

Ash Field Academy

Ash Field School, Broad Avenue, Leicester LE5 4PY

Residential provision inspected under the social care common inspection framework

Information about this residential special school

This is an academy school with 157 pupils. The residential provision is a dedicated area in the main school, which caters for up to 18 children at any time who are aged 8 to 19 years old. Children have physical and/or health needs, as well as associated communication, sensory and learning needs. Children access the residential service for usually one or two nights a week.

Inspection dates: 17 to 19 December 2019

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

How well children and young people are helped and protected **outstanding**

The effectiveness of leaders and managers **outstanding**

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 and young people.

Date of previous inspection: 11 March 2019

Overall judgement at last inspection: outstanding

Inspection judgements

Overall experiences and progress of children and young people: outstanding

Children thoroughly enjoy their residential experience. They enjoy the activities and particularly like meeting up with their friends. A child said: 'I like to come here because most of my friends live quite far away so I get to see them in resi.' Children also enjoy soft play, sports, music club and playing games. There is a relaxed and calm atmosphere, and children and staff clearly enjoy being in each other's company. Twice a year, children participate in a residential trip away from the school. These trips away provide rich and varied opportunities for children. They grow in confidence and maturity and develop their self-esteem. However, there are currently limited opportunities for children to regularly access the local community. Leaders have recognised that this is a priority for improvement.

Children receive a highly personalised induction into the residential provision. For children who have profound and multiple disabilities, this includes a sensory story to help them settle quickly. The sensory story is the account of coming into the residential provision using the child's senses to help them to understand what is happening. This creative approach helps children to feel safe and secure.

Staff have warm and supportive relationships with children. Children have excellent relationships with each other and can be often seen helping each other. They are confident and comfortable in their surroundings. Children are proud of the residential provision. They feel valued and respected. Their views, opinions and ideas are valued, and offering choice and encouraging decision-making are part of the culture. What children think really matters to the staff team.

Staff will overcome barriers if it is the right thing for the child. For example, staff received bespoke training about sensory learning. This provides continuity between school and the residential provision for children with profound and multiple disabilities. This has enabled a child who was reluctant to touch food to now put different types of food in her mouth. She will also do this at home as well. A child said: 'Resi is all about independence. It's not about what you can't do. They teach you the stuff that you can't do and then you discover that you can do it.'

Exceptional 'across school working' has a profoundly positive impact on progress for children. Children have independence targets linked to their classroom targets. Research-informed practice has been disseminated to staff to help them have a better understanding of how staff can fully support children. This has meant that children flourish, making significant progress, particularly socially and with their independent living skills. Children have learned life-changing skills. For example, a child gained the confidence to walk rather than be in a wheelchair, and a child with profound and multiple disabilities has learned to use the toilet.

Staff know the children exceptionally well. There is a child-centred, individualised

approach. Information for staff about children has much improved.

The health and well-being of children are highly promoted. Children have access to a range of healthcare professionals as well as a counsellor to provide emotional support. Medication is safely managed, but some improvements could be made because:

- staff do not have access to the information leaflet for all medication
- there was not a clear record of any medication changes from parents, specifically regarding warfarin. This was acted on immediately
- medication in opened bottles is not dated with the opening date to ensure that it is still useable and has not exceeded its shelf life.

Mealtimes are well-organised, sociable occasions. Children are offered choices, and dietary requirements are known. Children are sensitively supported throughout their meal. However, staff currently only eat breakfast with children, not the evening meal. This would give children a more homely, sociable experience.

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

Children have a strong sense of safety. Staff are uncompromising about keeping children safe. Working with external agencies is strong and key to helping children to stay safe.

Behaviour is exemplary because staff have high expectations of children and use carefully targeted interventions to promote positive behaviour. For example, a child would struggle to sit at the meal table and would use inappropriate language regularly. He now sits patiently waiting for his meal and does not use inappropriate language. This is transformative for this child.

Children are respectful and helpful. They do not report any bullying. There have been no serious incidents or incidents of children going missing from the residential provision.

Children have an excellent understanding of how to keep themselves safe when they are online. They know the rules and think they are fair.

Safety mapping has been introduced, which means that designated safeguarding leads regularly review cases of concern, looking at what is working well and what mitigating elements are keeping the risks lower, as well as any complicating factors. This helps to protect children.

Children share bedrooms. They said that they like this because they can be with their friends. Staff regularly check children throughout the night, and a listening device in each room means that when children call out staff will hear them. Children appear

safe, and risks appear well managed. However, written risk assessments have not been completed. This would ensure that staff are fully aware of any risks and how to reduce them.

The effectiveness of leaders and managers: outstanding

Leaders and managers are highly ambitious for children. There is a strong emphasis on a child-centred approach, which enables children's progress to be outstanding. Leaders and managers have an in-depth understanding of the strengths and weaknesses of the service. They have a focus on addressing shortfalls and moving the service forward. They are a highly effective leadership team that is continually looking to challenge and extend the service they provide for children.

Staff are highly committed to children. They form strong, nurturing relationships. Fun is central to their approach, which results in children choosing to go to the residential provision because they enjoy the experience so much. They are an established team of staff who are mostly qualified. New staff are completing an appropriate qualification. They continually look for ways to improve their own practice to improve the lives of children.

Governors have an in-depth understanding of the residential provision and offer good support and challenge. They regularly visit the residential provision, speaking to staff and children to gain a better understanding of the lived experience of children.

Parents/carers are very happy with the residential service and said that communication is excellent. They feel fully involved in the care of their child.

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

Recommendations

- Trips out could be improved to ensure that children have regular opportunities to access the local community. (Linked to national minimum standards (NMS) 10.1)
- Ensure that risk assessments are completed. This specifically refers to children sharing bedrooms. (Linked to NMS 6)
- Consider staff and children eating their evening meal together to promote a more family-type, sociable occasion. (Linked to NMS 8)
- Improve medication procedures by:
ensuring that staff have access to an information leaflet for each drug that is stored within the residential provision; ensuring that there is a clear record of any medication changes from parents, specifically regarding warfarin; and, ensuring that the medication in opened bottles is still useable and has' not gone beyond its shelf life. (Linked to NMS 3.6)

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: SC006451

Headteacher/teacher in charge: Jenny Bone

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Inspector

Joanne Vyas, social care inspector (lead)

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