

Autism Accreditation Assessment

West Kirby Residential School

Reference No.	433
Assessment dates	3 rd -5 th December 2019
Lead Assessor	Jonny Knowles
External Moderator	Chris Hoyle
Status prior to the assessment	Accredited
Advanced status applied for	No

Section 1: Context

About the Provision

Brief description of the provision made for autistic people:

"West Kirby Residential school is a non-maintained Special School and College. The school is in a small seaside town, with access to a wide range of cultural and leisure activities in Wirral, North Wales and Liverpool. The school caters for a complex range of needs that significantly impact on the learning of young people including SEMH, Autistic Spectrum Disorder, ADHD, and other individualised needs."

"The school has a large Clinical Support Team which includes a Pastoral Care Team, Speech and Language Therapists, Occupational Therapists, a Psychologist, Learning Mentors and Reading supports. All therapy and supports are fully integrated within the school to provide individualised support."

"A holistic and individualised approach underpins our ethos. Our curriculum and class groups are tailored to social communication, academic learning, and emotional support, depending on the needs of our young people"

The school has Residential provision for 6 young people, aged 5 – 19, in two community houses.

Number of autistic people supported by the provision:

The service currently support 83 young people, 70 with an autism diagnosis

Cohort of autistic people supported by the provision:

- All pupils are verbal
- Pupils have a range of diagnoses, often co-occurring, and a range of complex social, emotional and learning needs.
- 62 are boys
- 8 are girls
- All pupils have an EHCP (or Statement of Education Needs if from a Wales LEA)

Outcome of last statutory assessment (Body; date, outcome):

The school was last inspected by Ofsted in February 2016 and was found to be Outstanding.

The Residential service was last inspected by Ofsted in February 2019 and was found to be good.

About the Assessment

The assessment took place over 3 days.

The service's adviser assumed the role of lead assessor with support from an external moderator on the first two days of the assessment.

A tour was delivered by the service's assistant head teacher and discussion held on how provision is made for autistic pupils.

35 sessions were observed by the assessment team over a total of 12 hours. Sessions observed included Morning Briefing, Breakfast Club, Registration, Form Time, English, Maths, Careers, Lunch, Playtime, Graphics, History, Geography, Topic, Chinese, Transition, Art, Enterprise, Debating Club, Music, Drama, Dojo Group, DofE and Music.

Discussions were held with a number of staff members, autistic people and the families of autistic people during the assessment. Staff interviewed included SALTs, Safeguarding Team, Quality of Education Lead, Care Team, SENCO, Duke of Edinburgh Lead, Behaviour Attitudes Team, OT, Post 16 Lead and Transitions Lead.

10 family members spoke with the assessment team during a parent information session hosted by the service. The assessment team also meet with 4 members of the school council and a large number of students informally throughout the assessment.

Policy and procedure documents relevant to the provision for autistic people were reviewed, in particular; Transition Documents, Training Documents, Induction Checklist, Behaviour Policy, Autism Policy, SALT Policy, OT Policy, Transition Policy.

Personal files were sampled from across the service, these included Individual Education Plans (IEPs), Individual Support Plans (ISPs), Clinical Profiles, Pupil Communication Profiles, One Page Profiles, Positive Handling Plans and debrief forms.

The results of surveys carried out with the families of autistic people were also considered and are found in the appendix to this report.

Section 2: Key Findings

What the provision does particularly well

What stood out as particular strengths:

Throughout observations the quality of the relationships between staff and students was clear to see. Staff and students have positive relationships and the school has a nurturing and supportive feel.

The high levels of clinical support and interventions, across both care and education, optimise student learning and engagement. Staff are encouraged and supported by SLT and the clinical team to be intuitive and reflective practitioners.

Care and Education work collaboratively and maintain close links, which enables consistency of practice between the home and school.

The detailed and user friendly Clinical profiles support staff to understand the students' needs and identify key strategies.

What else the provision does well:

The well-being and life skills adventures activities, which happen every Friday afternoon, provides an opportunity for students to celebrate success whilst participating in a range of community based creative and engaging activities.

Lunch time in the dining hall is a positive social experience which facilitates opportunities for students to interact with their peers and staff. Staff act as social referees and model and reinforce appropriate social behaviour. Differentiated supports (Placemats) are used at lunch by some students to reinforce social rules and individual targets.

