INSPECTION REPORT

Education in Hospital 1 and 2

Bradford/West Yorkshire

LEA area: Bradford

Unique reference numbers: 133753, 133752

Head of Service: Mr Glynne Freeth

Service Co-ordinator: Mrs Marian Thomas

Lead inspector: Peter Johnson

Dates of inspection: 23rd November 2004 to 25th November 2004

Inspection numbers: 269099, 272034

Inspection carried out under section 10 of the School Inspections Act 1996

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INFORMATION ABOUT THE SCHOOL

Type of school:	Pupils admitted to hospital for surgical and medical treatment
School category:	Pupil Referral Unit
Age range of pupils:	3 - 16
Gender of pupils:	Mixed
Number on roll:	Airedale Hospital: 14
	Bradford Royal Infirmary: 27
School address:	c/o Lister Lane School
	Lister Lane
	Bradford
	West Yorkshire
Postcode:	BD2 4LL
Telephone number:	01274 777106
Fax number:	01535 655129
Appropriate authority:	The local education Authority
Name of the responsible officer:	Mr Glynne Freeth
Date of previous inspection:	Not applicable

CHARACTERISTICS OF THE SERVICE

Education in Hospital 1 (Airedale General Hospital) and 2 (Bradford Royal Infirmary) are pupil referral units for boys and girls, aged between 3 and 16, who are out of school because of illness or long-term medical needs. They are taught either in classrooms in each hospital or at their bedside in their hospital ward. At the time of the inspection there were 14 pupils on roll in Airedale and 27 in Bradford. All pupils are registered with a mainstream school. The duration of each pupil's stay with the service varies from one day up to several months and others are admitted on a recurring basis due to their particular medical condition. Pupils are admitted throughout the school year. At the time of the inspection pupils were from a range of ethnic backgrounds. The pupils come from a wide range of socio-economic backgrounds throughout Bradford and from the local authorities served by the Airedale Hospital.

The service was registered as pupil referral units in September 2002. Education in both hospitals is provided in consultation with each pupil's school. The service concentrates on the teaching of English, mathematics, science and information and communication technology, but is able to accommodate the teaching of other subjects when required to do so in circumstances such as the need to complete course work for the General Certificate of Secondary Education. Only English, mathematics and science were taught during the inspection. There were no foundation stage pupils present at the time of the inspection.

INFORMATION ABOUT THE INSPECTION TEAM

Members of the inspection team			Subject responsibilities
2925	Peter Johnson	Lead inspector	Mathematics, citizenship, physical education, religious education
19693	Sally Hall	Lay inspector	
20024	Paul Wright	Team inspector	English, information and communication technology, geography, music
21822	Helen Maskew	Team inspector	Science, art, design technology, history

The inspection contractor was:

Altecq Inspections Ltd

102 Bath Road

Cheltenham

GL53 7JX

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REPORT CONTENTS

Page

PART A: SUMMARIES OF THE REPORT **6**

PART B: COMMENTARY ON THE MAIN INSPECTION FINDINGS

STANDARDS ACHIEVED BY PUPILS **10**

Standards achieved in areas of learning, subjects and courses

Pupils' attitudes, values and other personal qualities

QUALITY OF EDUCATION PROVIDED BY THE SCHOOL **12**

Teaching and learning

The curriculum

Care, guidance and support

Partnership with parents, other schools and the community

LEADERSHIP AND MANAGEMENT **16**

PART C: THE QUALITY OF EDUCATION IN SUBJECTS **18**

SUBJECTS IN KEY STAGES 1 to 4

PART D: SUMMARY OF THE MAIN INSPECTION JUDGEMENTS **23**

PART A: SUMMARY OF THE REPORT: Hospital 1 – Airedale General Hospital

OVERALL EVALUATION

This is a **highly effective** service; managers and teachers do everything within their power to help children and young people to overcome the educational disadvantages caused by their serious, chronic or acute illnesses. The children and young people, who receive education in hospital, benefit from very good teaching and excellent care. Consequently they achieve very well and their personal development is very good. Excellent leadership makes sure that the service works in a highly co-ordinated way with parents and medical staff to provide the very best for its pupils. The service provides very good value for money.

The service's main strengths and weaknesses are:

- Despite their illnesses and the affects of their treatments, pupils of all ages and abilities achieve very well.
- The very good teaching provided for pupils ensures that they maintain the desire to learn and the motivation to succeed.
- The service is particularly good at nurturing pupils' emotional health and well being especially through the strong relationships they develop with their teachers and the very good provision for pupils' personal, social and health education.
- The service has established very strong partnerships with parents, medical staff, external agencies and most schools, which work effectively to overcome the difficulties imposed by pupils' illnesses.
- Inspirational leadership has created an exceptionally effective staff team that works tirelessly to reduce the impact of pupils' illnesses on their educational achievement and personal development.
- The newly formed management committee supports the service well, but it does not yet provide sufficient challenge to the performance of the service.
- The sharing of information between educational and medical staff is good but relies too heavily on the good relationships that exist between them because there is no written guidance.

This is the first inspection of a new service.

STANDARDS ACHIEVED

Achievement of pupils aged:	in relation to individual targets in:	
	Subjects of the curriculum	personal and social education
4 -11	**Very good**	**Very good**
11 - 16	**Very good**	**Very good**

Inspectors make judgements in the range: excellent; very good; good; satisfactory; unsatisfactory; poor; very poor.

The achievement of pupils of all ages, abilities and backgrounds is **very good** and contributes well to their preparation for return to school. Pupils achieve very well in English and mathematics and well in science. Records indicate that individual pupils achieve well in a range of subjects, such as history and geography, when these are included in their individual programmes. Pupils' personal development is **very good**. Pupils' confidence and self-esteem improve despite the set-back that each has experienced as a result of their illness. The service makes a strong contribution to pupils' emotional health and well-being and, as a result, their attitudes to school and their spiritual, moral, social and cultural development are very good.

