

# Parkwood Hall Co-operative Academy

Parkwood Hall School, Beechenlea Lane, Swanley, Kent BR8 8DR

Residential provision inspected under the social care common inspection framework

## **Information about this residential special school**

Parkwood Hall Co-operative Academy is a residential special school providing day and residential placements for children between the ages of seven and 19 years who have a wide range of special educational needs such as speech, language and communication needs, moderate to severe learning difficulties, autism spectrum disorders, and/or medical needs. At the time of the inspection, there were 15 full-time, four part-time and three flexi-residential pupils. In total, the school can accommodate 30 residential pupils. The pupils reside in residential units in the main house.

**Inspection dates:** 14 to 16 October 2019

**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 **good**

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

**Date of previous inspection:** 27 November 2018

**Overall judgement at last inspection:** good

## Inspection judgements

### **Overall experiences and progress of children and young people: good**

The children accessing the residential facility benefit from building strong relationships with the care staff who are looking after them. The staff know the children well, have excellent knowledge of their needs and risk-taking behaviours, and work well together, as a team. The inspector observed staff nurturing and supporting children, especially when children were anxious or distressed. The children make significant progress as they learn to trust the staff and listen to the advice and guidance they give. Progress is made in social skills, life skills and community living.

The school's approach is to focus on children's emotional health as well as their physical health. The children have access to a range of specialist support workers in the school who help them to become more emotionally resilient and to manage their anxieties more effectively. Specialist support includes speech and language therapy, occupational therapy, music therapy and psychotherapy. Therapists provide insights which are used to inform all aspects of the work with children, including in the residential setting. The therapists focus on each pupil as an individual and tailor their input to meet children's particular needs.

The health arrangements are excellent. The school nurse is highly organised and effective in monitoring the children's health needs and ensuring that they have the appropriate support. Individual care plans inform the staff team members, so that they have the necessary knowledge of the children's medical conditions and medication requirements. Emergency protocols are in place to further protect the children and the staff. The nurse keeps herself up to date with guidance and is very well informed of the changing physical and mental health needs of the children. Systems for the administration of medication are robust. Policies and procedures are continually reviewed and, when necessary, updated to make practices safer. Good processes are in place if an error should occur.

The views of children are important to the staff and are actively sought using a range of communication methods, appropriate to each child. Children's views have informed the refurbishment of the residential provision. The school's governors engage with the children, so they can receive feedback directly from the children. The children's self-esteem and confidence grow as a result of this; they feel valued. A strength of the school is in establishing constructive relationships with parents, carers and other professionals involved in the children's lives. Parents commented very positively about the care their children receive.

The children enjoy the residential experience, especially the range of activities on offer. There is an increased focus on outdoor activities that encourages fitness. The children also enjoy the food on offer, with a well-balanced and healthy choice of foods available. Mealtimes provide a learning environment; coloured counters are used so the children know if they are eating carbohydrates, protein or fats, and how

much is a healthy amount. Individual food preferences are catered for well.

Records show the progress children make; however, the senior leadership team wants to further develop the systems in use.

The governing body continues to invest in the refurbishment of the residential provision. Newly refurbished areas are of a high standard, with other areas satisfactory but in need of upgrade. The main school dining room needs re-configuration to provide an improved sensory environment. The new senior leadership team has identified this and is currently in discussion with the governing body and occupational therapists to look at ways of making improvements.

The need to decrease the use of plastics across the whole school site is acknowledged by the leaders and governors.

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

The standard of safeguarding and child protection practice is good. The management of safeguarding has changed since the last inspection, with a new dedicated safeguarding lead who is supported by a team of deputy safeguarding leads. They meet as a team very regularly and are well informed of those children at risk or causing concern. Together they form an experienced team of effective practitioners who follow both internal and external safeguarding policies and guidance. Suitable records are kept; however, a few records showed that the staff's use of language is, at times, not appropriate and lacks clarity. The safeguarding lead has identified this through monitoring systems and confirmed that it is being addressed.

The staff are familiar with the procedures they should follow when they have concerns for a child's welfare. Concerns are promptly shared with the designated lead for safeguarding, and consultations or referrals to the relevant safeguarding agencies are appropriately made. This has resulted in some children and families receiving early help services from their local authorities. Generally, senior leaders communicate well with safeguarding professionals.

