

Education in Hospital 2 (Bradford Royal Infirmary)

C/O 21 Owlet Road, Shipley, Bradford, West Yorkshire BD18 2LU

Inspection dates	28–29 June 2016
Overall effectiveness	Good
Effectiveness of leadership and management	Good
Quality of teaching, learning and assessment	Good
Personal development, behaviour and welfare	Good
Outcomes for pupils	Good
Overall effectiveness at previous inspection	Requires improvement

Summary of key findings for parents and pupils

This is a good school

- Senior leaders have ensured that this school has improved and that pupils benefit from good teaching. They ensure the aim of 'every day of education counts' is delivered for pupils when they stay in hospital.
- The new management committee has got a good grip on the issues facing the school. They are swiftly and skilfully resolving those they can.
- New teachers have embraced the challenges of teaching in the hospital school. They plan lessons based on thorough assessments and teach with precision, so pupils make progress and consolidate their learning.
- Good two-way contact with most pupils' home schools means that teachers have use of up-to-date information to support pupils' learning over time.
- Provision for children in the early years is now good. Teachers make sure that children can follow their interests and learn through a good range of appealing resources.
- Post-16 pupils get specific help with English and mathematics to support achieving the aims of their study programmes.
- Pupils are keen to work hard. They appreciate that the work they complete in hospital stops them falling behind at school.
- All groups of pupils make good progress because activities are well matched to their starting points.
- Pupils who stay in hospital on a regular basis benefit from learning across a broad range of subjects as well as English and mathematics.

It is not yet an outstanding school because

- The lack of security about staffing issues and the tentative plans about future governance undermine the sustainability of the good standards reached by the school.
- Staff, including those visiting from home schools, do not always find space for private professional conversations, away from the pupils.
- Not all home schools value the hospital school's work enough to cooperate and share up-to-date information about pupils' learning.
- Leaders have not established a sustainable way for teachers to check if their assessments of pupils' learning match those in other schools or for teachers to understand the expectations of the most able pupils.

Full report

What does the school need to do to improve further?

- The local authority and management committee take swift action to ensure the current good standards are at least maintained, by ensuring:
 - decisive and appropriate action is taken when needed in relation to staff performance and attendance
 - decisive and effective action is taken to agree and implement any changes to the governance arrangements of the two separate hospital schools currently led by the acting headteacher and management committee
 - stability in the leadership of the school.

- Improve the outcomes for pupils by ensuring that:
 - all staff, including those visiting from other schools, find appropriate areas to hold necessary discussions about pupils, away from areas where pupils are being taught
 - all home schools engage with school staff about the pupils' current levels of learning and their next steps.

- Improve teaching, learning and assessment, by ensuring that:
 - links with high performing mainstream schools give teachers opportunities to compare their assessments of pupils' learning with other teachers and to keep up to date with changes in expectations, especially for the most able
 - teachers collect information about the skills of the most able pupils and use the information to challenge them to use and apply their knowledge at greater depth.

