



The Scottish  
Commission  
For the  
Regulation of  
Care

# Inspection Report

Standard Inspection 2004/05

Service Name Ochil Tower School

Service Type School Care Accommodation Service

Title of Applicable Standards School Care Accommodation Services

Service Provider The Management Council of Ochil Tower School

Location Central East

Date of Original Registration 22 October 1998

Date(s) of Inspection 24 January 2005

Period since most recent Inspection 26 August 2004

Type of Inspection Announced

Care Commission local office Central East

*Changing the Culture of Care in Scotland*

## INTRODUCTION

Ochil Tower is an independent, non-denominational school registered to provide 28 residential places for children and young people, aged between 5 and 18 years, with special educational needs; 40 pupils (four part-time) were on the school roll, 25 of these residential, at the time of the inspection. The school is also registered with the Scottish Executive and in February 2004 Ochil Tower was part of the programme of integrated inspections of special residential schools being undertaken jointly by HMIE and the Care Commission during 2003-4.

The 'curative education' approach, which combines social care, education and therapy, is based on the philosophy of Rudolf Steiner, adapted by Kari Konig, the founder of the Camphill movement, and is practised in a network of schools world-wide. Day to day management is the responsibility of 4 Joint Co-ordinators, who, together with other experienced and permanent co-workers whose home is the school, form the Core Group Members, with provision of care and education shared with a large number of other co-workers, many of whom come from other countries to spend a year or more at Ochil Tower. There is also a small number of paid staff, mostly ancillary workers.

There are five houses and two school buildings set in the grounds of the school which is located unobtrusively off the main street of Auchterarder, 14 miles west of Perth, enabling the school to be part of the local community, while also providing facilities for gardening and animal husbandry as well as for play activities, as part of the curriculum.

## BASIS OF REPORT

This report was written following an announced visit, which took place on 25-6 January 2005.

The inspection focused on further work undertaken by the school in respect of the main points for action identified in the inspection of February 2004, in particular the requirements relating to sections of The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002. Statutory Instrument 114; and inspection of five further standards from the School Care Accommodation National Care Standards:

Keeping in touch with people who are important to you; Exercising your rights; Keeping well - Lifestyle; Concerns, comments and complaints; and Advocacy.

This report was based on:

- Observations made during the inspection of 25-6 January 2005.
- Discussions with co-workers on duty, with individual interviews with six houseparents, including three joint coordinators.
- Informal discussion with individual children and general conversation with others.
- Examination of documentation

## **ACTION TAKEN ON REQUIREMENTS IN THE LAST INSPECTION REPORT**

The school had produced a written action plan in relation to the integrated inspection report published on 7 July. Further to action already taken by the time of the follow-up inspection in August, the school had made progress in other areas:

- The school had written to Educational Psychologists to remind them of their statutory duty to up-date Records of Need, which could be updated at other statutory reviews.
- Programmes on sexual health for senior pupils were being reviewed and ones for younger pupils had been identified and were being implemented, with plans to give guidance to co-workers providing one-to-one input within the houses, where appropriate.
- The school continued to work productively with the local High School, Glebe Special School and Perth College, and to identify Access and Standard Grade courses suitable for individual pupils.
- Plans to monitor the quality of learning and teaching included 6-monthly visits of classes, for observation and checking of planning and recording.

## **COMMENTS ON SELF-EVALUATION**

The Self-evaluation had been satisfactorily completed with key strengths highlighted and some areas for development identified.

## **VIEWS OF SERVICE USERS**

Despite numbers of adults and pupils suffering from a combination of flu and other infections, school and community life continued to run smoothly and purposefully. With increasing demand for places at the school, it was able to choose those for whose needs it was best suited, while being conscious that the options for school-leavers were far too limited. Pupils showed clear signs of ongoing progress, were enthusiastic about life and indicated by their words or actions that they felt happy to be part of the school. This impression was ratified by the 8 responses to the Care Commission questionnaires.

