

# Wennington Hall School

Lodge Lane, Wennington, Lancaster LA2 8NS

Residential provision inspected under the social care common inspection framework

## Information about this residential special school

Wennington Hall School is a small, specialist provider for pupils with special educational needs and/or disabilities. All pupils have an education, health and care (EHC) plan. The primary needs described in most pupils' EHC plans relate to social, emotional or mental health needs. Some pupils have autism spectrum disorder or experience difficulties when communicating with others. Residential pupils are currently aged between 14 and 16 years.

Due to COVID-19 (coronavirus), at the request of the Secretary of State, we suspended all routine inspections of social care providers on 17 March 2020.

We last visited this setting on 6 October 2020 to carry out an assurance visit. The report is published on our website.

### Inspection dates: 10 to 12 May 2021

**Overall experiences and progress of children and young people, taking into account**      **requires improvement to be good**

How well children and young people are helped and protected      requires improvement to be good

The effectiveness of leaders and managers      requires improvement to be good

The residential special school is not yet delivering good help and care for children and young people. However, there are no serious or widespread failures that result in their welfare not being safeguarded or promoted.

**Date of previous inspection:** 2 July 2019

**Overall judgement at last inspection:** good

## Inspection judgements

### **Overall experiences and progress of children and young people: requires improvement to be good**

Children receive individualised care and enjoy good relationships with staff. Children tell visitors that they trust staff and enjoy their company. Inspectors saw staff support children well. Support was child-focused, and responsive to children's needs and wishes. There are currently seven children who have residential placements at the school.

Children enjoy their time in the residential provision. Staff source a wide range of on-site and community-based activities. There is an emphasis on outdoor pursuits. Rock-climbing, adventure cycling and quad-biking are very popular. They offer opportunities for children to take risks and have adventures safely. Staff use an activity monitoring tool to help them to analyse the activities. They tailor the activity programme to meet children's needs and wishes.

Children's plans reflect the outcomes set out in their EHC plan. Some children are making more progress than others from their starting point. Plans to support individual targets lack detail. Staff have made little progress in assessing children's independence skills. There is no formal plan to help them to improve. Even so, children enjoy mid-week shopping and meal preparation activities.

Parents and external professionals say that staff work well with them. Effective relationships have helped children to access improved support for their health needs. Staff work with others to promote children's emotional well-being. Staff are active partners in helping children to plan for their futures.

Children are making progress in understanding and managing their feelings and behaviour. When individual needs change, for example due to bereavement, staff respond well. They offer support to children and to their family. This helps children to manage their increased stress and worry. Staff promote children's engagement with the school counsellor. They liaise with mental health professionals to ensure that they offer children support. Staff recognise the impact of children's autism or other diagnosed needs. They use this knowledge to inform children's plans and support strategies.

Managers do not check children's outcomes in an organised way. All children are making progress in some areas of development. Staff are unable to measure all of the progress that children are making. They do not always set children new challenges when children achieve their goals. This limits the plans in place to help children to achieve their goals. It is unclear whether all children are reaching their fullest potential.

The quality of education in the school is currently judged to be inadequate. School leaders have a development plan in place to address this. Children in their final year

have all gained a college place. Younger children are enjoying access to college taster experiences. They take part in tasters and courses in practical subjects, such as plastering and bricklaying. This helps them to explore their work interests. The opportunity encourages children to plan their future work lives.

### **How well children and young people are helped and protected: requires improvement to be good**

Children say that they feel safe and cared for well by care staff. Parents agree with them. Staff know their risks and vulnerabilities, and regularly review them. They update their plans to help them to stay safe. Key workers spend time with children. They also use travel time to and from school to talk about life outside of school. Care staff promptly report any information that may mean children are at risk of harm. This promotes children's safety and well-being.

All staff have completed updates to their knowledge of safeguarding awareness. Staff are developing an understanding of how to help children to explore their emotions and relationships. The school safeguarding team knows how to promote children's safety and well-being. They respond to concerns related to children's health, well-being and safety. The deputy lead for safeguarding has improved liaison with external safeguarding professionals. She helps families to understand the risks their children face. She challenges healthcare professionals to provide children with diagnoses and support.

Leaders have introduced many separate electronic systems and processes for recording. These relate to incidents, child protection concerns and risk assessments. The quality of staff recording is variable. Staff do not always record their concerns in the right place. For example, staff reviewed one child's health needs in child protection records. Information about how staff should check the child was in two different areas of his risk assessment. The electronic copy of the risk assessment differed from the printed version. This left one member of night staff unsure about how he should carry out night checks. Some records contain unprofessional language to describe how children's behaviour affects staff. Leaders are aware of recording shortfalls. They have made slow progress in improving the situation.

