

St John's School

Firle Road, Seaford, East Sussex BN25 2HU

Residential provision inspected under the social care common inspection framework

Information about this residential special school

St John's is a non-maintained special school, working with children who have complex learning disabilities, including behavioural, emotional and social difficulties, autism spectrum disorder, Asperger's syndrome and pathological demand avoidance syndrome.

There are four separate living areas. At the time of inspection, there were 11 residential boarders. One living area is currently unused.

The residential provision was last inspected in January 2017.

Inspection dates: 5 to 7 February 2019

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

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

The effectiveness of leaders and managers **inadequate**

There are serious and/or widespread failures that mean children and young people are not protected or their welfare is not promoted or safeguarded and/or the care and experiences of children and young people are poor.

Date of previous inspection: 11 September 2017

Overall judgement at last inspection: outstanding

Key findings from this inspection

This residential special school is inadequate because:

- There are serious and widespread safeguarding failures
- A number of breaches of national minimum standards were identified

This residential special school's strengths are:

- Children enjoy positive relationships with the adults who care for them.
- Children have representatives on the governing body.
- Senior staff take complaints seriously and fully investigate any concerns.
- The designated safeguarding lead follows a clear allegations management procedure to keep all safe in the event of a concern.
- A daily therapy sensory circuit prepares a young person for learning.
- The staff team is motivated to provide good care.

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:

- The school's leadership and management demonstrate good skills and knowledge appropriate to their role. (National minimum standards 13.3)
- The school contributes appropriately to all statutory reviews for children; enables, as far as possible, children to contribute to and understand any processes of review that apply to them; and actively implements any resulting actions. (National minimum standards 21.4)
- Suitable sleeping accommodation is provided for children. It is well organised and managed with risk assessments undertaken and the findings acted upon to reduce risk for all children. Where children are aged 8 years or over, sleeping accommodation for boys is separate from sleeping accommodation for girls. (National minimum standards 5.1)
- The school ensures that: arrangements are made to safeguard and promote the welfare of children at the school; and such arrangements have regard to any guidance issued by the Secretary of State. (National minimum standards 11.1)
- The school has, and implements effectively, appropriate policies for the care of children who are unwell, and ensures that children's physical and mental health and emotional wellbeing is promoted. These include first aid, care of those with chronic conditions and disabilities, administration of medicines (including controlled drugs) and dealing with medical emergencies. Policies for administration of medication should reflect guidance provided by the Royal Pharmaceutical Society (Handling of Medicines in Social Care). (National minimum standards 3.6)
- 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. (NMS 19.1)
- The school has and consistently implements a written policy on managing behaviour, including promoting good behaviour. This policy includes: measures to combat bullying, including cyberbullying, and to promote positive behaviour; school rules; disciplinary sanctions; when restraint, including reasonable force, is to be used and how this will be recorded and managed; and arrangements for searching children and their possessions. (National minimum standards 12.1)
- Children's physical, emotional and social development needs are promoted. (National minimum standards 3.1)
- The school premises, accommodation and facilities provided therein are maintained to a standard such that, as far as is reasonably practicable, the health,

safety and welfare of children are ensured. (National minimum standards 6.2)

Recommendations

- Obtain the building control certificate for the completed building works.

Inspection judgements

Overall experiences and progress of children and young people: inadequate

Some children lack the opportunity to engage in activities outside the home in the wider community. Other children stay in the accommodation during the holidays with no other children present. There is a risk of social isolation.

Some children are required to have a special diet. It is not evidenced how this is applied in practice, with staff giving differing accounts of what a child may eat.

There is poor communication between care and health staff; for example, health staff were not aware of a complaint about medication. The arrangements for night-time monitoring of children with epilepsy are unclear. Staff give mixed accounts of whether a child can stay in their boarding house when they are unwell.

Senior leaders have not ensured that there are a sufficient number of staff trained in medication. This means that children do not always get their medication on time and, in one case, not at all. Staff from other homes on the site administer medication due to the lack of trained staff in some homes. Some medication records are unclear; for example, they do not record whether all staff who administer an injection are trained to do so. Staff do not follow the medication policy, for example avoiding distractions when preparing medication for administration.

Staff did not consider fully all the information available to them prior to placement. This has resulted in poor placement matching, putting some children at risk. Some children have had to move boarding houses several times in a short period of time.

Some children make good progress, such as gaining swimming certificates from a starting point of not being able to swim. Others are not well supported, for example not having a good balance of diet and exercise. Care staff and education staff communicate about behaviour but there is little communication about educational progress. It is unclear how care staff support education in the home environment. A daily therapy sensory circuit helps prepare one young person for education.