Inspection judgements

Effectiveness of leadership and management is good

- The acting headteacher and deputy headteacher have worked systematically and with determination to make sure pupils in hospital benefit from good teaching. As a result, they have ensured that pupils make good progress in their hospital lessons, which contributes to their achievements over time.
- Significant improvements in the quality of teaching have been achieved because leaders' checks on the effectiveness of teaching are thorough and accurate. Their feedback to teachers is precise about what they need to do to improve their practice. Leaders have not shied away from frank discussions with teachers who have not followed their sound advice.
- The two teachers working during the inspection both have leadership roles. They have developed these roles over this school year and are now making a significant impact on the continued development of the school. For example, leaders now collect and use a wide range of information about pupils' engagement and the progress they make in each lesson. They use this information to make sure different groups of pupils are doing as well as each other.
- Teachers have benefited from appropriate training that has enabled them to meet the very wide range of needs of the pupils. Work with a local special school has led to teachers having a secure understanding of how to plan and teach lessons to pupils with profound and multiple learning difficulties. Support from a mathematics consultant has been equally effective in equipping the same teachers as they teach pupils preparing for GCSE examinations in mathematics.
- The induction of two new high level teaching assistants (HLTAs) at the time of the inspection demonstrated the effectiveness of the support received by new staff. This support enables them to quickly grasp the approach used to engage pupils in learning while complying with procedures linked to working in the hospital environment.
- Teachers focus on reading, writing and mathematics skills in the pupils' first lesson of the day. When pupils stay for more than one day, second lessons and other supported activities cover a wide range of subjects, linked to a half termly themes. This means regular and recurring pupils experience a range of activities that supports their wider spiritual, moral, social and cultural development. Staff capitalise on opportunities to mark cultural and faith-based celebrations. These activities promote pupils' understanding of the values of respect and tolerance.
- The school receives limited funding for disadvantaged pupils. However, leaders and teachers ensure that these pupils receive additional sessions to help them catch up with other pupils. Equally, pupils who have special educational needs and/or disabilities receive teaching that is well matched to their needs. Teachers recognise the value of subtle reactions and the small steps of progress some of these pupils make.
- Parents, many of whom are present while teaching takes place, are overwhelmingly positive about the benefits the education their children receive while in hospital. Hospital staff appreciate the improvements in the service offered. They see the wider, positive impact on pupils' emotional well-being through the links with their home schools and through not falling behind when in hospital.
- The local authority's school improvement service has provided effective support to senior leaders since the previous inspection. This support has been well-targeted and is valued by the leaders. Unfortunately, the support to secure effective governance arrangements took far too long and risked stalling the progress of the school. The current slow pace of decision-making about the future governance of the school risks jeopardising the sustainability of the current good standards achieved.
- **The governance of the school**
 - Until four months ago, governance arrangements were not effective. Reactions to the most recent inspections of each of the three schools falling under the control of the management committee led to knee-jerk responses. The lack of focus did not support leaders' actions to improve the effectiveness of teaching.
 - Since March 2016, a newly formed management committee, including two national leaders of governance, has got a grip on the key issues that must be resolved. They are quickly and systematically resolving them.
 - Governors have first-hand knowledge of the complexity of the school because they visit, observe and look at pupils' work, and take part in staff meetings. They are using this knowledge to challenge leaders to be more precise in the information they provide the committee and to give clear direction for the future of the school.

- The performance management of the acting headteacher is now securely in place. This has allowed leaders to establish an appropriate appraisal process for teachers and other staff. The current governors, through their roles in other schools have expertise to resolve, if needed, any staff performance or attendance issues.
- Governors have quickly sorted out the financial affairs of the linked schools. This has ensured that appropriate staff can be recruited, albeit on temporary contracts.
- The arrangements for safeguarding are effective. Leaders ensure they follow their safer recruiting policy and keep a good record of all the checks they undertake on the staff working at the school. Staff are well trained in all aspects of safeguarding. Key to robust procedures is good communication and cooperation between school staff and hospital staff. Inspection evidence shows that staff do share information when there are concerns about pupils and agree who takes the necessary action. All staff are acutely aware of the additional needs to safeguard pupils' dignity and emotional well-being, as most lessons take place at the pupils' bedsides.