Engaging, motivating and interactive lessons challenge students academically. The school's curriculum, which has been developed around the students, is enriching and diverse. Staff work proactively to incorporate student's interests to motivate them in activities.

The schools reward system "Going for Gold" is clearly motivating for students who work towards individualised rewards.

Staff's level of understanding of autism really shows itself in the differentiated resources which have been developed to support students to independently access the Duke of Edinburgh programme.

Staff in the zone work proactively to provide additional support and nurture to those students who are not yet ready to enter a formal learning environment

Staff take advantage of the location of the school and homes to provide a wide variety of opportunities for community engagement.

The enterprise activities, which run across school, give students the opportunity to work collaboratively towards a shared goal.



Staff have a good knowledge of the sensory needs of the students and work collaboratively with the OTs to identify creative activities to be incorporated into their daily plan/diet.

The staff have forged positive and purposeful relationships with parents who all spoke very highly of staff, the school and the processes in place. The weekly training/workshops sessions hosted at the school are “informative”, “interesting” and give parents the “opportunity to meet parents in similar situations”.

The psychologist, who recently joined the school, has had a positive impact on practice by working closely with staff and parents.

What the provision could develop further

Priorities for the provision:

The school should work to embed zones of regulation into practice across the service and into the planning and delivery of lessons. The clinical team should reflect on the zones toolkits and consider incorporating them into the one page profiles so that students have ownership of their own programme and supports.

Other areas to consider:

Staff should reflect on the purpose of the visual supports in place and ensure that they reflect, and are appropriate to, the current lesson/task. Continue to upskill staff in the principles and application of the daily schedule and consider differentiating the approach for some students.

Reflect on the ISPs (Individual Support Plans) and consider incorporating proactive strategies, referenced in the one page profiles and clinical profiles, within the ISP.

The service aim to develop greater community links, active involvement and presence in the local community.

The service aim to continue to support students to develop individualised strategies which promote independence and resilience in the classroom, residentially and beyond

When decorating/renovating the school consider introducing consistent signage across the school to support students when transitioning.

Review the policies to ensure that there is a consistency in the language and in the use of terms.

Section 3: Professional Development

Main approaches or methods employed by the provision in supporting autistic people

The school highlight their main approaches as;

- "Autism friendly teaching methods including:
 - Simplifying language and language processing
 - Questioning skills
 - Use of visuals and ICT symbol support systems
 - Use of processing time
 - Sensory interventions in the learning environment
- Differentiation and engagement through child-led interests and motivators
- High staff pupils ratio – maximum 8 pupils per class plus 1 Teaching Assistant
- Awareness of the impact of anxiety in Autistic children and young people; how this impacts learning and functioning Awareness of anxiety and impact of distressed behaviour; through PRICE, de-escalation and the pupil debrief process."

Training staff receive in these approaches and in understanding autism as part of their induction

There is a robust 6 week induction programme at the service which includes-

- Information about policies and procedures
- Sessions in simplified language, communication, questioning and autism awareness, delivered by members of the Clinical Team
- 5 online NAS training modules

Each new staff member is given an induction file which is used to collect the key information during their induction. This also includes information about the structure of a lessons, autism information and other information to support staff to provide consistent support.

One staff member, who joined the school in September, met with a member of the assessment team. The staff member stated that they felt "well supported" and "felt like they could talk to anyone".

On-going support and professional development available to staff in working with autistic individuals

The whole staff team, both education and care, attend weekly training on a range of whole service approaches. Education staff also attend additional weekly training. Training is delivered by experienced internal staff and members of the clinical team. All staff also receive "high levels of staff training including AET 'Making Sense of Autism', 'Good Autism Practice' and 'Complex Needs'.

The appraisal process is facilitated by members of SLT who also assign roles to middle leaders. Staff meet with their line manager twice each year to identify and track progress towards their identified targets, There is a whole school appraisal target based on areas of the School Development Plan. The current target is a focus on developing the independence of students.

"Blue Sky education", an online programme, is used to set appraisal targets and review progress. All staff have access to the programme and can upload evidence and track their progress towards their appraisal targets. The online programme also tracks each staff members CPD and identifies any missing mandatory training/refreshers.