QUALITY OF EDUCATION

The quality of education provided by the service is **very good**. Teaching and learning are **very good**. Enthusiastic teaching helps to restore normality to pupils' lives at a difficult time for them and

it helps them to return successfully to school. Pupils respond well to their teachers' high expectations for their personal and academic achievement. The assessment of pupils' work is good; the information gained is used well to keep pupils and their school informed about the progress they are making. The curriculum and opportunities to enrich it are good because the service provides a realistic range of opportunities in relation to pupils' medical conditions. The accommodation is unsatisfactory because the classroom is also used as a dining room and this restricts the amount of time available for teaching. The resources available for teaching and learning are satisfactory. The care, guidance and support for pupils are excellent. Links with parents and medical staff are very good and those with the community are good. Links with schools are satisfactory, but too many schools do not respond to the service's requests to provide work for pupils when they are admitted to hospital.

LEADERSHIP AND MANAGEMENT

The leadership provided jointly by the head of service and the service co-ordinator is **excellent**. Together, they ensure that the service focuses on the things that will make a difference to the lives of young people who are experiencing difficulties as a result of their illnesses. Throughout the service, there is a strong, shared commitment to ensuring that pupils achieve well. Staff provide very good role models and are deeply committed to responding to the individual needs of pupils. Management of the service is **very good**; it runs smoothly and plans effectively to secure improvement. The newly formed management committee provides good support to the service, but its membership does not allow it to take an objective view of the strengths and weaknesses of the service in order to provide effective challenge to senior managers.

PARENTS' AND PUPILS' VIEWS OF THE SCHOOL

Parents and pupils are highly appreciative of the work of the service. Parents value the support and guidance they receive, in particular the way teachers help their children to cope more effectively with the impact of their illnesses on their education. Pupils appreciate the service's focus on helping them to continue their studies and return successfully to their school; they value the trusting relationship they have with staff.

IMPROVEMENTS NEEDED

The appropriate authority should ensure that:

- The management committee is better equipped to challenge the senior managers of the service in order to improve further the quality of education provided.

The management committee should ensure that:

- The service has agreed, written protocols and procedures that will promote the effective flow of information between teachers and medical staff, the integration of plans for pupils' education with those for their health and nursing care; especially for long stay and recurrent admissions.
- Pupils' opportunity to have the very best education while they are in hospital is improved by ensuring that all schools respond positively to the requests from the service for work or information when a pupil or student is admitted to hospital.
- The accommodation for teaching is improved.

PART A: SUMMARY OF THE REPORT: Hospital 2 – Bradford Royal Infirmary

OVERALL EVALUATION

This is a **highly effective** service; managers and teachers do everything within their power to help children and young people to overcome the educational disadvantages caused by their serious, chronic or acute illnesses. The children and young people, who receive education in hospital, benefit from very good teaching and excellent care. Consequently they achieve very well and their personal development is very good. Excellent leadership makes sure that the service works in a highly co-ordinated way with parents and medical staff to provide the very best for its pupils. The service provides very good value for money.

The service's main strengths and weaknesses are:

- Despite their illnesses and the affects of their treatments, pupils of all ages and abilities achieve very well.
- The very good teaching provided for pupils ensures that they maintain the desire to learn and the motivation to succeed.
- The service is particularly good at nurturing pupils' emotional health and well being especially through the strong relationships they develop with their teachers and the very good provision for pupils' personal, social and health education.
- The service has established very strong partnerships with parents, medical staff, external agencies and most schools, which work effectively to overcome the difficulties imposed by pupils' illnesses.
- Inspirational leadership has created an exceptionally effective staff team that works tirelessly to reduce the impact of pupils' illnesses on their educational achievement and personal development.
- The newly formed management committee supports the service well, but it does not yet provide sufficient challenge to the performance of the service.
- The sharing of information between educational and medical staff is good but relies too heavily on the good relationships that exist between them because there is no written guidance.
- There are not enough teachers to ensure that all pupils are included in the educational opportunities provided.

This is the first inspection of a new service.

STANDARDS ACHIEVED

Achievement of pupils aged:	in relation to individual targets in:	
	Subjects of the curriculum	personal and social education
4 -11	**Very good**	**Very good**
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QUALITY OF EDUCATION

The quality of education provided by the service is **very good**. Teaching and learning are **very good.** Enthusiastic teaching helps to restore normality to pupils' lives at a difficult time for them and it helps them to return successfully to school. Pupils respond well to their teachers' high expectations for their personal and academic achievement. The assessment of pupils' work is good; the information gained is used well to keep pupils and their school informed about the progress they are making. The curriculum and opportunities to enrich it are good because the service provides a realistic range of opportunities in relation to pupils' medical conditions. The accommodation is unsatisfactory because the space for teaching in the hospital is too small. The resources available for teaching and learning are satisfactory. The care, guidance and support for pupils are excellent. Links with parents and medical staff are very good and those with the community are good. Links with schools are satisfactory, but too many schools do not respond to the service's requests to provide work for pupils when they are admitted to hospital.

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PARENTS' AND PUPILS' VIEWS OF THE SCHOOL

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IMPROVEMENTS NEEDED

The appropriate authority should ensure that:

- The management committee is better equipped to challenge the senior managers of the service in order to improve further the quality of education provided.

