

Notton House School

Notton School House, 28 Notton, Lacock, Chippenham, Wiltshire SN15 2NF Residential provision inspected under the social care common inspection framework

Information about this residential special school

The academy provides a 38-week per year educational provision for boys aged eight to 19 years with social, emotional and mental health difficulties and/or speech, language and communication difficulties.

At the time of the inspection, there were 39 residential pupils. The residential accommodation is provided for pupils in eight distinct areas on the academy site.

The inspectors only inspected the social care provision at this school.

Inspection dates: 7 to 9 November 2023

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

How well children and young people are good helped and protected

The effectiveness of leaders and managers good

The residential special school provides effective services that meet the requirements for good.

Date of previous inspection: 7 February 2023

Overall judgement at last inspection: good



Inspection judgements

Overall experiences and progress of children and young people: good

Children told the inspectors that they like and/or love being at the school. They feel safe, and they like the staff who care for them and have fun. They like their residential areas and the children they live with. Children like the flexible boarding arrangements of staying part time, while still living at home, as they feel this balance really helps them. One child said there was nothing wrong with the school, but he prefers to be at home with family. However, he was able to acknowledge how staying in the residential provision has helped him to become more mature and make better choices.

Staff are ambitious for children and set reasonable, personalised targets to help them develop. Children are at the heart of what staff do, and staff talk with pride about the children and the progress they are making. Annual reviews capture children's progress alongside parents and children's views. Children's views are clearly used to drive their individual plans.

Written plans provide staff with clear guidance on how to meet the child's needs. However, at times, institutionalised, vague and emotive language is used in these plans. This does not provide meaningful feedback to the child should they wish to access their records in later life.

This summer, several children left the school well prepared for the next chapter in their lives. New children have been welcomed. Their move into the school has been well managed and staggered at a pace to suit them and their families.

Staff are skilled at assessing children's needs and quickly identify what specialist support is needed. The support from the 'well-being hub' is valued by children and families. Parents report that the coffee mornings help them feel less isolated and build networks of support between themselves. The 'well-being hub' provides a responsive, flexible service for the whole school, children, staff and parents. It is well regarded and provides additional skilled support to improve the outcomes for children.

Children's health care needs are well met. Medication is typically stored securely, and records of medication administration are of an appropriate quality. However, in one care area, one child's medication was inappropriately stored in another child's medication tin. In addition, this medication was in two brown envelopes and had handwritten information on it instead of the pharmacy label as required.

Residential areas provide colourful and welcoming accommodation for children. Bedrooms are personalised and well furnished. Children now have door fobs that allow them independent access to their residential area. One said that they like this as it is like having your own front door key.



Leaders and managers have not yet identified an alternative option to staff using walkie-talkie devices. Reviewing their use was a recommendation at the last inspection as it was recognised that the noise from these devices can be heard throughout the residential areas and detracts from the homely atmosphere the staff and children have created.

Staff support children to do lots of different activities. Children are encouraged to join clubs in the community. This helps them build social networks and friendships outside of the school.

Children enjoy a varied and nutritious choice of food in the 'American diner' style dining room they helped to design. Mealtimes are staggered to provide space and to promote a calm social experience. Staff encourage children to make healthy choices and try new foods. In the independent house, children are supported by staff to plan, shop and cook for their house group, which helps develop their independence skills.

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

Staff are well trained to identify emerging risks for children. The quality of regular training and safeguarding updates ensures that staff are alert to changing risks, including exploitation and internet safety. Staff share information about new and emerging risks with parents in an engaging and simple format so that key messages are easily understood. The safeguarding policies and procedures for staff to follow are clear, well understood and followed appropriately to make referrals to other agencies when needed.

Behaviour is appropriately managed. There was an initial increase in the use of restraint after new children arrived. This was due to new children needing a period of adjustment. Staff are supporting them well and managing this effectively. Restraint records are generally of a good quality and provide a clear picture of events. Keyworker sessions are linked to incidents and demonstrate the discussions held with children, helping them to reflect on what happened and learn strategies to manage their emotions.

On occasion, when a serious risk has been identified, a 'wand' metal detector is used to search for items held by children. The use of this approach is closely monitored and reviewed by senior leaders to ensure it ceases when there is no longer an identified risk.

Staff are provided with clear directives on how to manage complex and high-risk behaviours, including self-harming and bullying. When children go missing from the school, there is a well-organised response that ensures protective actions are put in place to quickly locate children.

The effectiveness of leaders and managers: good



Leaders and managers have a realistic understanding of the school, its strengths and areas for improvement. They have a clear vision for developing the school, and plans are in place to achieve their vision.

The internal annual assessment of compliance with standards carefully identifies areas for improvement. It captures all the relevant findings from key scrutiny activities, including inspection reports and a recent independent safeguarding investigation by the local authority. A school improvement partner visits to review the school's own self-evaluation and makes recommendations based on their findings.

Currently, there are some staff vacancies that have led to agency staff being used. Where possible, the same agency staff are deployed to provide consistency for the children.

Induction of staff is a standardised process, which has clear checkpoints within it to ensure that all staff meet and understand the aims and objectives of the school and care setting. Leaders and managers have clear oversight of this process.

Supervision is regular and at a frequency that is appropriate for the staff member. It is a supportive process, but it does challenge staff performance. Deficits in staff practice are addressed respectfully. Information from these sessions is used to develop the staff training programme.

Feedback from staff is mixed. The majority are positive about the school including support and training they receive. Some said they would like more staff to be able to provide a wider range of activities and also to provide cover for staff sickness.

The routine visits from the independent visitor and the support and challenge sessions provided by the safeguarding governor are effective and help leaders and managers to assure themselves that safeguarding practice is consistently effective.



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

Recommendations

- School leaders should ensure that children's medication is stored in the box or bottle provided by the pharmacist and stored in the child's individual medication tin.
- School leaders should ensure that further improvements are made in the language staff use in children's records to remove the use of vague, emotive or institutionalised phrases.
- School leaders should review the use of walkie-talkies to ensure their use by staff does not interfere with the homely environment and atmosphere in the residential areas.

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: SC039112

Headteacher/teacher in charge: Michelle Reysenn

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Inspectors

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