## **VIEWS OF CARERS**

Non

## National Care Standards

### 2 School Care Accommodation Services - Keeping in Touch with People who are important to You

*You can freely contact your family, and the school or hostel services makes good arrangements for parents or others responsible for your care to visit you.*

#### Strengths:

Only one pupil was accommodated on a 52 week basis, all others returning home to parents, family or other carers for weekends and school holidays, although some spent alternate weekends at Ochil Tower. As pupils generally used taxis for transport, most parents' face to face contact with the school - teachers, houseparents and keyworkers - was at statutory reviews, when progress reports were issued (in addition to the annual school report). However, co-workers had established regular telephone contact with parents, on at least a weekly basis, to report on their child's welfare and any significant issues; this contact assisted continuity of care routines and also provided mutual support for all parties. In some cases, they helpfully backed this up with a home-school diary. Co-workers also encouraged and facilitated parents and pupils to phone each other, wherever possible, sometimes using fax, texting and e-mails. The school's monthly newsletter, produced by the pupils, used digital photography very effectively to convey the life of the school, and for individuals a photo diary gave parents a reassuring snapshot of how their child was spending his/her time, especially during the anxious settling-in period.

At the initial enquiry stage parents received both a very comprehensive Information Book and also the Children's Handbook, appropriately designed to answer common questions triggered by change to the unknown. Later, parents' completion the admission form, including the risk assessment, gave co-workers a valuable understanding of the child's interests, abilities and needs as a starting point for an ongoing dialogue during the placement. In addition, the school imaginatively planned the pre-admission stage to include as many visits as, and in whatever format, the child needed, so all parties felt confident about the placement's suitability. These informal arrangements were continued through invitations to end of term festivals, often celebrated by a school play, and to the annual family fun day, with games and a barbecue, which helped to strengthen relationships, as well as give parents an insight into the child's place in the school.

Co-workers had a good understanding of children's need to have appropriate contact with family, even when they did not live with them and issues were complex, and proactively undertook to listen to children's expressed wishes and to pursue suitable contact arrangements. The school valued the role of parents in working in partnership in order that the child settle and engage fully with Ochil

Tower, without any conflict of loyalty or attempts to sabotage the placement by either party. Additionally, staff sought to strengthen parental roles by providing discrete contact time in the homely environment of the houses, where adult support was at hand and a range of play and other resources were available. All the staff were knowledgeable about issues of separation and loss, so they were able to help children and families understand and manage any difficulties arising. The school's thoughtful arrangements for the child for whom Ochil Tower was a home, included a warm, trusting and enduring relationship with one key person, whose own network had introduced a wide range of alternative enriching experiences in terms of promoting social confidence and emotional security.

**Areas of Development:** The school hopes to develop its contact between parents and co-workers, especially where families continue to face difficulties at home in relation to managing behaviour. It also continues to review its policies and documentation, such as the Children's Handbook.

## 9 School Care Accommodation Services - Exercising Your Rights

*You know about your rights and responsibilities. You can make choices within limits that are suited to your age. Staff support you in making decisions.*

**Strengths:** As part of a Camphill community, pupils and co-workers 'live, lean and work with others in healthy social relationships based on mutual care and respect'. This principle of mutuality was determined by respect for each other's rights and responsibilities, although there was no strong Rights agenda in people's language nor specific discussion about Rights, but rather a generous sprinkling of references to specific values underpinning those rights, such as privacy and choice, in the course of day to day living. Significantly, all new co-workers were reminded of the United Nations Convention on the Rights of the Child during their induction in childcare legislation, while an older pupils' class project on the new Scottish Parliament, had illustrated the need to campaign, by pupils canvassing in their own election, meaningfully giving them a legitimate voice to express their views. Some pupils assisted co-workers in writing their daily record, so influencing both the content and the tone and therefore exercising some control over this aspect of their lives. Co-workers properly supported pupils in recognising their rights, such as making decisions about medical and dental treatment, in line with legislation and their own capacity, while also being aware of professional responsibilities in areas such as child protection, where confidentiality cannot be assured.

Adults conveyed the essence of what children should expect by acting as role models, such as meeting the children's physical needs for a healthy diet, good medical care and stimulating educational and leisure experiences, but also by listening to pupils and seeking

their views, being accessible and approachable, yet respecting the need for personal space. With regard to choice, co-workers adapted their approach along a continuum according to the needs of the individual, ranging from facilitating one pupil's ambition to fly to Alton Towers by himself resourcing the means, to giving a pupil two 'good' choices, to outlining the positive and negative consequences of two choices and allowing pupils to learn from their own good judgement or mistakes. For some, choices were more simple, such as selecting one food over another. Co-workers were both pragmatic and sensitive. For instance, where a bathroom could not safely be locked, the responsible use of a green/red sign simply and discreetly addressed the issue of privacy for the whole household. Young people were clear about the range of consequences for misbehavior, such as time out or forfeiting a special activity, but were confident they would not be deprived of basic rights such as contact with their family.

