

# Potters Bar Clinic School

Potters Bar Clinic, 190 Barnet Road, Potters Bar, Hertfordshire EN6 2SE

**Inspection dates**

9 October 2019

**Overall outcome**

**The school does not meet all of the independent school standards that were checked during this inspection**

## Main inspection findings

### Part 1. Quality of education provided

*Paragraph 2(1), 2(1)(a), 2(1)(b), 2(1)(b)(i), 2(2), 2(2)(d), 2(2)(d)(i), 2(g)*

- This standard was not met at the standard inspection in March 2019 because, although pupils studied a breadth of subjects, those subjects sometimes lacked depth. The personal, social and health education (PSHE) curriculum was not bespoke to pupils in the provision, as per the school's policy. The curriculum policy did not match the practice of teachers. The implementation of the curriculum policy was not ensuring that pupils' needs were routinely well met, or that it was in line with the clinical support that they were receiving. The work-related learning opportunities in the sixth form were not routine, or well linked to students' aspirations, abilities and needs.
- In the action plan, leaders proposed to redraft and implement a revised curriculum policy so that the school's policy closely matched the provision on offer. Leaders planned to develop a programme of study which would closely align with pupils' ongoing clinical needs. The programme would have four curriculum pathways: re-engaging, returning, reaching and rising. They would create schemes of work and plans to match the policy, especially but not exclusively in the study of PSHE. Leaders aimed to strengthen the vocational offer, careers guidance and work-related learning available to pupils, including for students at post-16. They would develop ward-based provision with a named coordinator to create and evaluate this work. Leaders aimed to create clearer processes to link the work of clinical teams with the work of school staff, including through legal documentation such as education, health and care (EHC) plans.
- Since the standard inspection, the interim headteacher has focused on designing a new curriculum to engage pupils in their learning. Significant steps have been taken to design a new approach to the curriculum, to complement the provision on offer. The new curriculum policy details the approach and expectations of the new key stage 4 curriculum. It is supported by detailed schemes of work. This positive development ensures that staff are able to organise the curriculum appropriately to encourage pupils to build on previous learning.
- Leaders have created a bespoke approach to post-16 education. A programme of activities is personalised to individual needs and subject choices. This is not yet as detailed or evident in impact as the key stage 4 curriculum.

- The key stage 3 curriculum lacks depth. All pupils follow a single version of the curriculum. This does not reflect what is articulated in the curriculum policy. Leaders acknowledge that further work needs to take place with the key stage 3 curriculum to meet the varying needs of all pupils, particularly with regard to those pupils who have an EHC plan.
- The PSHE curriculum is bespoke to pupils and reflects the schools aims and ethos, as per the school's policy. The teaching of the curriculum ensures that pupils' needs are well met and in line with the clinical support they receive. The pupils spoken to are positive about the curriculum and the way it is delivered and say it helps them to be ready for their next steps in education.
- Leaders have created clearer processes to link the work of clinical teams with the work of school staff by ensuring regular communication and frequent meetings.
- The requirements of paragraph 2(1)(a), 2(1)(b) and 2(1)(b)(i) were not met at the standard inspection in March 2019, and they continue not to be met.
- This independent school standard remains not met.

*Paragraph 3, 3(a), 3(c), 3(d), 3(e), 3(g)*

- This standard was not met at the standard inspection in March 2019, because staffing changes since the school opened had hindered the progress of pupils over time. Teachers did not receive precise guidance about how to best meet pupils' needs, including through legal documentation such as EHC plans. Teaching, learning and assessment did not inspire pupils to produce consistently high-quality work across subjects. Ward-based provision was underdeveloped. The curriculum plans were not supporting staff quickly to develop confidence in teaching and assessment in all subject areas. Pupils' absences were not being accounted for in teachers' planning, and therefore pupils were acquiring more gaps in their knowledge and understanding.
- In the school's action plan, leaders proposed to create systems to measure pupils' starting points on entry to the school and develop ward-based provision with a named coordinator to create and evaluate this work. Specific training will be planned for staff, related to pupils' social and emotional needs and curriculum subjects. Leaders planned to triangulate evidence from work scrutiny, lesson planning, learning walks, data collection and pupils' attendance to evaluate the impact of teaching. Leaders undertook to create clearer processes to link the work of clinical teams with the work of school staff, including through legal documentation such as EHC plans.
- Since the standard inspection, the individual needs and prior attainment of pupils are considered when planning learning. Planning demonstrates good-quality subject knowledge, which enables pupils to have access to high-quality instruction. This is planned thoughtfully and in an appropriate sequence. The planned curriculum for key stage 4 and the bespoke plans at post-16 enable pupils to develop their knowledge well and develop their skills in the subjects taught.
- A framework is in place to assess pupils' work regularly, but teaching is not consistently adjusted to meet needs based on pupils' prior subject knowledge and progress over time.
- Staffing changes and the high use of agency healthcare assistants limits pupils' learning. Learning is limited when time in class is not managed effectively.

