspection

- The inspector carried out joint lesson observations with two members of the senior leadership team.
- The inspector observed the hospital teacher work in the school room. No bedside observations were made.
- The inspector held discussions with the ward manager, members of the leadership team, teaching staff, two members of the management committee, and the hospital play leader.
- The inspector analysed school documents including safeguarding documents, curriculum documents and records of lessons taught.
- Informal discussions were held with a small group of pupils.
- The inspector took into account views from a small group of parents, and feedback from parents collected by school staff.

Inspection team

Marian Thomas, lead inspector

Her Majesty's Inspector

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