Pupils had a wide range of choices in respect of leisure activities, indoor / outdoor / off-site, individual / group, supervised / unaccompanied. Here co-workers sought a balance between supporting pupils to become more independent so as to exercise more choice - such as using a step by step approach to frequenting local shops, library and video rental store, - and guiding pupils into activities which would also be both safe and nurturing. For instance, developing an interest in sport more effectively facilitated social contacts with peers than relying on a passion for a Disney cartoon character. Likewise, co-workers were vigilant in monitoring pursuits which over-stimulated pupils, such as one child's obsession with a certain TV soap, or stressful compulsive behavioral traits where intervention was required.

Community living and the absence of paid staff for most domestic chores ensured that all co-workers participated in daily tasks around the houses, with children and young people gradually assuming their share, starting with keeping their bedroom tidy and then taking on more responsibility in line with their age and ability, both within the home and outdoors. The curricular focus on cooking, gardening, animal husbandry and crafts reinforced the value placed on competence in these areas. Indeed, through risk assessments and safeguards, the school was able to offer wider opportunities for acquiring skills in certain traditionally risky areas than pupils with learning disabilities might experience elsewhere. Other than caring for farm animals and pets, there was no pressure to take responsibility for others less able, but rather the school aimed to engender a concern and tolerance for the particular needs of others, raising awareness through example, explanation and experience. Sometimes this resulted in a spontaneous commitment to help, as with the generation of ideas to help in response to the tsunami disaster, when highlighted at morning assembly.

**Areas of Development:      None**

*The school or hostel promotes a healthy lifestyle. You are confident that the staff will know your healthcare needs and arrange to meet them in a way that is best for you.*

**Strengths:**

The school continued to develop its personal and social education programmes across care and education, including the area of healthy living and sex education; co-workers attended to diet, exercise and personal hygiene as part of daily routines in community life, especially due to the varying dependency needs of pupils. The extensive grounds, with an attractive adventure play area, kitchen gardens, football pitch and other facilities, offered good opportunities for fresh air, gentle walking or more strenuous activity, while co-workers arranged regular outings for swimming, bowling, cycling, canoeing and hill-walking. The school recognised the advantages of regular exercise for those less mobile or energetic in terms of weight maintenance, mobility and mood enhancement, as well as enabling pupils to experience the sensory and spiritual effects of facing the elements in a British climate. The very few co-workers who smoked endeavoured to act as good role models, with no smoking within sight of children or visitors.

Most pupils were registered with the local GP and took advantage of the local school dental service which visited the school. The school collated a health history of the child, including immunisation, at admission, and worked closely with parents to ensure all medical and health needs were met promptly. All appointments and any times when the child felt unwell were noted in a sequential medical record. Many children had a range of conditions, such as eating, sleeping and bowel problems, eczema, epilepsy and asthma, as well as those especially associated with autism, such as obsessive behaviours, some constituting self-harm. The joint coordinator for health issues gave very good support to other co-workers and also liaised well with a range of professionals, often, like others, attending hospital appointments with parents and coordinating medication and other therapies. Although there had been a gap in the provision of input from a Camphill physician, the school actively pursued extra resources such as psychiatric consultation, physiotherapy, art therapy and speech and language therapy from specific authorities for individual children, with varying degrees of success. They particularly appreciated the one day a week provision of a speech and language therapist, not only for continuity of individual sessions for pupils but for the consultancy and training aspect contributing to the ongoing work of teachers and co-workers.

Other than house life and classroom education, the third aspect of curative education is therapy, to promote physical and mental health. In recent years this had been developed more fully by the

joint coordinator, qualified in various complementary therapies, in conjunction with the provision of a therapeutic base, complete with facilities for oil baths and massage, to assist diagnosis and programmes for individual pupils. These therapies were part of a number of strategies to help de-stress pupils, especially those suffering from self-harm, with resultant disabling secondary infection; these included handling Chinese medicine balls, the positive use of touch, one to one attention or distraction with other activity. Sometimes the school used specialist equipment to improve competence and therefore quality of life, as with the use of a toilet-chair to facilitate continence or a 'Theraplay' bike to help coordination.