- The requirements of paragraph 3(c) and 3(g) were not met at the standard inspection in March 2019, and they continue not to be met.
- This independent school standard remains not met.

### Part 3. Welfare, health and safety of pupils

#### *Paragraph 7, 7(a), 7(b)*

- During the standard inspection in March 2019, the arrangements for safeguarding pupils were not effective. Leaders lacked a wide-ranging understanding about the extent of their responsibility to safeguard pupils. They did not understand well enough the legal guidance to safeguard pupils, and they had a limited understanding about how they should be working with external agencies. Leaders did not challenge other stakeholders well enough about how to safeguard pupils, or seek further guidance about whether they needed to take more action.
- The school had a systematic lack of protocols for monitoring and safeguarding pupils when working with healthcare colleagues, despite serious and significant issues since the school opened. Serious incidents were not being logged appropriately, including the recording of accidents and first-aid treatments. Records of safeguarding concerns were inaccurate, and they did not match other records of the school. Leaders were not providing the management committee with accurate information about safeguarding and incidents in the school.
- In the action plan, leaders undertook to give staff the legal guidance related to safeguarding in education and safer working practices. They proposed to create links with Hertfordshire local authority children's services teams. Leaders said they would create and embed protocols for pupils when accessing education in the school, on clinic wards, transitioning between the two, and sharing information about pupils when events occur outside school hours. Leaders proposed to retrain staff in the protocols, and establish ongoing one-to-one opportunities for staff to discuss and develop their understanding about safeguarding practices.
- Since the previous inspection, leaders have ensured that staff are aware of, and understand, the most recent statutory guidance, including 'Keeping Children Safe in Education' (September 2019). Staff have completed basic safeguarding and child protection awareness training. They have done accredited courses on child sexual exploitation, female genital mutilation, 'Prevent' training and other courses relevant to the provision in order to safeguard pupils.
- Leaders have developed a wider understanding of their role in safeguarding pupils beyond school time, and they challenge other stakeholders about how well they are safeguarding pupils. There is now a monthly safeguarding meeting between the interim headteacher and the hospital director. Leaders are in the process of setting up a weekly meeting with the lead nurse, who is also the designated safeguarding officer for the hospital. Leaders have worked together to create protocols for the monitoring and safeguarding of pupils in school, in the clinic wards and when transitioning between the two provisions.
- Leaders have created links with Hertfordshire local authority children's services. They met with the child protection school liaison team manager in September 2019. Arrangements are being made to meet with the child protection officer for the area once

a term. Leaders are aware of who to approach about safeguarding in order to seek further guidance about whether they need to take more action about a specific incident.

- Leaders have devised a new safeguarding serious incident log. Records of safeguarding concerns match other records of the school. Safeguarding concerns are discussed during the morning board review. There is frequent communication between school and hospital leaders. Leaders reflect on serious incidents so that learning points can be embedded into future school practice. Leaders now provide the management committee with timely, up-to-date information about safeguarding and incidents in the school.
- Leaders provide one-to-one opportunities for staff to develop their understanding of safeguarding practices, at least once a month. Sessions are personalised according to staff needs.
- Leaders have retrained staff about the procedures, protocols and policies for reporting concerns about pupils. These systems are not yet fully embedded across the school. Staff have improved their vigilance in identifying concern but the reporting of it requires further work. The 'recording form for safeguarding concerns' is not used consistently according to school policy. Leaders recognise this. They are in the process of retraining staff by using a scenario-based approach to help staff understand the implications of their actions. The requirements of paragraph 7(a) were not met at the previous inspection, and they continue not to be met.
- This independent school standard remains not met.