Section 4: Person Centred Support

Brief description of how individual support is planned, implemented and evaluated:

Transitions into the service are individualised based on students' needs. On joining the service students are enrolled into a 10 week induction period. During the induction period the Clinical team collect evidence and complete a range of assessments so that they can create a Clinical Profile. The service have a large Clinical Support Team which includes 4 Speech and Language Therapists (SALT), 2 Occupational Therapists (OT), and a Clinical Psychologist.

The Clinical Support Team complete a range of formal and informal assessments, clinical profiles, and deliver whole class and specific group or 1:1 interventions. All therapist have a caseload and each class has an OT and SALT who is assigned to the class. The Clinical Team also support staff in their IEP target setting and their delivery of lessons.

Each Student has a Clinical profile which is developed collaboratively by members of the Clinical Support Team. The document collates information from formal assessments, informal assessments and observations and highlights students' key areas of need and key strategies in a user friendly, easily accessible, RAG rated format. The profiles aim to share specific strategies and not just good autism practice.

Students' IEP targets are based around the 4 key EHCP outcomes. Cognition and learning and Social Emotional Mental Health targets are assigned by class based staff. The school have introduced PIVATS (Performance Indicators for Valued Assessment and Targeted Learning) as a tool to track social, emotional and mental health progress. Communication and interaction targets are set and reviewed in collaboration with the class's SALT and sensory targets are tracked and reviewed in collaboration with the OT. The school's "SCALES progress matrix" is used by Clinical staff to set progressive and evidence based targets in communication and sensory.

Staff within the homes use the AET framework to track and record a range of targets which relate to young peoples' EHCP outcomes. Young people are baselined on joining the service with input from staff, family/carers and the young person. Keyworkers meet with the young people regularly to evaluate the progress towards their identified targets and young people are given ownership of their targets.

Members of the Clinical Support Team regularly conduct observations across school and the homes to ensure that practice is consistent across the whole service. Staff within the home use an autism specific checklist to support them to reflect on their practice and identify areas of further development.

Behaviour watch is used across the service to track, record and monitor incidents and behaviour. SLT share important information from behaviour watch with all staff during the daily morning briefing, which was attended by the assessment team.

Academic progress is tracked by staff throughout the year. The school also use the GL assessment to track and monitor students' progress in Maths and English. Classroom monitor is used by staff to track academic progress across all subjects and teaching staff meet regularly with members of SLT to discuss and reflect on progress. All processes across the school are quality assured to ensure consistency.

Differences in Social Communication

Key outcomes identified from personal support documents and staff discussions:

As part of a student's induction to the service the SALT completes a range of formal and informal assessments to understand students receptive, expressive and language memory. Staff also assess the questioning level of each student.

Weekly SALT sessions are based on weekly communication targets. Sessions are planned around the needs of the students and include elements of social communication, emotional literacy, and topic based subjects like passive aggressive assertive behaviour.

There is a rolling programme of assessment which allows the SALT to track and review progress, and plan and support both direct and indirect interventions. SALT deliver specific group and individual sessions based around the needs/ targets of each young person.

The SALT host a weekly meeting with the care staff to reflect on practice, share strategies and develop resources. SALT have provided "invaluable support" to the staff and support them to "develop greater understanding of communication needs". The SALT provides extensive supports so that students can access the Duke of Edinburgh programme. Staff are "receptive and reflective staff members" who request support and seek out the SALT to reflect on their own practice.

Information about each student's communication strategies is found on their Clinical Profile. This includes strategies to support students' expressive and receptive language, as well as their questioning level. All students also have a communication target on their IEP, which is tracked and reviewed by a SALT.

Key outcomes identified from observation/review of key activities:

Within all observations, in the home and in school, staff communicated verbally with the young people. Staff were seen to differentiate and simplify their language to meet the needs of the young people. Staff were clear in their communication and in all but two observations in school staff allowed students appropriate processing time before offering prompts or scaffolding.

Within all observations in the school and home young people were seen to communicate verbally with staff. Staff supported students to communicate in some observations with visual supports/prompts.

Throughout observations students were provided with opportunities to interact with their peers and members of staff. Best practice was observed within the lunch hall where staff joined students for lunch. Staff modelled appropriate behaviours, facilitated interactions between students and provided opportunities for students to practise and develop social skills, based on their communication targets.

