

Baskerville School

Fellows Lane, Birmingham B17 9TS Residential provision inspected under the social care common inspection framework

Information about this residential special school

Baskerville School is a maintained day and residential school for children aged 11 to 19 who have autism spectrum disorder. Up to 16 children use the residential provision. Children stay from Monday to Friday and return home each weekend. Baskerville residential provision comprises three residential family units. Each unit has a particular focus and aim, according to young people's needs, including therapeutic care and education and supporting young people through adolescence into adulthood. The residential provision was last inspected in March 2018. Fifteen children access placements at present. The head of care is suitably qualified.

Inspection dates: 26 to 28 February 2019

Overall experiences and progress of children, taking into account	outstanding
How well children are helped and protected	outstanding
The effectiveness of leaders and managers	good

The residential special school provides highly effective services that consistently exceed the standards of good. The actions of the school contribute to significantly improved outcomes and positive experiences for children.

Date of previous inspection: 5 March 2018

Overall judgement at last inspection: outstanding



Key findings from this inspection

This residential special school is outstanding because:

- Children love staying in the welcoming residential provision.
- Children form exceptionally warm and trusting relationships with caring staff.
- Perceptive staff enable children who have highly complex needs to express their views wishes and feelings.
- Enthusiastic and proactive staff ensure that children have fun and have enriching new experiences.
- Children make significant and sustained progress in their self-confidence, independence skills, and their social and emotional development.
- Highly-skilled and dedicated staff help children to enhance their progress in school.
- Children feel safe and secure.
- Vigilant staff keep children safe.
- Leadership is inspirational.

The residential special school's areas for development are:

- Most areas of staff training are excellent. However, the monitoring records are not always kept up to date. One member of staff is still required to achieve a level 3 qualification in residential childcare.
- Although the use of physical interventions is rare, when this is necessary children and staff sometimes miss out on the opportunity to speak to someone who has not been involved in the incident.
- Although staff practice is excellent at ensuring that children of different genders who share the same residential provision are safeguarded, children's individual risk assessments do not reflect this practice.



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:

- All children and staff are given an opportunity to discuss with a relevant adult (who was not directly involved) within 24 hours incidents of restraint, including reasonable force, they have been involved in, witnessed or been affected by. (NMS 12.5)
- All existing care staff have attained a relevant minimum level 3 qualification or have qualifications which demonstrate the same competencies. All new staff engaged from the commencement of these standards hold these qualifications or begin working towards them within 3 months of confirmation of employment. (NMS 19.2)

Recommendations

- One member of staff has still not completed the level 3 diploma in residential childcare.
- The head of care does not have a centralised system that enables him to monitor staff training.
- There is no system to ensure that children and staff are provided with an opportunity to speak to someone after a physical restraint who has not been involved in the incident.
- Although staff practice on safeguarding children who share the same residential provision is excellent, this practice is not captured in children's individualised risk assessments.
- Some bedrooms curtains are showing signs of becoming worn.



Inspection judgements

Overall experiences and progress of children: outstanding

Children with highly complex needs thoroughly enjoy their residential stays. They benefit hugely from exceptionally warm and trusting relationships with dedicated and child-focused staff. This provides them with a strong sense of security and enables them to be relaxed before and after school.

Children have fun with enthusiastic staff and each other. They engage in a wide range of stimulating, enriching activities that are carefully planned to support their physical, social and emotional development. Children are placed with peers with similar abilities and needs, enabling them to gain the very most out of their residential experience. They benefit enormously from the strong emphasis that staff place on inclusion and enabling each child to maximise their potential.

Staff appreciate that communication is key to understanding the needs, views, wishes and feelings of each child. Perceptive, skilled staff use a wide range of communication methods, including verbal, Makaton, pictorial, social stories and body language to help children to participate in making informed decisions. A new wall chart, which is reflective of the children's diverse methods of communication, provides children with a child-friendly, written and visual guide on how to make complaints. This gives them a strong message that they can talk to staff at any time about anything that is concerning them. The appointment of an independent person, who has autism spectrum disorder and is young, is a wonderful innovation. He comes to meet the children in the residential provision and they can contact him at any time to discuss any concerns they may have.

Children's targets focus on valuable life skills and independence. Staff ensure that if a child is struggling to meet their targets, the targets are broken down to make them more achievable. Targets are identified in consultation with the child, their parents and their designated teachers. Targets include developmental needs identified in the child's education, health and care plan. Children make significant progress against their targets and staff ensure that each achievement is celebrated. Every week, a child is awarded 'star of the week' in their residential unit. In addition, an annual awards evening is held that highlights and celebrates what children with highly complex needs can achieve.

Children make significant and sustained progress in independence and self-care skills, including getting their own drinks and snacks, loading the dishwasher, taking their laundry to be washed and tidying up. One child is making excellent progress in his targets, including interacting more with his peers and developing his communication skills. His parent said that since her son has been accessing the residential provision he has made 'huge progress'. She said that he is happy, his independence skills have improved 'massively', and he is a lot calmer.

Attending the residential provision removes the stress of the daily commute to school



for children. This has significant benefits for their anxiety, ability to self-regulate their emotions and energy levels. They have excellent school attendance as a direct result of their residential stays. This enables each child to be more focused on their learning and maximising their ability to make sustained progress in their education.

Staff support children's health needs with the help from the occupational therapist and the speech and language therapist. One child, who felt unable to speak in school, is now able to communicate verbally with trusted staff, because of sensitive and highly skilled collaboration between care staff and the speech and language therapist.