*Paragraph 9, 9(b), 9(c)*

*Paragraph 11*

*Paragraph 13*

*Paragraph 16, 16(a), 16(b)*

- At the time of the standard inspection in March 2019, policies and practice in the management and recording of behaviour, first aid, serious incidents and risk assessment were too often haphazard and makeshift as incidents occurred. There were few recorded incidents in official logs, even when incidents had occurred. Poor leadership oversight resulted in a lack of accurate information being provided to the management committee.
- The school's action plan proposed a number of appropriate actions. These included to review and implement policies in first aid, behaviour, risk assessment and serious incidents that are specific to the needs of the pupils and the site. Leaders planned to support staff to embed and implement policies on a daily basis through training, such as focused 'policy of the week' sessions. Leaders agreed to implement routine checks on the recorded logs of incidents, and the urgent referral of serious incidents to the management committee within 24 hours.
- Leaders have reviewed their procedures for recording inappropriate behaviour. The records show that leaders are routinely logging incidents, and these are followed up to successful resolution. Information is shared between the school and the hospital to ensure that timely support is provided by all adults involved in the welfare of pupils.
- Leaders have implemented an appropriate health and safety policy. Education leaders work closely with all staff to ensure that health and safety is managed effectively. There is regular communication between staff with different health and safety roles. Health and safety matters are clearly reported to the proprietor and any resulting needs identified.

The proprietor is responsive to leaders, and places the highest priority on the health and safety of pupils and staff.

- Leaders have reviewed the first-aid policy and have ensured that it is implemented in a competent manner. Leaders ensure that first-aid kits are kept securely and contain materials that are appropriate and in date.
- The risk assessment policy has been updated and now considers a range of risks. It rightly identifies which risks should be assessed and what constitutes a risk. The policy is appropriate to the needs of young people. The detailed risk assessments on individual education plans have ensured that daily changes to risk are considered.
- There are routine checks on the recorded logs of incidents. The referral of serious incidents to the management committee occurs within 24 hours.
- Leaders have ensured that these four independent school standards are now met.

#### Part 4. Suitability of staff, supply staff, and proprietors

*Paragraph 18(2), 18(2)(a), 18(2)(b), 18(2)(c), 18(2)(c)(i), 18(2)(c)(ii), 18(2)(c)(iii), 18(2)(c)(iv), 18(2)(d), 18(2)(e), 18(3)*

*Paragraph 19(2), 19(2)(a), 19(2)(a)(i), 19(2)(a)(i)(aa), 19(2)(a)(i)(bb), 19(2)(a)(i)(cc), 19(2)(a)(i)(dd), 19(2)(a)(ii), 19(2)(b), 19(2)(c), 19(2)(d), 19(2)(d)(i), 19(2)(d)(ii), 19(3)*

*Paragraph 20(6), 20(6)(a), 20(6)(a)(i), 20(6)(a)(ii), 20(6)(b), 20(6)(b)(i), 20(6)(b)(ii), 20(6)(b)(iii), 20(6)(c)*

*Paragraph 21(1), 21(2), 21(3), 21(3)(a), 21(3)(a)(i), 21(3)(a)(ii), 21(3)(a)(iii), 21(3)(a)(iv), 21(3)(a)(v), 21(3)(a)(vi), 21(3)(a)(vii), 21(3)(a)(viii), 21(3)(b), 21(5), 21(5)(a), 21(5)(a)(i), 21(5)(a)(ii), 21(5)(b), 21(5)(c), 21(6), 21(7), 21(7)(a), 21(7)(b)*

- At the school's standard inspection in March 2019, these standards were met.
- All of the necessary checks on staff are completed appropriately. A few small administrative errors were found on the school's register of pre-employment checks and shared with the interim headteacher. These were rectified prior to the end of the inspection.
- These four independent school standards continue to be met.

#### Part 5. Premises of and accommodation at schools

*Paragraph 28(1), 28(1)(a), 28(1)(c), 28(2), 28(2)(a), 28(2)(b)*

- The inspection in March 2019 identified that drinking water was not readily and easily available to pupils in the school. The drinking water was not labelled appropriately. Leaders pointed the lead inspector to a water bottle in a locked office and water facilities in the staff toilet as being suitable for drinking.
- In the school's action plan, the proprietor undertook to order and install a drinking fountain in the school, label the fountain as drinking water and ensure that the fountain is suitably located for the access and safety of pupils.
- The deadline stated in the action plan for a drinking fountain to be provided in an unlocked room has been met. It is suitably labelled as drinking water. Pupils have access to water throughout the day. This ensures pupils' health, welfare and safety.
- Leaders have ensured that this independent school standard is now met.