Co-workers were generally responsive to pupils wishing to discuss any personal or health issues, using each other for consultation and support. Some had counselling qualifications and expertise. They were also aware of the impact of death and grief on some pupils and were able to give sensitive support and guidance.

**Areas of Development:** The school planned to develop a policy statement in respect of healthcare, to complement that on medication specifically.

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### School Care Accommodation Services - Concerns, Comments and Complaints

*The school or hostel welcomes your views so they can continuously improve the quality of services. Staff encourage you to give your views and suggestions whether positive or negative.*

**Strengths:**

The school's specific objectives relate to five inter-related aspects of human development and include various forms of expression, through one's presentation of self, movement, communicating with others, thinking, feeling and willing and, finally, the exercising of personal judgement and responsibility for the wider community. In this context, pupils were encouraged to communicate any concerns, whether directly, through their body language or demeanour or with the assistance of communication aids. All members of the community were receptive to any message, in order that it might be addressed as quickly, fairly and efficiently as possible at an appropriate level, by someone not involved in the issue. Serious complaints were referred to the Council of Management, responsible for monitoring records of all complaints, though in practice investigation was carried out by joint coordinators, in consultation with the core group of co-workers.

While there had been no formal complaints in recent years, the school had shared accounts of situations in which parents had expressed concerns about aspects of the service. The school worked very hard to resolve differences of opinion, especially when these related to misunderstandings caused by poor communication or underlying frustrations about other issues, and certainly kept the

ongoing welfare of the child uppermost. Where necessary, they took action to remedy the situation, but in all events were mindful to learn how to avoid a recurrence in the future. They also listened carefully to young people as well as reflecting on their own observations, as part of being a flexible responsive service; this had resulted in developments such as the move to single rooms, use of computers and some television and a variety of after-school activities.

**Areas of Development:** The school's complaints procedure included reference to the role of the Care Commission, as noted in the Children's Handbook, but the General Information book given to parents had not been updated accordingly. It is also suggested that the noticeboard in each house should advise children on the complaints procedures, the Care Commission and information about services such as Who Cares? Scotland and Children's Rights Officers. While all co-workers had access to Care Commission reports, which were posted on the school's own website, and few children would read them, they should be publicly accessible, perhaps in a folder in Belvidere, where parents and others meet.

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### School Care Accommodation Services - Advocacy

*You have access to other agencies and services who can support you in making your needs and preferences known. They can, with your permission, represent you and give your views.*

**Strengths:**

Co-workers viewed their role as advocate as a crucial part of their day to day responsibilities towards the pupils, such as during GP appointments, or in championing their right to give consent to routine medical or dental treatment despite their learning disability. This sometimes included severe communication problems, when co-workers had a key role in picking up and interpreting what a pupil might want to express. Facilitating communication was a two-way process during formal meetings, such as reviews, when procedures and language were not always user-friendly.

On occasion, the school had advocated for funding of additional services, as indicated above, while also speaking on behalf of the pupil to try to safeguard continuity of successful travelling arrangements, when threatened by annual compulsory competitive tendering. In recent years, the school has welcomed routine visits from Children's Rights Officers and also been proactive in inviting them to advocate formally and independently on behalf of a pupil, especially at the major stage of planning for future care when organisational decision-making is complex and frustrating.

**Areas of Development:** Again, this is another area where the school intends to develop a policy statement.

## ENFORCEMENT

None

## OTHER ISSUES

None

## RECOMMENDATIONS

A recommendation is a statement setting out proposed actions to be taken by the service provider aimed at improving the quality of service (based on good practice and professional judgement) but which would not be subject to enforcement action if not actioned.

None

## REQUIREMENTS

A requirement is a statement setting out an enforceable action required of a service provider in order that the service complies with current legislation, usually within a specific timescale.

**SSI 2002/114 Regulation 25.** The school should ensure that pupils and parents are made fully aware of the various avenues identified in its complaints procedure as suggested.

This report was written by Rachel Gillespie, Care Commission Officer, 31 January 2005