Children clearly enjoy the relationships with the adults who care for them. Care staff listen to them and are responsive to their requests and needs. Children can access an advocate if they want to. They have representatives on the governing body.

Staff support children towards independence, such as helping them develop cooking skills and making their own beds. Some children say that staff do not fully understand their needs and the challenges they face in everyday tasks. Children say that they feel frustrated as a result.

Children can contact their parents and others who are important to them using a variety of methods, including digital technology.

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

Senior leaders do not ensure that staff undertake risk assessments for the sleeping accommodation or demonstrate the decision-making process for which house and bedroom children live in. This has placed children at risk.

Although senior leaders have effective procedures for managing allegations and concerns, in one case, a young person's support plan described a different approach for managing allegations, bypassing by the safeguarding lead. This potentially places the young person at risk.

The behaviour management process is weak. Senior leaders do not routinely review incidents or obtain the view of a child, for example after a restraint. They do not challenge some strategies such as 'planned ignoring' when a vulnerable child is trying to leave the premises. Some records contain different information, for example, one record stating that a child had been locked in a room with another not recording this. Senior leaders had not investigated or challenged this record or practice. Inspectors could not determine if there had been a restriction of liberty. The lack of evaluation, oversight and debrief means that children are at risk. Senior leaders have recently created a behaviour support team and are in the process of introducing a new behaviour management model. The benefits of these initiatives are yet to be realised.

Senior leaders have been ineffective in identifying risks in the environment. Examples include a vertical drop by a staircase where a child could fall and get stuck, and an unguarded electric heating bar with the potential to cause serious burns. Senior leaders took immediate corrective action during the inspection. Other parts of the environment need improving, such as protruding screw heads, some internal doors not having thumb-turn locks fitted and doors missing from a wardrobe.

There has been one episode of going missing from care since the last inspection. Staff followed due process and were able to contact the young person to ensure that they were as safe as possible during the missing episode. Staff engaged effectively with other agencies and parents.

For some children, staff are not actively engaging with them to keep them safe. For example, key-work records do not indicate any work done with a young person, considered to be at risk of child sexual exploitation, on appropriate relationships and staying safe in the cyber world.

Key staff adopt safer recruitment practice. The single central register is well organised.

The effectiveness of leaders and managers: inadequate

Senior leaders admitted two children on a 52-week basis, one of whom has subsequently been discharged, although the premises are not registered as a children's home. They do not keep a record of the panel discussion or how they came to the conclusion to accept a placement. They have failed to ensure that key documents, such as looked-after child care plans and consents, are in place. Staff do not make routine written contributions to statutory reviews, with the key worker neither asked to contribute to, or told the outcome, of a review. This has resulted in some action points not being completed within the deadline and, in one case, a parental complaint.

Some training is weak, for example autism spectrum disorder training. Staff complete an e-learning package with no formal arrangements for additional training. Senior leaders acknowledge the need to reassess a young person's motor skills for independent living but have not considered further staff training in the young person's particular condition. Senior leaders' response to improve training on female genital mutilation, recommended at the last inspection, has been weak. Managers were unable to evidence that only trained staff are using 'contingent touch' as recommended by experts in epilepsy management. Staff say that they need further training about diabetes.

There has been a loft conversion and a single-storey extension built since the last inspection, increasing the number of beds by four. Senior leaders have not advised the Department for Education of an increase in numbers and consequently Ofsted has not completed a material change visit. Some rooms have been reconfigured for other uses and inspectors could not determine the total number of children that could be accommodated. A difference of opinion between the building inspector and fire inspector means that the building works do not have a building control certificate.

There has been a high turnover of staff since the last inspection. Children and their parents report that there is a varying staff team, which is not conducive to consistent practice.

The routine monitoring by senior leaders, governors and the independent visitor has failed to identify the shortfalls seen by inspectors.

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people. Inspectors considered the quality of work and the differences made to the lives of children and young people. They watched how professional staff work with children and young people and each other and discussed the effectiveness of help and care provided. Wherever possible, they talked to children and young people and their families. In addition, the inspectors have tried to understand what the school knows about how well it is performing, how well it is doing and what difference it is making for the children and young people whom it is trying to help, protect and look after.

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: SC050366

Headteacher/teacher in charge: Mrs Fran Pass

Type of school: Residential Special School

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Inspectors

Keith Riley, social care inspector (lead)
Stephen Collett, social care inspector



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