## Part 6. Provision of information

*Paragraph 32(1), 32(1)(b), 32(1)(c), 32(1)(h), 32(1)(i), 32(3), 32(3)(c)*

- The standard was not met at the standard inspection in March 2019, because leaders did not provide some of the required information to parents and others, most notably, annual accounting for pupils funded by the local authority and information required for the purpose of annual review.
- The school's action plan stated a number of actions would be taken to meet the unmet standard. Leaders aimed to update policies so that they accurately reflected the practice of staff, and include these as a welcome pack for parents, ensuring that up-to-date policies were placed on the school's website. Leaders proposed to audit pupils' EHC plans and request emergency reviews for pupils in receipt of an EHC plan on admission to the school.
- Leaders have reviewed the policies and procedures linked to them, but the most up-to-date are not available to parents on the website. The old policies are those that are currently published. The new policies are not part of the parent pack.
- An annual account of income received, and expenditure incurred by the school in respect of pupils with EHC plans, is provided to the local authority. An audit has been completed to ensure how needs are met and how provision is made available to meet need. The impact of planned interventions is provided.
- The requirement in the paragraph 32(1)(c) previously met is now unmet. The school's safeguarding policy published on its website, checked on the morning of the inspection, does not include all the required up-to-date guidance and information. It does not take into account the updated 'Keeping children safe in education' September 2019 statutory guidance.
- The requirements of paragraph 32(1), 32(1)(b), 32(3) and 32(3)(c) were not met at the standard inspection in March 2019, and they continue not to be met.
- This independent school standard remains not met.

## Part 8. Quality of leadership in and management of schools

*Paragraph 34(1), 34(1)(a), 34(1)(b), 34(1)(c)*

- This independent school standard was not met at the standard inspection in March 2019, because the leadership of safeguarding was ineffective. Leaders lacked understanding about the independent school standards and demonstrated overgenerous views of the quality of provision. As a result of the widespread weaknesses, leadership and management were judged to be inadequate.
- In the school's action plan, the proprietor proposed to commission external quality assurance support to review the school's ongoing compliance with the independent school standards. The proprietor also stated that the monitoring and recording of serious incidents would be intensified and that communication with stakeholders would strengthen.
- This inspection confirms that leaders have taken some effective action since the standard inspection in March 2019 because paragraphs 2(2)(d), 2(2)(d)(i), 2(2)(g), 3(a), 3(d), 3(e), 7(b), 9, 11, 13, 16, and 28 are now met.

- Too much of the improvement work relies on the interim headteacher. Even though leaders have been more effective in their work, aspects of strategic leadership and impact are not yet ensuring that all standards are met for the quality of education provided, the welfare, health and safety of pupils or the provision of information.
- The proprietor demonstrates a more accurate view of the school's performance and receives regular updates in all aspects of the school's work. Leaders have improved communication with the daily ward-based staff, the hospital director and the management committee.
- With regard to safeguarding, this area of leaders' work has continued to improve since the standard inspection, but the reporting of concerns is not yet fully embedded. Leaders recognise that further work needs to be done to ensure that paragraph 7a is met.
- Some school policies on the website have not been updated to meet the latest statutory requirements.
- The proprietor has commissioned the support of an external consultant to help leaders develop a greater understanding of the independent school standards in order to ensure ongoing compliance. Improvements have been made in the health, welfare and safety of pupils, but they have not been embedded yet.
- This independent school standard remains not met.

## **Compliance with regulatory requirements**

The school does not meet the requirements of the schedule to The Education (Independent School Standards) Regulations 2014 ('the independent school standards') and associated requirements that were checked during this inspection, as set out in the annex of this report. This included the standards and requirements that the school was judged to not comply with at the previous inspection. Not all of the standards and associated requirements were checked during this inspection.

## School details

Unique reference number	145962
DfE registration number	919/6009
Inspection number	10119754

This inspection was carried out under section 109(1) and (2) of the Education and Skills Act 2008, the purpose of which is to advise the Secretary of State for Education about the school's suitability for continued registration as an independent school.

Type of school	Other independent special school
School status	Independent school
Age range of pupils	11 to 19
Gender of pupils	Mixed
Gender of pupils in the sixth form	Mixed
Number of part time pupils	None
Number of pupils on the school roll	7
Of which, number on roll in sixth form	2
Proprietor	Kath Murphy
Headteacher	Tara Stowe
Annual fees (day pupils)	£31,500
Telephone number	01707 858 585
Website	<a href="http://www.elysiumhealthcare.co.uk/education/schools/potters-bar-clinic-school/">www.elysiumhealthcare.co.uk/education/schools/potters-bar-clinic-school/</a>
Email address	<a href="mailto:info@elysiumhealthcare.co.uk">info@elysiumhealthcare.co.uk</a>
Date of previous standard inspection	19–21 March 2019

### Information about this school

- Pupils who attend this school are patients at Potters Bar Clinic.
- Potters Bar Clinic provides Child and Adolescent Mental Health Services (CAMHS) tier 4 low secure services through the National Health Service for pupils with personality disorders and complex social, emotional and mental health needs.