Children experience excellent, individually planned transitions into and out of the residential provision. Some staff work a 'combi system' which involves them working both in school and in the residential setting. Children get to know them in school and can then benefit from transitioning into the residential provision with the support of staff whom they know. Staff listen to children who say that they prefer not to have combi workers as their key worker, because they prefer a separation between the school day and residential experience. Staff respect and respond positively to their preferences.

An area for improvement is that some of the curtains in children's bedrooms are beginning to look worn. The head of care is planning to replace them soon.

How well children are helped and protected: outstanding

Children said they feel safe and their parents agree. High staffing levels ensure that vigilant staff can closely monitor each child. Staff know the children extremely well and understand the triggers that affect their changes in behaviour. Trusting relationships and detailed behaviour management support plans help children in being able to self-regulate their emotions and to keep themselves safe. No child has gone missing from the residential provision or is at risk of child sexual exploitation. The use of physical interventions is rare and only as a last resort. The environment is safe and well maintained. Recruitment of staff is safe, and the recording and administration of medication is effective.

Staff are alert to any potential safeguarding issues. The head of care, who is now the deputy designated safeguarding lead for the residential provision, regularly reviews the detailed risk assessments and ensures that staff regularly read all updates. The introduction of a new computerised communication system, 'my concern', enables staff to record concerns at any time, day or night, about children. This input, held on a secure website, is viewed regularly by members of the leadership team, who quickly decide if action is needed to safeguard a child and identify any concerning trends.

Staff place safeguarding at the centre of their practice and work with children to help them to recognise dangers. Safety in the kitchen, internet safety, crossing roads and safety when travelling are all addressed.

When girls and boys share the same residential provision, staff ensure that both



genders are kept safe. This includes boys and girls having their own designated bathrooms and bedroom doors being fitted with sensor alarms.

The head of care works closely with the school designated safeguarding lead to monitor any concerns and safeguarding issues. Staff work together with school staff, placing authorities and parents to identify potential risks and ensure that children are kept safe. The head of care has used research to develop valuable materials to share with parents to support children's mental health and has delivered training to staff on mental health first aid. This informed training helps the staff and children's parents to recognise early signs of children beginning to experience mental health issues that can potentially impact on their safety.

The effectiveness of leaders and managers: good

The head of care is inspirational to staff and aspirational for children. His decisions are child-centred, and he expects high standards of practice and commitment from staff. He is constantly seeking to develop new areas of practice and to drive up standards of care. The head of care has proactively forged positive links with other residential special schools and a mainstream school, to share good practice and learn from each other. He recently gave a presentation to the head of the children's autism team in Birmingham City Council.

Staff love working here and said that they feel supported and valued. Staff demonstrate in-depth knowledge and understanding of the needs of children who have autism spectrum disorder and they present as highly motivated and committed. A stable and experienced staff team provides children with consistent care, which is enhanced by the combined workers system. Staff are reflective and child-focused.

The head of care ensures that staff receive regular supervision and opportunities to discuss practice. Staff engage in weekly training sessions to discuss and learn about relevant issues, for example new emotional support plans and mental health issues such as self-harm. Additional training addresses sexuality to support staff to talk to children about their identity more confidently. They have also had training with the educational psychologist on self-regulating behaviour, and on how well-being impacts resilience.

The head of care is passionate about the service. He is creative and constantly researching and looking for better ways to address complex issues with children, parents and staff. He is keen to expand his own and staff's experiences and knowledge for the benefit of children. One member of staff has conducted research in collaboration with educational psychologists. They are developing an 'emotion coaching' framework which staff can use to promote children's resilience. Staff can use this to, for example, work with children on managing problems and enabling children to recognise and express their emotions. Staff and the head of care are also developing resources to help parents understand and address issues of children's sexuality, including cultural and safety issues.



Governor oversight is good. They demonstrate knowledge and understanding of how the school and residential provision work together for the benefit of children. The governors quickly address any issues that arise with the head of care and will challenge the senior management team if necessary. There appears to be a lack of clarity regarding the role of the newly appointed residential governor as the independent visitor, which needs to be resolved by the head of care.

Staff work extremely well with parents, teaching staff and other professionals. Staff are in weekly dialogue with parents to update them and address any issues or concerns they may have regarding their child. Parents said that this is both reassuring and informative. Ongoing collaboration and consultation with the school nurse, paediatrician, speech and language therapist and occupational therapist ensure that staff are equipped to identify and address effectively any health and developmental needs that arise for children.

Despite all the many strengths of the residential provision, there are a few minor shortfalls. One member of staff has still not completed the level 3 diploma in residential childcare. The head of care does not have a centralised system that enables him to monitor staff training. For example, he has not picked up that some members of staff are not up to date with their first aid training. Furthermore, there is no system to ensure that children and staff are consistently provided with an opportunity to speak to someone after a physical restraint who has not been involved in the incident. Although staff practice on safeguarding children who share the same residential provision is excellent, this practice is not captured in children's individualised risk assessments.

Information about this inspection

Inspectors have looked closely at the experiences and progress of children. Inspectors considered the quality of work and the differences made to the lives of children. They watched how professional staff work with children and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and their families. 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 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: SC017168

Headteacher/teacher in charge: Mrs Jackie Smith

Type of school: Residential special school

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Inspector

Louise Whittle, social care inspector (lead) Debbie Holder, social care inspector





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