The management committee should ensure that:

- The service has agreed written protocols and procedures that will promote the effective flow of information between teachers and medical staff, the integration of plans for pupils' education with those for their health and nursing care, especially for long stay and recurrent admissions.
- Pupils' opportunity to have the very best education while they are in hospital is improved by ensuring that all schools respond positively to the requests from the service for work or information when a pupil or student is admitted to hospital.
- The accommodation for teaching is improved and there is sufficient staff to ensure that all children and young people, who are admitted to hospital, have equal opportunity to be included in the education provided by the service.

PART B: COMMENTARY ON THE INSPECTION FINDINGS

STANDARDS ACHIEVED BY PUPILS

Pupils' achievement is **very good**.

Main strengths and weaknesses

- Pupils of all abilities and backgrounds achieve very well.
- Pupils' achievement contributes well to their preparation for return to school.
- Achievement is very good in English and mathematics and is good in science.

Commentary

1. Pupils of all ages, abilities and backgrounds achieve very well because the teaching they receive is carefully matched to their individual needs, abilities and interests. In both hospitals, pupils are helped to keep up with the work they would have been doing in their school and to return to their school successfully and as quickly as possible. Younger pupils achieve particularly well in literacy and numeracy. Older pupils achieve very well in English and mathematics and well in science. Records show that many former pupils achieve well in a range of subjects that have been included in their individual programmes and that they go on to succeed in external examinations because the very good teaching they have received during their time out of school ensures that they do not fall behind with their studies. Although pupils' illnesses and the affects of their treatment can interfere with their learning, many pupils continue to attain standards in line with those of pupils of the same age.

2. In English, pupils of all ages improve their speaking and listening skills because of the intensive nature of the one to one teaching they receive and because their teachers' skilful use of questioning quite often prompts lengthy discussions. Achievement in reading is very good. Younger pupils are helped to develop their reading skills, including the use of phonics. Older pupils are encouraged to extend their reading of fiction and non-fiction books, including the use of reference books to help support their work in other subjects. Secondary pupils complete work planned in consultation with their schools and achieve very well. The service ensures that pupils keep up with course work for GCSE examinations and keep apace with the work they would have been doing in school, such as increasing their understanding of the plot and characterisation of a Shakespearean play.

3. In mathematics, pupils respond very well to the effective teaching. The youngest pupils count confidently and accurately, and older primary pupils have a good understanding of basic skills and accurately complete calculations involving addition, subtraction, division and multiplication of numbers. Secondary pupils have a very good understanding of two-dimensional shapes and the collection, analysis and interpretation of data for presentation using a range of graphs and charts. Pupils' achievement ensures that they will continue to cope confidently with mathematics when they return to their school.

4. Achievement in science is good. Although the study of science is limited by the lack of specialist facilities, pupils are provided with a range of activities that increases their knowledge and understanding of science. Younger pupils are helped to increase their knowledge of plants and animals and the work of older primary aged pupils shows understanding of the classification of birds that visit a feeding table outside the classroom. Secondary aged pupils are helped to understand their medical conditions through the study of human biology and the impact of micro-organisms on their health.

5. Both primary and secondary aged pupils use computers competently and confidently to support their work in other subjects. Frequently, pupils are set 'homework' to complete in their wards using a laptop without supervision by the teacher. All cope well with the challenge this presents and they produce word-processed work of a good standard.

6. Records show that pupils with statements of special educational need make good progress towards the targets set for them at annual reviews. The service compiles individual programmes for all long-term and recurrent hospital admissions. These plans contain challenging targets for pupils' academic and personal development against which pupils make good progress.

Pupils' attitudes, values and other personal qualities

Pupils' personal development, including spiritual, moral, social and cultural, attitudes and behaviour are **very good**.

Main strengths and weaknesses

- Pupils quickly develop very good relationships with staff and gain in confidence and self worth.
- Pupils cope well with the trauma of admission to hospital and work hard to overcome the restrictions it places on their education.
- Pupils retain enthusiasm for learning and interest in their schoolwork.

Commentary

7. Although pupils are often in hospital only for a short period and are not familiar with hospital routines, they respond very well to the teachers' sensitive, yet purposeful, approach. They enjoy being with their teachers and gain in confidence and self esteem. They quickly accept that they will be taught during their time in hospital and readily adapt to difficulties imposed by their illnesses and treatments. They persevere with lessons even during the most difficult of circumstances.

8. Pupils and their families are encouraged to complete a helpful questionnaire, which helps teachers to know what the pupils can do and which subjects they like. Pupils quickly adapt to the one-to-one teaching methods and enjoy working on familiar topics albeit in unfamiliar surroundings. Lessons are planned effectively to be both enjoyable and to provide pupils with a sense of achievement. Pupils respond well to these arrangements. They listen attentively, are keen to work and generally try their best even though they may become tired or have to finish early because of the their medical needs.

9. Pupils co-operate very well with their teachers and medical staff. However, occasionally, pupils have to be coaxed into attending lessons, for example when they are tired after staying up too late on the ward. Teachers then work with families and nurses to encourage better routines. Although it is inappropriate to make judgements about pupils' attendance and punctuality in this setting, the service keeps accurate records of which pupils have been taught each day. If there are problems with attendance at the pupil's home school, the hospital teachers work with families to stress the importance of regular attendance and to overcome any anxieties the pupil may have about returning to school.

10. Pupils are helped to develop a good understanding of their medical conditions and how it will effect their education. Pupils with recurrent illnesses are helped to come to terms with the illness, the treatment they receive for it and they develop an optimism that they will continue to make academic progress. Pupils are encouraged to discuss their own circumstances and, as a result, they develop good self-knowledge. The service makes a very strong contribution to pupils' emotional health and well-being and, consequently, pupils develop a remarkable resilience in the face of their adversity. Pupils with recurrent illnesses support each other very well and help one another to deal with the discomfort of their treatments.