- The proprietor for this school is also the proprietor for two other specialist schools: Rhodes Wood Hospital School, and Brighton and Hove Clinic School. There is a head of education, who undertakes quality assurance work across all three schools.
- The school provides full-time education to pupils with special educational needs and/or disabilities. Some of the pupils have an EHC plan.
- Admission to the school is via admission to the clinic. Pupils' places are funded by the local authority. The school is registered to take a maximum of 30 pupils, from the age of 11 to 19 years.
- The school does not use alternative provision.
- The school does not receive additional funding for disadvantaged pupils or Year 7 catch-up funding.
- The school received its full standard inspection in March 2019. The inspection judged that the school's overall effectiveness was inadequate. There were 10 unmet independent school standards.
- Following the March 2019 inspection, the Department for Education required the proprietor to provide an action plan to highlight how unmet standards were going to be addressed. On the 1 July 2019, the action plan was judged as acceptable.
- An interim headteacher and interim deputy headteacher were appointed in May 2019.

## Information about this inspection

- This inspection was carried out at the request of the registration authority for independent schools. The purpose of the inspection was to monitor the progress the school has made in meeting the independent school standards and other requirements that it was judged to not comply with at its previous inspection.
- This is the first monitoring inspection since the standard inspection in March 2019. The inspection was conducted at no notice.
- The proprietor remains the same as at the March 2019 standard inspection. The proprietor was available to meet with inspectors at this first progress monitoring inspection.
- Inspectors met with the interim headteacher, the interim deputy headteacher, the head of education, teaching staff and pupils.
- Inspectors met with the designated safeguarding and child protection lead.
- The lead inspector held a telephone conversation with a representative from Hertfordshire local authority children’s services.
- Inspectors observed pupils at work in lessons. Observations were completed jointly with senior leaders. Pupils’ work was reviewed to assess the quality of teaching over time.
- A range of documentation was scrutinised, including that relating to safeguarding pupils, the curriculum, the welfare, health and safety of pupils and provision of information.

## Inspection team

Stefanie Lipinski-Barltrop, lead inspector	Her Majesty’s Inspector
Mary Rayner	Ofsted Inspector

## **Annex. Compliance with regulatory requirements**

### **The school does not meet the following independent school standards**

*Standards that were not met at the previous inspection and remain un-met at this inspection*

#### **Part 1. Quality of education provided**

- 2(1) The standard in this paragraph is met if–
  - 2(1)(a) the proprietor ensures that a written policy on the curriculum, supported by appropriate plans and schemes of work, which provides for the matters specified in sub-paragraph (2) is drawn up and implemented effectively; and
  - 2(1)(b) the written policy, plans and schemes of work–
  - 2(1)(b)(i) take into account the ages, aptitudes and needs of all pupils, including those pupils with an EHC plan.
  
- 3 The standard in this paragraph is met if the proprietor ensures that the teaching at the school–
  - 3(c) involves well planned lessons and effective teaching methods, activities and management of class time;
  - 3(g) demonstrates that a framework is in place to assess pupils' work regularly and thoroughly and use information from that assessment to plan teaching so that pupils can progress.

#### **Part 3. Welfare, health and safety of pupils**

- 7 The standard in this paragraph is met if the proprietor ensures that–
  - 7(a) arrangements are made to safeguard and promote the welfare of pupils at the school.

#### **Part 6. Provision of information**

- 32(1) The standard about the provision of information by the school is met if the proprietor ensures that–
  - 32(1)(b) the information specified in sub-paragraph (3) is made available to parents of pupils and parents of prospective pupils and, on request, to the Chief Inspector, the Secretary of State or an independent inspectorate.
  - 32(1)(c) particulars for the arrangements for meeting the standard contained in paragraph 7 are published on the school's internet website or, where no such website exists, are provided to parents on request.
- 32(3) The information specified in this sub-paragraph is–
  - 32(3)(c) particulars of the policy referred to in paragraph 2.

## **Part 8. Quality of leadership in and management of schools**

- 34(1) The standard about the quality of leadership and management is met if the proprietor ensures that persons with leadership and management responsibilities at the school—
  - 34(1)(a) demonstrate good skills and knowledge appropriate to their role so that the independent school standards are met consistently;
  - 34(1)(b) fulfil their responsibilities effectively so that the independent school standards are met consistently; and
  - 34(1)(c) actively promote the well-being of pupils.

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