Senior leaders and residential care staff are familiar with the risks associated with each child's vulnerabilities and unsafe behaviours, and there are strategies for mitigating against risk in place. Good planning in residential time ensures that the staff are clear about where they need to be and what support they need to give. Careful consideration is given to the allocation of sleeping accommodation, however this is not recorded. The staff are well informed of why children are allocated specific bedrooms.

One child told an inspector that they were not comfortable with the use of closed-circuit television (CCTV) in the residential provision. While its current use was minimal, leaders took immediate action to turn off the CCTV and commence a review of its use.

The care staff develop positive and supportive relationships with the children. Children told the inspector they feel safe and protected from bullying and feel comfortable speaking up about worries or concerns.

At times when children's behaviours escalate, and they place themselves at high risk and require enhanced protection, the staff work collaboratively with parents, staff and other professionals to assess whether the placement remains suitable. Despite many challenges, the staff continually advocate in the child's best interest.

The use of physical restraint is rare and proportionate, and it is only implemented by trained staff. The children confirmed that if they are involved in a restraint they have the opportunity to reflect on and discuss the incident with a member of staff. Similarly, staff debriefs following a physical intervention do occur. However, the staff are not consistent in recording this. All restraints are discussed at weekly senior leadership meetings and with the oversight of a restraint trainer. This informs any changes needed in strategies to manage and further protect the children. The senior leadership team has identified the need for improved recording as an area of development.

Recruitment procedures are rigorous and minimise the risk to children from unsuitable adults working with them. Health and safety arrangements are highly organised, well monitored and ensure that all health and safety shortfalls are addressed appropriately.

### **The effectiveness of leaders and managers: good**

Since the last inspection, a permanent school principal has been appointed. She is supported by an experienced senior leadership team and a middle management team, which has also seen changes since the last inspection. The changes have strengthened the management of the school and residential provision. There is good succession planning for the head of residential care role, as this may change in the next year. Until such time, the existing head of care is effective and supportive of changes. She has many years' experience of working at the school and knows both the staff and the children well.

The new management team is focused on prioritising the needs of the children. There is work being undertaken to review the school's admission processes and decision-making to ensure that the staff, both educational and residential, can meet the increasingly complex needs of the children. In addition, the leadership team has identified the need to review systems, so they are used to their full potential; for example, the use of 'behaviour watch' in recording and monitoring of incidents and recording of restraints.

Leaders and managers with responsibilities for the residential provision are passionate and highly committed to ensuring that the children have a very positive

experience at the school. Team leaders, who lead shifts, set high standards of child-centred care. They have substantial relevant experience and are highly effective. The whole staff team knows the children well, develops warm and friendly relationships with them and promotes an atmosphere of happiness, achievement and positivity.

All shifts are covered by permanent staff. The temporary closure of one residential house has enabled the residential house currently being used to be fully staffed. This includes having waking night staff. Staff vacancies have proven difficult to fill. Senior leaders and governors are looking at how they can be more successful in recruitment.

The staff receive good-quality training appropriate to their roles and the needs of the pupils. Training is subject to review as the needs of children change. Staff receive regular supervision that provides reflective time for them. Policies and procedures provide the staff with clear direction and strong guidance. Many policies are currently being reviewed.

Leaders, managers and the governing body have a good understanding and awareness of the school's strengths and areas for improvement, and an improvement plan is being implemented

Complaints are managed well, including investigations requested by external agencies. There is an improvement in the recording of complaints, with records showing the category and outcome. Decisive action is taken, in line with the school's disciplinary policy, if needed.

## **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:

- 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. In particular, have a written record/risk assessment of how decisions are made in the allocation of accommodation.
- 5.8 Any use of surveillance equipment (e.g. CCTV cameras) or patrolling of school buildings or grounds for security purposes does not intrude unreasonably on children's privacy. In particular, ensure that there is clear rationale, which is recorded, for the use of CCTV, and that children are informed of its use.
- 12.5 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. In particular, ensure that staff are consistent in their recording of the children's and staff's debriefs following a restraint.

### **Information about this inspection**

Inspectors have looked closely at the experiences and progress of children and young people 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:** 1159380

**Headteacher/teacher in charge:** Anna Mansaray

**Type of school:** Residential special school

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## **Inspector**

Liz Driver, social care inspector



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