

Partnership Training Limited

Progress monitoring report

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Type of provider:	Independent learning provider
Address:	Pentland House Village Way Wilmslow Cheshire SK9 2GH

Monitoring visit: main findings

Context and focus of visit

Partnership Training Limited was last inspected in February 2020. At that time, inspectors judged the overall effectiveness of the provision to require improvement.

This monitoring visit focused on the extent to which leaders and those responsible for governance are taking effective action to provide education and training in the current circumstances. It was undertaken as outlined in the [operational note on visits carried out from January 2021](#) and with reference to the further education and skills handbook.

These visits are to help learners, parents, employers and government understand how providers are meeting the needs of learners in this period, including those with high needs and those with special educational needs and/or disabilities.

Following changes to government guidance and the imposition of COVID-19 (coronavirus) lockdown restrictions, inspectors carried out this monitoring activity remotely. As a result, the range of evidence available to inspectors was narrower than would be the case during an on-site inspection. Therefore, this report provides a more limited level of assurance.

The impact of COVID-19 has been taken into account in the findings and progress judgement below. Inspectors did not evaluate leaders' response to COVID-19 during the spring and summer of 2020, when the provider was not open to all learners and there were no national expectations regarding remote education.

Theme

What progress are leaders and those responsible for governance making to ensure that staff teach a curriculum and provide support to meet learners' needs, including the provision of remote/online learning? **Reasonable progress**

Directors' and the governors' actions have begun to rectify the weaknesses identified at the previous inspection. The pace of improvement slowed due to the impact of COVID-19 restrictions on the care sector.

The appointed person responsible for governance holds directors to account for the quality of the apprenticeship curriculum. Following challenge from the appointed person, directors developed and embedded curriculum frameworks called blueprints. Tutors use these blueprints to plan and teach the curriculum in a logical order. For example, at the start of their programme, adult care apprentices study health and safety and infection control, which they put into practice in their care settings.

The governing board is made up of the two company directors and a responsible person for governance, who also acts as a critical friend. The governing board has appropriate oversight of the quality of education via oral reports and access to live reports online. Directors and the responsible person rightly recognise that their oversight would be strengthened if they received reports that provided a clear picture of performance against improvement targets. Directors and managers carry out regular reviews of the quality of training and assessment. Managers set improvement targets at monthly meetings they hold with tutors.

Tutors use assessments of apprentices' prior knowledge and experience to tailor their programme. They adapt apprentices' learning plans during reviews of apprentices' progress throughout the programme. Tutors adapt their teaching plans to meet the changing needs of employers, apprentices and their service users. For example, apprentices attended training in end-of-life care because of the increase in the number of deaths in their care settings as a result of the COVID-19 pandemic.

Tutors check apprentices' understanding, building their knowledge and skills over time. Employers said that apprentices are better at their job because of what they have learned on the programme. Apprentices use what they learn to influence, change and improve working practices in their care settings.

Directors ensure that tutors have the skills they need to provide a high-quality curriculum. They invested in internal and external training, including a management development programme. Staff personal training and development plans include specialist training about autism in care settings. Tutors use what they learn in their professional development training to improve their practices. For example, they ask apprentices questions that are more challenging so that they develop a deeper level of understanding.

Apprentices develop substantial new knowledge and skills as a result of their apprenticeship. For example, they use what they learn about autism spectrum disorder to provide effective care to service users. In 2019/20, most apprentices on standards-based apprenticeships achieved a merit or distinction in their final assessment.

Directors have begun to improve the coordination between apprentices' on- and off-the-job training, but this is slower than they would wish. They identify and incorporate employers' needs, such as dementia awareness and medication control, into apprentices' learning plans. This allows apprentices to make a positive contribution to their service users care plans.

Apprentices do not routinely get enough off-the-job training hours, because of the pressures at work due to the COVID-19 pandemic. Directors and managers work with employers to put in place catch-up plans for apprentices who have fallen behind.

Over half of current apprentices have gone beyond their planned end dates. This is due to delays in taking their functional skills examinations because of the COVID-19

restrictions. As soon as remote assessments for English and mathematics became available, directors worked with the awarding organisation to arrange for apprentices to complete the tests online. At the time of the visit, remote assessments were not available for functional skills Information and Communication Technology (ICT).

Due to COVID-19 restrictions in care settings, tutors teach apprentices remotely. Tutors have attended a range of training on how to teach online. For example, they use screen sharing when reviewing apprentices' assignments with them online. Apprentices have developed their remote and online learning skills. They take and upload videos of the practical skills they develop at work, such as administering medications. Apprentices access high-quality resources which include online safety and cyber awareness.

Directors prioritised apprentices' well-being because of the impact of COVID-19 on the care sector. Tutors contact apprentices at least fortnightly to check on their welfare. They support apprentices with worries such as catching COVID-19, for those working in domiciliary care. Apprentices received extra training about personal protective equipment and infection control. More apprentices working in domiciliary care settings have left their job before completing their apprenticeship when compared to previous years. Directors are working with employers to ensure that apprentices complete their work induction before starting the apprenticeship so that they understand the commitments to working in the care sector. At the time of the visit, it was too soon to see the impact of these changes.

Leaders and those responsible for governance should take further action to:

- increase the pace of improvement to rectify the weaknesses identified at the previous inspection
- put in place robust catch-up plans for apprentices to receive enough time for off-the-job training
- strengthen their oversight of the quality of education by providing reports that present a clear picture of performance against targets to improve.

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