QUALITY OF EDUCATION PROVIDED BY THE SERVICE

The quality of education provided by the service is **very good**. Teaching and learning are **very good** and the curriculum is **good**. The care provided for pupils is **excellent**. The partnerships with parents and medical staff are **very good**, while those with schools are **satisfactory**.

Teaching and learning

Teaching and learning are **very good**. Assessment is **good**.

Main strengths and weaknesses

- Very good teaching provides pupils with a sense of normality during their time in hospital.
- Pupils are helped to overcome their difficulties and learn as effectively as they can.
- The national strategies for numeracy and literacy are used very effectively.
- Pupils enjoy their lessons and concentrate well on the tasks they are set despite the discomforts of their condition and its treatment.

Commentary

11. Teaching in both hospitals makes a significant contribution to pupils' emotional health and well-being. Although teaching, which takes place at pupils' bedsides, or in the small classrooms in both hospitals, is subject to frequent interruption and distraction, it is, nevertheless, very good. The necessary interruptions from medical staff, hospital visitors and hospital equipment all contribute to an environment that is not conducive to effective teaching and learning. Despite these factors, pupils are rapidly engaged by enthusiastic teaching and become captivated by the activities that are provided for them. For the period of each lesson, pupils regain a sense of normality and the familiarity of learning helps them to cope with the trauma of their illness and the discomfort of their treatment.

12. In both hospitals, teachers plan and prepare for each lesson very well. They overcome the difficulties of teaching pupils of different ages from one lesson to the next by making very good use of material from the pupil's school and national schemes of work. This planning ensures that pupils of any age can be taught from the first day of admission using resources and activities that are appropriate to their age and ability.

13. Primary pupils are taught literacy skills, particularly the development of early reading skills, very well. The teaching of phonics is extremely knowledgeable; the methods used ensure that pupils maintain interest and sustain concentration even under the most difficult of circumstances. For example, in one lesson, a Year 1 pupil, who was receiving a blood transfusion during the lesson, forgot the discomfort caused and became engrossed in finding the answers to the questions set by the teacher. As a result, her ability to match letters to their sounds and predict text from pictures improved considerably. Information and communication technology is used effectively; when pupils' medical illnesses allow, they are given work to complete independently on a laptop computer. Teachers successfully involve the parents of younger pupils by leaving reading books for them to share with their child. When appropriate, parents are given very good guidance on how to read with their child to best effect and how to use a laptop to produce written work.

14. Teachers plan and prepare lessons for secondary aged pupils very well so that they can teach a broad range of subjects, often to GCSE standard. The time available to teach each pupil is used very well; lessons start with a brief, but effective assessment of what pupils already know and then proceed briskly into a series of activities that captivate and sustain pupils' interest very effectively. Although teachers are sensitive to pupils' medical circumstances, they constantly challenge them to improve the standard of their work. Teachers' expectation for their pupils' academic and personal achievement and their behaviour is very high.

15. In both hospitals, teachers very quickly gain the trust and confidence of their pupils. The use of humour is a characteristic of all teaching, which helps to dispel the anxiety and fears caused by pupils' illnesses. Consequently, pupils look forward to their lessons and in the main work diligently and productively. As a result they learn very well and maintain standards that will help them to return to school successfully. Pupils are successfully encouraged to work independently by the setting of 'homework' which builds on what they have learned in lessons with their teacher. Pupils collaborate well with their teachers by completing this 'homework' when their treatment allows. Pupils respond well to the very good teaching; they sustain concentration and persevere with their work despite the difficulties imposed by their medical conditions. Most often, pupils show great pleasure in their work and are anxious to achieve more.

Summary of teaching observed during the inspection in 15 lessons

Excellent	Very good	Good	Satisfactory	Unsatisfactory	Poor	Very Poor
2	9	4	0	0	0	0

The table gives the number of lessons observed in each of the seven categories used to make judgements about lesson.

16. Overall, the procedures to check pupils' achievement are good. Pupils' progress is tracked well and the information gained is used effectively to inform what pupils will do in their next lesson and that they make good progress in their learning. Pupils' work is marked regularly and usually alongside the pupils themselves. In mathematics and science, pupils are given a clear indication of how they can improve the standard of their work. In other subjects the results of assessment are sufficient to indicate to pupils broadly what they have achieved.

The curriculum

The curriculum and activities to enrich it are **good**. Staffing at Bradford Royal Infirmary, and the accommodation at both hospitals are **unsatisfactory**. Resources for teaching and learning are **satisfactory**.

Main strengths and weaknesses

- The curriculum offered is very suitable for helping pupils return to their schools.
- The service's focus on English, mathematics and science is a very appropriate.
- Provision for pupils with special educational needs is very good.
- There are insufficient staff to meet the educational needs of pupils at Bradford Royal Infirmary.

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Commentary

17. The service provides a curriculum that is suited well to pupils' interests and particular needs. The aim of the service, which is to ensure that pupils continue their education while in hospital is achieved successfully. It complies with the LEA's policy on the curriculum for pupils educated in pupil referral units. The service liaises very well with pupils' home schools to make sure that particularly important parts of the curriculum are not missed while they are in hospital. Appropriate emphasis is therefore placed on the important areas of English, mathematics and science and these are identified on individual teaching programmes. Teaching staff successfully incorporate aspects of the national literacy and numeracy strategies into their teaching. This ensures that pupils of all ages are ensured a smooth reintegration back to their school.

18. A good range of activities to enrich the curriculum is provided in both hospitals and these enable pupils to extend their own interests successfully. There is effective input from other members of the hospitals' multi-disciplinary team. For example, physiotherapists provide programmes that can be included in the teaching programmes, and play workers offer extra art and practical activities. Visiting artists and theatre groups provide additional expertise.