Quality of teaching, learning and assessment is good

- Teaching at this school is complex as pupils change from day to day and medical treatments take priority over learning. However, these factors have not prevented teachers from successfully implementing a daily planning system which ensures that pupils get the maximum benefit from the school day.
- Teachers prioritise pupils whose health conditions lead to regular pre-planned admissions. Close liaison with these pupils' home schools ensures that teachers can plan lessons which focus on each pupil's next steps or help to consolidate and deepen their knowledge and understanding. When appropriate, teachers support pupils to complete work sent in from their home schools, particularly those studying for qualifications.
- Teachers pay equal attention to pupils who have recurring, but unplanned admission to hospital. Good contact with most pupils' home schools ensures that teachers can plan effective lessons. Pupils in this group include those with profound and multiple learning difficulties and their learning needs are well met. Teachers use a range of approaches to develop pupils' responses to different stimuli and know the importance of the very subtle responses pupils make.
- Teachers also ensure that pupils who are admitted for one-off reasons receive a 'Day 1' booklet. This provides an assessment of pupils' levels in reading writing and mathematics which are matched to the standards expected for their ages. Discussions and activities based on the information collected mean if pupils stay for more than one day, teachers can provide lessons which are well matched to their individual needs.
- Staff quickly form positive relationships with pupils because they value pupils' interests. Lively questioning and joyful interactions ensure that pupils try hard and accept the accurate feedback and guidance they are given to improve their work.
- Disadvantaged pupils receive additional teaching as they are prioritised for second or third lessons each day, depending on the number of pupils on the ward. Effective and focused teaching ensures that the hospital school contributes to their progress over time.
- Direct teaching is supplemented by independent learning activities given to pupils following lessons. They complete the activities either by themselves or with their parents. Teachers discuss the work with pupils and link it to their targeted learning in taught sessions. These activities support pupils' overall progress and keep them engaged in learning over a range of subjects, despite lengthy or regular stays in hospital.
- The very few children in the early years of their education are well catered for. Staff set out resources that allow children to follow their interests and develop their reading, writing and number skills through a good range of activities. There are restrictions on some activities due to the space available and necessary infection control measures.
- The equally small number of pupils in Year 12 receive the same high level of precise teaching, if their home schools make the information available. When this is not the case, teachers focus on English and mathematics skills to support the pupils' success in the aims of their study programme.
- Teachers plan precisely using the information they receive from home schools. However, they have not asked for detailed enough information about the most able pupils. As a result, some opportunities to challenge these pupils to work at greater depth are missed.
- The detailed daily records of learning maintained by staff clearly demonstrate the positive impact of regular communication between the school and each pupil's home school. Communications focus on current assessments of pupils' learning and their next steps. Unfortunately, not all pupils' home schools cooperate

with the hospital school's request for information. This means teachers have to use valuable teaching time to update their assessments of pupils rather than get straight on to pre-planned activities that lead to good outcomes for the pupils.

Personal development, behaviour and welfare is good

Personal development and welfare

- The school's work to promote pupils' personal development and welfare is good. Teachers' positivity is catching and pupils respond to their considered approaches. This not only engages pupils in learning but supports their personal development as they feel valued and respected.
- Leaders and teachers follow agreed protocols about the priority of medical care. They all assiduously follow the infection control procedures set out for each pupil. Equally, staff follow the security systems by not allowing visitors to follow them through doorways as they move between wards.
- Staff understand the impact of repeated hospital visits on pupils' emotional well-being. They provide good support to pupils, complimented by regular contact with home schools. The contact means that staff have accurate and up-to-date information about each pupil's feelings and can plan appropriate responses as pupils arrive in hospital.
- Leaders' creativity ensures good use of the primary physical education (PE) and sports grant. Staff provide additional table top game activities to develop competition skills and resilience when pupils experience losing.

Behaviour

- The behaviour of pupils is good. Pupils are keen to learn because lessons are well-matched to their needs and delivered in a lively manner by enthusiastic teachers. Teachers have a good range of skills to draw pupils into learning activities, even if they show some initial reluctance.
- This year, teachers have developed an effective system for recording and understanding why some pupils do not want to join in lessons. The information collected in the first half term showed a higher than expected number of 'declines'. This prompted teachers to revise the range of approaches they use to entice pupils to learn when they are on the borderline of not feeling well enough. As a result, every half term has seen an increase in pupils accepting lessons and therefore making more progress.
- There are no recorded incidents of poor, disrespectful or bullying behaviour and no indication during the inspection that these behaviours occur. Teachers consistently follow a positive approach to pupils who may show signs of their interest waning and quickly get them back of track.