Problem Solving and Self-reliance

Key outcomes identified from personal support documents and staff discussions:

Life skills are a focus of ASDAN lessons. ASDAN lessons are adapted to meet the student's needs and independence targets. The enterprise activities, which run across school, give students the opportunity to work collaboratively towards a shared goal. The money raised is kept by the classes meaning that they can buy resources or snack food throughout the year for the class. One class, who raised over £400 from £30, redecorated and developed their kitchen area using the money.

Care staff aim to provide opportunity and purpose for young people to practise life skills through carefully planned activities. One young person independently travels to school whilst others are supported in their journey. The residential team meet weekly with members of SLT and the therapy team to collaboratively develop practice and resources to support the young people to communicate and be independent in the home. Care staff track progress in independent living using the AET framework. Keyworkers meet to set 6 weekly targets with the young people so that they have ownership of the process.

The location of both the home and the school provides various opportunities for students to practise and develop life skills. During the assessment students were independently visiting shops in the local community to shop for their class and home.

Young peoples' independence levels are tracked using the clinical profiles and the AET framework. Within school the one page profiles highlight the support which each young person feels they might need.

Key outcomes identified from observation/review of key activities:

During all observations young people could understand what was happening now and next through the use of visual timetables, individual timetables, task schedules and checklists. Within the home there is a written activity schedule on a display which is developed by the young people during Monday house meetings and keyworker sessions.

Where best practice was observed, in Maths, TED, Graphics, Art and History, staff broke down the tasks using individual task schedules, checklists and lists, which were differentiated to meet the needs of the students. Where practice could be further developed, in a small number of observations, staff should reflect on the purpose of the visual supports in place and ensure that they reflect, and are appropriate to, the current lesson/task. Staff could also consider differentiating the large visual displays in some classes so that they incorporate change and are more appropriate to the students' level of understanding.

Within lessons staff were seen to provide opportunities for students to do things independently. Where best practice was observed, in maths, differentiated individual checklists supported students to access the lesson independently. Classrooms have a clear visual structure which supports students to independently navigate the classroom and collect resources. Within the home young people have a good understanding of their own needs and have developed individualised systems to support them to be independent. All young people have different morning routines which they independently managed with little to no prompts from staff.

Within all observations students appeared confident and skilled in making decisions and expressing their opinion. Where best practice was observed, in life skills and debate club, students were given the opportunity to predict and express their opinions. TED lessons (Technology Engineering and Design) also provided various opportunities for students to explore designs and learn through mistakes.

Sensory Experiences

Key outcomes identified from personal support documents and staff discussions:

During students' induction into the service the OTs screen students to build a picture of their sensory needs based on observations and discussions with students, their family's and staff. From this initial screening the OTs identify any areas of need or areas for further assessment. This information gathered through discussions, assessments and observations informs the clinical profile.

The OTs plan and deliver interventions within the SI (Sensory Integration) suite. The OT works with students if Sensory Integration is identified on their EHCP plan or if they have been identified through the baseline assessment. SI input is tracked by the OT using "OT specific Goals". The OTs work closely with class teams to model strategies and approaches so that class based staff can take the lead on the delivery of interventions or sensory diets. Each class has an OT assigned to them who meets weekly with class team to plan sessions, discuss areas of need and review/set IEP targets.

The OTs have planned and delivered a 6 week programme within the PE lessons based on sensory circuits. This provides an additional opportunity for the OTs to identify any areas of need or potential self-regulation strategies. A 16 week zones of regulation programme is delivered by the OTs which supports students to identify self-regulation strategies. The OTs regularly review behaviour watch which allows them to highlight any potential patterns in behaviour or sensory seeking/avoiding behaviours.

Students' sensory needs are shared with staff on their clinical profile. The profiles highlight key areas of need and include proactive and reactive sensory strategies.

Key outcomes identified from observation/review of key activities:

Within all lessons and in the home young people have access to a wide range of sensory activities. During one observation in school one student discussed his self-regulation strategies with the assessment team and linked them to the zones of regulation.

Within lessons students had access to individual work stations, calming/chill out areas and a range of sensory tools/fidgets. The school have a well-resourced sensory integration room, inside gym and outside gym. These were all seen to be use by students during the assessment for proactive and reactive regulation sessions.