19. The provision for personal, social and health education is very good and supports pupils' personal development very well. It is appropriate to pupils' ages and very effectively reinforces important issues such as looking after personal health and keeping safe and helping others. Support for pupils with additional special educational needs is very good and ensures that pupils with special educational needs have access to the range of support stipulated in their individual education plans.

20. The accommodation for teaching is unsatisfactory in both hospitals. The classroom at Bradford Royal Infirmary is too small and, at Airedale General Hospital, the classroom also serves as a dining room and has to close down at lunchtimes, which restricts the time that can be allocated for teaching. The level and quality of teaching resources are satisfactory and support the curriculum provided well in both hospitals. These are enhanced by staff seeking extra resources to meet the needs of individual pupils as they arise. Teachers have good access to ICT equipment in both hospitals. Teachers are well qualified and are experienced in teaching pupils with medical difficulties. Volunteers provide very good support and they work very closely with the teachers to enhance the education provided for pupils. However, there are insufficient teachers at Bradford Royal Infirmary to cope with the number of pupils who would benefit from the education provided by the service. Attendance records show that a significant number of pupils who are well enough to receive teaching in Bradford Royal infirmary do not do so because the one teacher cannot get round to all pupils in the time available.

Care, guidance and support

Procedures for the care, welfare and health and safety of pupils are **excellent.** The service provides its pupils with **very good** support, advice and guidance and it seeks, values and acts on pupils' views **very well**.

Main strengths and weaknesses

- The service has excellent procedures to ensure that pupils work in a healthy, safe and secure environment.
- Very good partnerships have been established with all the professional agencies.
- Plans for pupils' education are not integrated with those for their medical care.
- Induction arrangements for pupils are very good and support their learning well.
- Pupils receive very good guidance and support for their emotional health and well-being.

Commentary

21. Pupils are cared for exceptionally well and the arrangements for child protection are very good. The service has established very good working relationships with all the external agencies, and a holistic approach to care and welfare. These provide the basis for a very secure environment in which pupils are motivated and encouraged to continue their education whilst in hospital. The service is particularly successful at nurturing its pupils' emotional health and wellbeing. This is due to the prompt response of the staff who are committed to establishing very strong and trusting relationships with pupils following their admission to hospital. This ensures that pupils continue their education and, by working closely with medical and nursing staff, supports pupils in overcoming some of the educational disadvantages imposed by their illness. For example, pupils with chronic conditions are encouraged and supported by the service to think positively about their return to their schools.

22. Induction arrangements for pupils form the basis for planning teaching and learning. Teachers quickly establish a very good understanding of each pupil's needs because they take time to talk with them and their families soon after they are admitted to hospital. They respect and value pupils' opinions and feelings and work closely with medical staff to assess the best ways of supporting pupils, both academically and emotionally. Pupils are involved fully in the formulation of their education programme. They complete a questionnaire which provides teachers with information about their current achievements in school, as well as opportunities for gauging their attitude to learning. This information is used very effectively to plan lessons which are appropriate for pupils' needs. When available, information and work from a pupils' school is used to good effect to ensure that their studies are only minimally interrupted. However, too many schools do not meet the requirement to provide information and work.

23. The monitoring of pupils' academic progress is satisfactory. Although most pupils stay in hospital for only a short time, their work during this time is assessed and reports are provided for their parents and school. The progress of pupils, who are recurrent admissions or who stay for longer periods, is monitored in conjunction with their school. A system to track pupils' academic progress more effectively, using an LEA database, is presently being trialled at Airedale Hospital and this will enable the service to measure more accurately the impact of its work on pupils' progress. The monitoring of pupils' personal development is very good and the service works closely with the medical and nursing staff to exchange information through regular formal and informal meetings. However, plans for the education of pupils, who are long stay or recurrent admissions, are not integrated with those for their health and nursing care, which places limitations on the effectiveness of planning for their education.

Partnership with parents, other schools and the community

Links with parents are **very good**. Links with the community are **good** and links with pupils' home schools are **satisfactory**.

Main Strengths and Weaknesses

- Staff quickly establish a rapport with families so that they can work together in the best interest of the pupil.
- Parents are very satisfied with the service.
- The volunteer helpers provide additional and beneficial support to pupils.
- Partnership between teachers and medical staff is very good.
- The service works hard to develop good communication with the pupils' schools, but the response is often limited.

Commentary

24. Staff work closely with families as soon as pupils have settled into the ward. Teachers respect and take notice of parents' views and, as a result, parents effectively support teachers to help their children continue their studies. The service provides a helpful booklet which enables pupils and parents to record what pupils like doing and this acts as a focus for planning lessons. Where possible, parents are encouraged to work with their children at the bedside with tasks such as reading and working on the laptop computers. This promotes a sense of normality in unfamiliar surroundings. Teachers make beneficial home visits to pupils with long-term medical conditions and work closely with the medical and home tuition services to ensure that pupils keep up with their school work. The teamwork between teachers and medical staff is particularly effective; the very good relationships that exist between them contribute strongly to the progress made by pupils.

25. The service seeks parents' views both informally and through written responses. Parents are usually unaware of the service until their children are admitted to the wards, but soon hold the service in high regard. Comments such as *"lessons help him keep up with the work he would be doing in school", "the teacher gets the best from him"* and *"we feel able to talk over school*

problems" show that parents value the way the teachers work with sensitivity, yet with purpose, to promote learning. Parents say that those children who come into hospital on a regular basis look forward to lessons, and this helps them to cope with their medical treatment. Parents appreciate the written record they receive of their children's academic achievements whilst in hospital.