Outcomes for pupils are good

- Teachers' daily records of pupils' progress in each lesson indicate the vast majority of pupils meet or exceed the appropriate targets set for them. Lessons observed, work in pupils' books and in their electronic journals confirm the accuracy of the daily records. The good progress achieved lesson by lesson makes a significant contribution to the progress pupils make over time in their home schools.
- As a consequence of additional lessons and well-trained staff, the outcomes for all different groups of pupils are similar, including those who are disadvantaged, have special educational needs and/or disabilities or are from different ethnic backgrounds.
- A key outcome for the majority of pupils is that they develop and sustain positive attitudes towards managing lifelong health conditions. As a result, pupils maintain appropriate aspirations for their futures.
- Through agreement with hospital staff, home schools, parents and pupils, staff ensure that learning in its widest sense continues to take place when pupils receive palliative care for life-limiting conditions. The sensitivity and compassion with which the arrangements are discussed and activities are delivered is commendable.
- Pupils are well prepared for the moves between home school and hospital school, particularly when the home school takes up the offer of school and hospital visits as well as daily email exchanges. Staff also support through timely discussions with pupils who are moving to secondary school and those moving onto further education.
- Occasionally, pupils' progress in lessons is slowed because staff, including staff from home schools, hold conversations about pupils in areas where teaching is taking place.

School details

Unique reference number	133752
Local authority	Bradford
Inspection number	10002171

This inspection was carried out under section 5 of the Education Act 2005.

Type of school	Pupil referral unit
School category	Pupil referral unit
Age range of pupils	4–19
Gender of pupils	Mixed
Number of pupils on the school roll	17
Appropriate authority	The governing body
Chair	Sally Birkbeck
Headteacher (acting)	Susan Sutcliffe
Telephone number	01274 582995
Website	www.tracks-education.org
Email address	office@tracks-ed.org
Date of previous inspection	5–6 November 2013

Information about this school

- Education is offered to all children and young people admitted to the hospital from the first day of their admission, if the medical teams agree they are well enough. On the day of the inspection, 17 pupils were available for teaching over the three children's wards 16, 17 and 2.
- Pupils attend the hospital from all over Bradford. The proportion of pupils who are disadvantaged (those who are eligible for free school meals or who are looked after), those who have special educational needs and/or disabilities, those from different ethnic backgrounds or who speak English as an additional language varies daily. The proportions generally reflect those found in the Bradford metropolitan district as a whole.
- The school makes specific provision for three groups of pupils. The largest group of 35 pupils attends the hospital on regular pre-planned occasions for medical interventions to treat long-term health needs. The second group of 20 pupils attend on a recurring but unplanned basis due to chronic health conditions. The third group is pupils who are admitted on a daily basis due to unforeseen medical needs.
- At the time of the inspection, the regular and recurring pupils were on the role of 35 different schools in Bradford, including three special schools and further education colleges. All pupils remain on their home school rolls during their stay in hospital.
- The number of 4–5-year-old children and Year 12 pupils are too low to report separately on early years provision and the 16 to 19 study programmes.
- At the time of the inspection, the school's website was not active. The school's details are appropriately available on Bradford's local offer website.
- The acting headteacher and acting deputy headteacher have been in their current roles since December 2014. They and the management committee are responsible for a second hospital school and a key stage 4 pupil referral unit. The two teachers working at the school at the time of the inspection joined the school in April 2015. The two HLTAs joined the school on the day before the inspection. Three teachers are currently absent from school.

Information about this inspection

- Inspectors observed a small number of lessons being taught at pupils' bedsides and in the school room during the inspection. One session was observed jointly with the acting deputy headteacher.
- Inspectors talked with pupils and reviewed the record of their views about teaching which form part of the daily record of learning maintained by the teachers.
- Inspectors met with the acting headteacher and acting deputy headteacher, the chair and three other members of the management committee, a representative of the local authority, the consultant special educational needs coordinator (SENCo) and the children's ward manager.
- Meetings were also held with the two teachers to discuss their teaching and middle leadership roles.
- A meeting was held with a teacher from one of the special schools whose pupils have recurring stays in hospital and telephone calls were held with representatives from three mainstream schools whose pupils are regularly admitted to hospital.
- A third of the regular and recurring pupils' records and books were reviewed in detail, including the information provided by their home schools.
- No parents completed Parent View, Ofsted's online parent questionnaire. Inspectors talked with two parents and considered the views of parents collected by teachers following pupils' lessons.
- Inspectors reviewed a wide range of school documents, including policies and procedures relating to safeguarding as well as information about pupils' progress and engagement and leaders' records of how they check the effectiveness of teaching.

Inspection team

Susan Hayter, lead inspector

Fiona Dixon

Her Majesty's Inspector

Ofsted Inspector

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Store Street
Manchester
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