Senior leaders review incident and safeguarding records. There is no clear record of their evaluation of them, and any later decisions. All required information is not kept in one place. This inhibits any external oversight of actions taken by staff. These shortfalls could affect the safety and welfare of children, although inspectors found no evidence of this.

Staff are learning how children's emotions and past experiences affect their behaviour. Staff help children to find positive ways to self-regulate. They intervene when necessary to ensure the safety of all. As a result, staff restrain children much less often. There is a significant reduction in the number of upsetting incidents. When staff have restrained children, they work with them to explore why this was necessary. They help children to think about what they can do to avoid such a situation developing in the future. This builds children's ability to identify helpful ways

to describe their feelings. It helps children to see the importance of asking for help at the right time.

Most residential children were isolating at home between January and March 2021. One attended as a day pupil. Staff explored with families why children were being kept at home. They took account of children's home life, known vulnerabilities and any emerging risks. They frequently contacted families and children. They collaborated with any external professionals who were supporting children. When possible, they visited homes to make direct contact. Staff updated individual risk assessments each week. They changed their assessment and actions arising to promote children's well-being. Parents say that they valued the improved communication between home and school. All residential children returned to school for the second half of the spring term and have settled in well because staff prepared well for their return.

The governor who is responsible for safeguarding has been absent since April 2020. The governing body oversees children's safety and well-being. Its members look at reports from the independent visitor. They attend regular pupil voice meetings. They hear reports from the headteacher about children's safety and welfare.

### **The effectiveness of leaders and managers: requires improvement to be good**

The headteacher and head of care are qualified and experienced. They have been in post for two years. The future of the school is uncertain. This creates anxiety in staff about their futures and has limited some development of the residential provision. Monitoring and oversight of the residential service are weak. Four national minimum standards are not met.

Leaders continue to focus on providing residential children with safe and nurturing care. The head of care is an effective role model for staff. This helps staff to provide children with positive experiences at school. Leaders addressed the previous failure to meet the national minimum standards. They appointed an independent visitor to the residential provision. He provides detailed reports to governors about the quality of care that children experience. The reports are positive about the residential provision. They include helpful actions for improvement. Residential staff understand the impact of trauma and adverse experience on children's well-being. This has improved staff oversight of children's welfare.

Relationships between care staff and children continue to be warm and supportive. The aims and objectives of the residential provision are being met. They have children's welfare at their heart. Staff listen to children's views. Children feel confident in their relationships with staff because staff respond to them well.

The members of the residential care team have limited opportunities to develop their professional practice. Residential staff say that they feel supported by their managers. They use planned supervision to understand the impact of their work with children. Ten out of 23 care staff are not qualified to the minimum level required.

Eight of those have not enrolled on a suitable course. The head of care does not receive supervision from someone who is experienced in residential care. Team leaders have not completed an appraisal. Their development needs are not formally identified. Team leaders are not pursuing any formal training to improve their management practice. They have not received training in supervision and appraisal. Despite this, the head of care has coached them in staff supervision skills. They offer the care team support and oversee staff practice. However, senior residential staff lack the support and guidance necessary to continually review and develop high-quality care practice.

Leaders suspended care staff meetings to redeploy staff to cover temporary school timetabling. The residential team has limited opportunity to reflect on its work and its impact. This limits the rate of improvement in the residential provision.

Governors have a weak understanding of the residential provision. This limits any opportunity for constructive challenge and development within the residential service. The governing body focuses on improving the quality of education. Its members rely on residential inspection outcomes and independent visitor reports to influence development. This means that improvement is reactive, and leaders make patchy progress against the residential development plan. This is evident in the poor progress being made to address shortfalls in the quality of staff recording.

Leaders and managers work well with other professionals to ensure the best outcomes for children. They seek updated EHC plans for children. They use the annual review system to identify progress pathways for children. They have focused on transition planning. This means that children have clear plans in place for when they leave the school.

## **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 standards for residential special schools:

- 19.2 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.
- 19.6 All staff have access to support and advice for their role. They also have regular supervision and formal annual appraisal of their performance.
- 13.4 The school's leadership and management consistently fulfil their responsibilities effectively so that the standards are met.
- 13.8 The records specified in Appendix 2 are maintained and monitored by the school and action taken as appropriate.

### **Recommendations**

- 13.1 The school's governing body and/or proprietor monitors the effectiveness of the leadership, management and delivery of the boarding and welfare provision in the school and takes appropriate action where necessary. In particular, that governors oversee the residential development plan to ensure that progress is being made towards improvement.
- 19.1 Staff are equipped with the skills required to meet the needs of the children as they relate to the purpose of the setting. Training keeps them up to date with professional, legal and practice developments and reflects the policies, legal obligations and business needs of the school. In particular, that care staff have the opportunity to meet together to reflect on the quality and impact of their work.

### **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:** SC035805

**Headteacher:** Mr Marc Peart

**Type of school:** Residential special school

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## **Inspectors**

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