26. The service has recruited and trained a group of volunteers from the local community and they provide valuable support both with teaching and resources. Some are ex-teachers and support staff and the service successfully makes use of their skills, and this is particularly valuable when a large number of pupils are on the wards. Visits by musicians and theatre groups also help to support learning and enrich the curriculum.

27. The service does not have agreed procedures that set out the role of both the service and schools in meeting the needs of pupils admitted to hospital. The service is keen to forge more effective partnerships with pupils' schools and communication is often good. Where these links are effective, teachers at pupils' schools provide suitable work and value the continuing support offered by the service when the pupils return to school. However, too many schools do not understand that they are required to provide work for their pupils whilst they are in hospital so that they can continue their studies with as little interruption as possible.

LEADERSHIP AND MANAGEMENT

Leadership of the service is **excellent**, management is **very good** and governance is **good**.

Main strengths and weaknesses

- Leadership by the head of service and service co-ordinator has established a service that concentrates energetically on the achievement of pupils.
- The teamwork between staff is highly effective.
- The management committee supports the service well, but does not challenge its performance with sufficient rigour.

Commentary

28. Leadership of the service is highly effective. The head of service, who is also the headteacher of a special school, rightly delegates much of the leadership of the service to the service co-ordinator. She fulfils this role exceptionally well. Her leadership is excellent. The head of service and service co-ordinator have, together, established a clear vision for the improvement of the service based on a thorough understanding of its current strengths and weaknesses. They have worked hard since the service's registration as a pupil referral unit and through the creation of extremely effective team work have established a service with a clear sense of purpose. The service, as a whole, has high aspirations for its own development and for the achievement of its pupils. There is a very strong commitment to improvement. Planning is very effective and focuses on the key areas of improving teaching, learning and pupils' achievement. Senior managers of the service are not complacent; whilst the service already provides a quality of education that is very good, they are seeking further improvement through innovative projects such as bench-marking the performance of the service with similar services in other parts of the country.

29. Senior managers are supported very well by teachers and administrative staff; there is a strong, shared commitment to the high achievement of pupils and ensuring that teaching is effective. Staff are very good role models to others and are deeply committed to responding to the individual needs of pupils. The commitment to inclusion is excellent and procedures to ensure that pupils return to mainstream education as quickly as possible are very good. Pupils' right to education during their time in hospital and their successful return to their home school is under-pinned by the very good teaching they receive and by the effective liaison between the service and most local schools. The service is also seeking to ensure that pupils aged 13 or over, who

elect to be treated in an adult ward, are identified quickly so that they can receive education. This strong commitment to inclusion and equality of opportunity is undermined, however, by the failure of too many schools to provide work for their pupils when they are admitted to hospital, and the lack of sufficient teaching staff in Bradford Royal Infirmary.

30. Governance of the service is good. The management committee meets regularly, pays attention to the things that will improve the service and takes action to secure improvement. Although the committee is relatively new, it has already ensured that the service meets its statutory obligations and it has sufficient understanding of the strengths and weaknesses of the service to provide effective support. However, the committee relies too heavily on its own education representatives and does not have members who can provide an external perspective and this limits the extent to which the committee can challenge the performance of the service. This is recognised by members of the committee and they intend to recruit additional members who will represent schools and parents.

31. Management of the service is very good. A wide range of information is gathered to evaluate the impact of the service on the care provided for pupils and the progress they make whilst in hospital. Information gained from parents, schools and medical staff is used effectively to inform the priorities for improvement, but the service does not yet analyse, with sufficient rigour, the information gained from pupils themselves. Teaching is monitored regularly and performance management arrangements are very good.

32. There is a strong commitment to improving teachers' expertise. All staff have access to relevant training, including the opportunity to twin with mainstream and special schools to ensure that they keep up-to-date with new developments and to overcome the isolation of working in the hospital environment. There are good links between the hospital teachers and teachers in mainstream and special schools through the local Special Educational Needs Forum. Both hospitals provide opportunities for student teachers to undertake teaching placements, which are considered to be beneficial by the service, the students and the higher education establishments. The arrangements for the induction of staff are good, but there is no written guidance about the sharing of information that would improve the education and care of pupils. The recruitment and retention of staff are carefully managed and good staff deployment ensures that workloads are equitable and manageable.

33. Financial management of the service is good. The service's finances are used effectively to achieve its priorities and plans for improvement. Guidance from the LEA ensures that the service takes satisfactory notice of the principles of best value in all its spending decisions.

PART C: THE QUALITY OF EDUCATION IN AREAS OF LEARNING, SUBJECTS AND COURSES

Throughout this section of the report, overall judgements about **provision** relate to pupils' achievements, the effectiveness of teaching and learning, curriculum leadership and management and any other significant aspects.

SUBJECTS AND COURSES IN KEY STAGES 1 to 4

ENGLISH AND MODERN FOREIGN LANGUAGES

A modern foreign language is not provided routinely by the service unless teaching is requested for a secondary aged pupil who is studying a language at GCSE level. No teaching of a modern foreign language took place during the inspection.

ENGLISH

Five lessons were observed, pupils' books and displays of work were scrutinised and planning and other documents were examined.

Provision in English is **very good**.

Main strengths and weaknesses

- Pupils achieve very well in speaking, listening and reading.
- The subject makes a very effective contribution to supporting the return of pupils to their schools.
- Pupils have good access to ICT equipment to help them research and present their work.
- Pupils' attitudes towards the subject are very good.
- Although there are good examples of marking in both hospitals, it does not consistently help pupils to improve their work.