The homes are low arousal and homely. Careful considerations were made by staff when decorating the house to ensure that it is a positive environment. During observations in the home care staff were aware of the acute sensory needs of the young people and considerations were made to the temperature, lighting and clothing. The decoration in each young person's room was chosen by them to match their sensory needs.

Emotional Well-being

Key outcomes identified from personal support documents and staff discussions:

"Consistent strategies and approaches are implemented across school and home. These include;

- Zones of regulation
- Energy Accounting
- Emotion Wellbeing Thermometers
- Clear structure and routine with differentiated daily activity plans."

The schools reward system involves young people being graded at the end of each lesson and at various times during the evening when in the home. Young people can achieve one of 5 colours to earn money towards a reward of their choice. This is displayed to students in school on a variety of different displays and students have the option to save or spend the money each week. As a weekly reward all students have the opportunity to participate in "well-being and life skills adventures". The staff have reflected on the activities to ensure that they promote a healthy lifestyle.

Behaviour watch is used across the service to track and record incidents in behaviour. The system is regularly reviewed by care, education and clinical staff so that they can identify patterns in behaviours. Each student has an ISP (Individual Support Plan) which shares reactive strategies, likes and dislikes. The school should reflect on the ISPs (Individual Support Plans) and consider incorporating proactive strategies, referenced in the one page profiles and clinical profiles, within the ISP.

The residential staff have worked closely with the therapy team to develop differentiated debrief forms which incorporate elements of the zones of regulation.

Students' likes/dislikes are shared with staff on their one page profile, which students take ownership of. Clinical profiles and IEP's highlight to staff students individualised targets and strategies to support them in their social, emotional and mental health.

Key outcomes identified from observation/review of key activities:

There are positive relationships across the service between staff and the young people. The school has a positive, supportive and nurturing feel. Within the home care staff clearly understand the needs of the young people and were seen to offer differentiated support during their morning and evening routine/activities. The rewards system "Going for Gold", which is used across school and the home, is clearly motivating for the students, who have the opportunity to work towards individualised rewards.

Within school, lessons were seen to be engaging, motivating and interactive. Students are challenged by a creative, unique and individualised curriculum, which includes lessons in Chinese, Science, Technology, Engineering and Mechanics (STEM), and horticulture.

Within all observations staff worked proactively at the first signs of dysregulation to provide timely support to the young people. Staff are clearly aware of the triggers and challenges for the young people and differentiated their approach to each young person.

The zones of regulation was displayed in each classroom and in the home. Although this was prominent and consistent in each classroom there were missed opportunities for this to be reference by staff. The clinical team should continue to work with staff to embed the zones of regulation programme into practice across school and into the planning and delivery of lessons. The clinical team could also reflect on the zones toolkits and consider incorporating them into the one page profiles so that young people have ownership of their own programmes.

Section 5: Person Centred Support With Autistic People

The school are an official partner of "Neuro Diversity week" which aims to celebrate difference. During the week the school organised a range of speakers to come into school to speak to students about a range of disabilities including Autism and ADHD. The school displayed umbrellas outside of school, designed by students, to highlight Neuro Diversity week. Umbrellas were also displayed in Liverpool City Centre which were designed by students at the school.

Within the homes young peoples' voice is gathered through weekly house meetings and formal and informal keyworker sessions. Keyworkers are match to the students to ensure that there is a positive and productive relationship.

The assessment team informally spoke to a number of students at school and within the home. Four members of the "Pupil voice group", who meet each half term, met with the assessment team to discuss all aspects of the school. The "pupil voice group" have a Chair, Vice Chair, Treasurer and Secretary who are given a budget of £600 each year. All students in the school have the opportunity to be a candidate for the "Pupil Voice Group". The school voice secretary develops an agenda after visiting all of the classes in school to gather all students' thoughts and feelings. In the past students have introduced water fountains, changed the school badge, developed more lunch time clubs, reflected on Friday reward trips, been part of the development of the going for gold rewards, and been part of re-writing the school rules.

The group are currently working on a Christmas Market, introducing a new school stage and increasing the activities available in the sports hall. The group are also identifying an autism friendly colour scheme for the school and developing a consistent whole school approach to recycling.

Students said that "The school is good at dealing with the amount of high functioning and hyperactive students". Teachers are "friendly and approachable", "nice" and staff "support students when they are finding it difficulty" and "are autistic friendly". Staff are also "positive role models because some staff have similar difficulties".