Commentary

34. The mainly one to one teaching that takes place in both hospitals ensures that pupils make very good gains in their self-expression and in their listening skills. For example, in a very good mathematics lesson a year 6 pupil, through relevant comments, showed how he had listened very carefully to the teachers' descriptions of the properties of two dimensional shapes. The National Literacy Strategy is adapted very well and teachers' expectations are the same as those experienced by pupils in their schools. Teachers have a very good knowledge of the subject and are able to help pupils with every aspect of their studies. For example, teachers ensured that, in 2004, a Year 11 pupil was able to complete his coursework and gain an A* in his English Literature GCSE examination.

35. Pupils make very good progress in developing their reading skills. Teachers provide a good range of books that are of good quality and engage pupils' interest well. Good library skills are encouraged such as using the index to find information. There is a wide choice of subject matter for different levels of reading ability that successfully encourage pupils to enjoy what they read and improve their skills. Those pupils who do not feel well enough to read themselves enjoy listening to stories read by the teachers, parents or volunteer helpers. Pupils' achievement in writing is good, limited only by the impact of their illnesses on their ability to put pen to paper. To help overcome this limitation, they receive a high level of individual support from teachers and have access to computers to redraft work.

36. Teaching and learning are very good overall. Teachers are very sensitive to pupils' medical conditions, but have high expectations of their contributions to lessons. They give pupils good clear explanations of the tasks they are required to do, repeating them if necessary. Lesson

objectives are discussed, giving a good focus to each lesson, and encouraging pupils to sustain concentration. Pupils respond well to this approach, and concentrate well. Teachers maintain a good pace to lessons and display sensitive, calm management skills, which contribute to building pupils self esteem. Teachers spend time developing trusting relationships with pupils so that they can plan lessons effectively and report accurately to their schools on the progress pupils make.

37. Teachers use a wide range of good resources in lessons. Worksheets are adapted to enable all pupils to read them. Computers are used effectively in both hospitals to support pupils' learning and to improve the presentation of their work. Leadership and management of the subject is good and planning identifies opportunities to promote literacy skills in other subjects. Pupils' progress during their time in hospital is assessed well and relevant information is efficiently passed on to pupils' schools. Plans are in place for teachers to collaborate with other schools to ensure that assessments of pupils work are accurate. However, marking of pupils' work does not always indicate how they can improve.

Language and literacy across the curriculum

38. Teachers provide good opportunities for pupils to develop their literacy skills across the curriculum. They use a wide range of reference books in individual lessons and encourage pupils to find information from different sources, including the internet. Pupils expand their vocabulary well and improve their descriptive writing in lessons such as mathematics and science.

MATHEMATICS

Six mathematics lessons were observed, the work of pupils, records of their progress and teachers' planning were analysed and discussions were held with teachers.

Provision in mathematics is **very good**.

Main strengths and weaknesses

- Primary pupils' numeracy skills are developed well.
- Pupils' interest in mathematics is maintained and their achievement in the subject helps them to return to mainstream schools successfully.
- Teaching is enthusiastic and knowledgeable.
- The curriculum for each pupil is matched well to their individual needs and abilities.

Commentary

39. Pupils respond well to the very effective teaching of mathematics and their achievement is very good. Liaison with pupils' school ensures that the work planned for them is matched well to their prior achievement and to the work they would be completing if they were not in hospital. Consequently, pupils are confident that they will not fall behind during their illness and the carefully structured lessons help pupils to make very good progress. The work completed by the youngest primary age pupils shows very good achievement in their use of numeracy skills. They complete a substantial amount of work in the short time they are with the service. Their work indicates a good understanding of topics such as addition and subtraction of numbers to 20, the use of tally charts to sort and classify data and the interpretation and presentation of this data using simple block graphs. Older primary pupils know multiplication tables and place value. They can interpret and present data using a variety of graphs and charts and identify and name the characteristics of two dimensional shapes.

40. Secondary aged pupils make good progress against the objectives set in lessons and improve their understanding of the calculation of areas, the skills of measuring angles accurately and the difference between acute and obtuse angles. Pupils can reproduce shapes by careful and

accurate measurement. Due to the very effective teaching they receive, pupils' increased numeracy skills equip them well to cope confidently with mathematics when they return to mainstream schools. Records indicate that older, secondary aged pupils have achieved success in external examinations despite their recurrent admission to hospital.

41. Teachers have a very good understanding of the subject. Their high expectations are reflected in the quality of pupils' work. The work set for pupils is challenging and they respond well to this by persevering until they solve the problems they have been given. The planning of lessons is exemplary and the careful attention paid to using the information gained from assessing pupils' work ensures that the content of lessons is suited to pupils' individual levels. The use of resources and teachers' explanations are such that pupils quickly grasp the concepts being taught. There is an enthusiasm in the teaching which helps pupils to overcome the distractions of being taught in a hospital ward and, at times, the teaching is successful in distracting pupils from the discomfort of their treatment. Pupils enjoy their mathematics lessons, they concentrate extremely well despite the difficulties imposed by their illnesses and they persevere to overcome these difficulties.

42. The curriculum for both younger and older pupils is set by the service in consultation with their school. The programme for each primary age pupil concentrates on the improvement of numeracy skills and that for secondary aged pupils is determined by each school's scheme of work. This effective collaboration ensures that pupils are prepared well for their return to mainstream education.

43. The assessment of what pupils know is good. Pupils' work is marked with them so that they have a clear understanding of how to improve. Teachers assess pupils' knowledge and understanding well at the beginning of each lesson to ensure that the work they are given to do is matched well to their abilities.

44. The subject is led and managed well in both hospitals. Teachers collaborate to ensure that they maintain up-to-date knowledge about the curriculum and teaching. This approach works effectively because teamwork and communication is very good. Resources to support teaching are satisfactory.

Mathematics across the curriculum

45. The use of mathematics across the curriculum is good. Teachers take every opportunity to make best use of the small amount of time they have with each pupil and, when teaching other subjects, they provide good opportunities for pupils to use their mathematical skills. For example, in an English lesson for a primary aged pupil, simple counting games were used very effectively during the reading of 'Goldilocks and the three bears.'

SCIENCE

Six science lessons were observed, the work of pupils, records of their progress and teachers' planning were analysed and discussions were held with teachers.

Provision in science is **good.**

Main strengths and weaknesses

- Pupils' achievement is good.
- Teachers are very resourceful in providing stimulating materials for practical lessons.
- The unsatisfactory accommodation at Bradford Royal Infirmary restricts the teaching of science.

Commentary

46. Pupils of all ages make good progress because staff are very skilful in enabling pupils to relax and enjoy their learning. Lessons are planned individually according to the age, abilities and interest of each pupil, and follow, as closely as possible, relevant aspects of the National Curriculum programmes of study. Teachers work hard to provide stimulating experiences for pupils within the very limited space available to them in both hospitals.

47. Teaching is good overall. Teachers are very creative in utilising simple, but effective, activities which stimulate and engage pupils and provide practical experiences in most lessons, for example, at Airedale General Hospital, the setting up of a web-cam in the classroom to observe the birds visiting the feeding station outside. Pupils monitored and recorded the types of bird and their feeding preferences. This provided a very good focus for discussion and enquiry and involved other aspects of the curriculum, such as numeracy, speaking and listening and ICT. At Bradford Royal Infirmary, the teacher encouraged secondary-age pupils to look at aspects of hygiene, particularly hand washing. In an experiment to discover how thoroughly hands must be washed to eliminate bacteria, they observed the results in an ultra-violet light box. This was particularly relevant in the environment of the hospital and led to discussions about the dangers of cross-infection. Very good links were made in this lesson to personal, social and health education.

48. Good use is made of ICT and pupils are encouraged to investigate topics on the internet. Although teachers are not all subject specialists, good research on a variety of topics, coupled with thorough planning, overcome any deficit in subject knowledge. Consequently, pupils have confidence in their teachers and respond positively to learning.

49. Leadership of the subject is good and there is clear commitment to providing pupils with as comprehensive experience of the science curriculum as is possible under the circumstances. However, limitations to this commitment are imposed by unsatisfactory accommodation, particularly at Bradford Royal Infirmary where lessons are taught in a very small, multi-purpose room. Practical resources for science are limited by the size of the accommodation, but the service provides basic equipment for simple experiments which enliven lessons and keep pupils interested and focused.

INFORMATION AND COMMUNICATION TECHNOLOGY

No separate ICT lessons were seen so no overall judgement is made. The use of ICT was seen in other subject areas.

50. It is not possible to make a judgement on the provision for information and communication technology (ICT). In other subjects observed during the inspection, pupils used ICT competently and teachers made effective use of ICT to support their teaching. Pupils following examination courses use the internet for research and word processing to present their work. Pupils are keen to use ICT and work well individually and with support. For example, in English, a Year 6 pupil sequenced instructions for using a play station and he responded eagerly to the teacher's suggestion to use presentation software to illustrate the main points. He was able to access the program and add text and colourful backgrounds. In another lesson, a Year 8 pupil used the internet to research aspects of hygiene during a science lesson. He could use search engines appropriately and succeeded in finding very relevant information, from which he made written notes. Discussions with pupils and examples of their work show they are confident in using the internet for research, recording data and presenting text. There are good resources for ICT, including a number of laptops which are used at pupils' bedsides.

HUMANITIES

Geography and history

51. Lessons in these subjects are provided when they are part of the individual programme developed in consultation with the pupil's school. No lessons were observed during the inspection. Pupils' written work is returned to their school after discharge from hospital and

was, therefore not available for analysis. It is, therefore, not possible to make accurate judgements about the quality of provision. Teacher's plans and the availability of national schemes of work ensure that pupils can study appropriate topics.

VISUAL AND PERFORMING ARTS

Art

52. Art is provided as part of the individual programme developed in consultation with the pupil's school. No lessons were observed during the inspection. Pupils' work is returned to their school after discharge from hospital and was, therefore not available for analysis. It is, therefore, not possible to make accurate judgements about the quality of provision. Teacher's plans and the availability of national schemes of work ensure that pupils can cover a good range of topics.

PHYSICAL EDUCATION

53. Although pupils are encouraged to remain as active as possible during their time in hospital and are provided with physiotherapy in accordance with their treatment plan, physical education is not taught as a subject.

PART D: SUMMARY OF THE MAIN INSPECTION JUDGEMENTS

Inspection judgement	*Grade*
The overall effectiveness of the school	**2**
How inclusive the school is	2
How the school's effectiveness has changed since its last inspection	8
Value for money provided by the school	2

Overall standards achieved	**2**
Pupils' achievement	2

Pupils' attitudes, values and other personal qualities	**2**
Attendance	8
Attitudes	2
Behaviour, including the extent of exclusions	2
Pupils' spiritual, moral, social and cultural development	2

The quality of education provided by the school	**2**
The quality of teaching	2
How well pupils learn	2
The quality of assessment	3
How well the curriculum meets pupils needs	3
Enrichment of the curriculum, including out-of-school activities	3
Accommodation and resources	5
Pupils' care, welfare, health and safety	1
Support, advice and guidance for pupils	2
How well the school seeks and acts on pupils' views	2
The effectiveness of the school's links with parents	2
The quality of the school's links with the community	3
The school's links with other schools and colleges	4

The leadership and management of the school	**2**
The governance of the school	3
The leadership of the headteacher	1
The leadership of other key staff	2
The effectiveness of management	2

Inspectors make judgements on a scale: excellent (grade 1); very good (2); good (3); satisfactory (4); unsatisfactory (5); poor (6); very poor (7).