During transitions students stated that the PCT (Pastoral Care team) are there for support and offer "rest bite". Staff are there to support students by offering 1:1 sessions and "work out what is best for everyone, they don't just herd you together". The students stated that staff "listen to their needs and ideas" for developments. The students want to look at the "school house system as not all students understand it".

With families of Autistic People

The school have adapted the formal parent training so that it includes more opportunities for socialisation between parents. Staff attend the sessions to provide parents with advice and support as an individual or a whole group.

The school have recently appointed a psychologist who has been delivering a 5 week block of workshops for parents on Autism, ADHD, Attachment, Emotional Regulation, and Self-harm. Parents stated that this training was "informative" and "interesting" and "help me to understand my child".

During the assessment the assessment team attended a parent meeting with 10 parents. Parents highlighted the groups as a "positive experience" for parents as it gives them the "chance to meet other parents" when they have previously felt "isolated". Parents have used these groups to "develop friendships" and "arrange meetings outside of school".

Parents within the meeting highlighted the communication between home and school as "outstanding". Parents also commented on the weekly email from staff which keeps them informed of progress, successes and challenges. One parent stated that "the support from the school is second to none" and one other parent stated that "staff are always available to offer support and advice".

Parents stated that their child's transition into the service was a "positive experience during an anxious time". "The school understood my child's needs and put in place a gradual transition".

9 (12%) of family members provided feedback to the assessment team by returning completed questionnaires. The full results are shown as an appendix to this report. 9 family members (100%) stated that the support their relative is given is always or mostly good. 9 family members (100%) stated that staff's understanding is mostly or always good and 9 family members (100%) stated that advice given by the school and the way that they are kept informed was good or always good. 5 family members chose to leave a comment on the questionnaire, a selection of which are found below:

"Staff have a high knowledge of autism and how it impacts on young people and are able to support them to progress"

"My child has grown and learnt new ways to cope with his issues in a very positive way since coming to this school. Very positive environment for child to develop."

"Always willing to listen and support both from parent and pupil perspective. Very much support pupils to achieve their best potential."

APPENDIX 1: SURVEYS

West Kirby Residential School FAP 18/11/2019

Feedback questionnaire on West Kirby Residential School to be completed before 18/11/2019

The support my relative is given is...				
			Response Percent	Response Total
1	poor		0.00%	0
2	ok, but could be better		0.00%	0
3	mostly good		0.00%	0
4	always good		100.00%	9
			answered	9
			skipped	0

The understanding that staff have for my relative's autistic needs is...				
			Response Percent	Response Total
1	poor		0.00%	0
2	ok, but could be better		0.00%	0
3	mostly good		0.00%	0
4	always good		100.00%	9
			answered	9
			skipped	0



The way I am kept informed and asked my views about how my relative is supported is...

		Response Percent	Response Total
1	poor	0.00%	0
2	ok, but could be better	0.00%	0
3	mostly good	11.11%	1
4	always good	88.89%	8
		answered	9
		skipped	0

The advice I get from the service on how to help my relative is...

		Response Percent	Response Total
1	poor	0.00%	0
2	ok, but could be better	0.00%	0
3	mostly good	0.00%	0
4	always good	100.00%	9
		answered	9
		skipped	0

Comments: Please note you are not required to comment below, if you do so they may be quoted in the final report. Our questionnaires are anonymous and Autism Accreditation cannot be held responsible for comments which identify any individual. (5)

1	17/10/2019 16:50 PM ID: 129257733	Excellent help and support,my son is so much better in this school.
2	17/10/2019 16:55 PM ID: 129258153	Staff have a high knowledge of autism and how it impacts on young people and are able to support them to progress
3	17/10/2019 17:26 PM ID: 129260522	I really couldn't be more pleased with the help and support my son has received



The advice I get from the service on how to help my relative is...			Response Percent	Response Total
4	17/10/2019 17:38 PM ID: 129261575	My child has grown and learnt new ways to cope with his issues in a very positive way since coming to this school. Very positive environment for child to develop.		
5	17/10/2019 17:50 PM ID: 129262598	Always willing to listen and support both from parent and pupil perspective. Very much support pupils to achieve their best potential.		

APPENDIX 2: COMMENTS FROM THE PROVISION

