CITY OF PLYMOUTH

Subject: Transformation of the Plymouth Hospital School and Outreach

Centre

Committee: Cabinet

Date: 14 September 2010

Cabinet Member: Councillor Mrs Watkins

CMT Member: Director of Services for Children and Young People

Author: Jayne Gorton, School Organisation and Pupil Access Manager

Contact: Tel: (01752) (30) 7472

jayne.gorton@plymouth.gov.uk

Ref: MC.JEG (CAB) 93(01/07/10)

Part:

Executive Summary:

This report seeks Members' authorisation to hold formal consultations with all interested parties on a proposal to discontinue The Plymouth Hospital School and Outreach Centre with effect from 28 March 2011.

This report outlines the first stage of a plan to provide transformational change, in line with the Local Authority's plans for Alternative Complementary Education Provision (ACE) providing short stay provision for pupils to complement existing maintained provision for challenging and vulnerable children.

Corporate Plan 2010-2013:

The following Corporate Improvement Priorities (CIPs) apply:

CIP 4 - Reducing inequalities between communities

Providing inclusive educational opportunities for challenging, vulnerable and special needs pupils within the city.

CIP 7 - Keeping children Safe

The Authority will seek to ensure that safeguarding of children is at the heart of the proposal for the new service. Making buildings and schools safer places is a key objective of the *Investment for Children* strategy, in particular supporting antibullying and promoting multi agency spaces in schools.

CIP 8 - Improving skills and educational achievement

The proposal for the new service is focused on attainment and continued improvement.

CIP 14 – Providing better value for money

The new service takes into consideration the changing nature of the Council's role in school organisation and school status.

Implications for Medium Term Financial Plan and Resource Implications: Including finance, human, IT and land

The cost of the consultation will be met from an existing revenue budget within Services for Children and Young People. All pupils attending the school and outreach centre will be transferred to the new provision.

If The Plymouth Hospital School and Outreach Centre were to form part of the new ACE provision following this consultation, then the Dedicated Schools Grant funding The Plymouth Hospital School and Outreach Centre would continue to fund new ACE provision and all staff contracts will be transferred to the new provision.

As ACE is part of Central Expenditure of DSG, the transfer would breach the Central Expenditure Limit which requires approval by Schools Forum.

At this stage it has been assumed that the transfer is broadly cost neutral; when detailed costings of the new ACE provision are completed, any change in cost will also need Schools Forum approval.

Other Implications: e.g. Section 17 Community Safety, Health and Safety, Risk Management, Equalities Impact Assessment, etc.

None

Recommendations & Reasons for recommended action:

- 1. In order to commence statutory procedures to discontinue The Plymouth Hospital School and Outreach Centre, it is necessary to hold formal consultations with all interested parties. Therefore, it is *recommended* that the Director ofServices for Children and Young People be authorised to hold formal consultations with all interested parties on a proposal to discontinue Plymouth Hospital School with effect from 14 February 2011.
- 2. The second stage of statutory procedures requires the Council to consider all the outcomes of and responses to the formal consultation before deciding whether to publish formal proposals in a public notice to discontinue The Plymouth Hospital School and Outreach Centre. Therefore it is recommended that the Cabinet Member for Children and Young People, in the light of the outcomes of and responses to the formal consultation, be authorised to determine whether to publish formal proposals to discontinue the school.
- 3. If formal proposals are published, the third stage of statutory procedures requires the Council to consider all the outcomes of and responses to the public notice and determine whether to discontinue the School. Therefore, if a public notice is published, it is recommended that a further report be presented to the Cabinet Member for Children and Young People in due course for a final determination to be made as to whether to discontinue The Plymouth Hospital School and Outreach Centre.

Alternative options considered and reasons for recommended action:

Due to the nature of the Ofsted judgement – notice to improve, the school would be required to show evidence of improvement, if they were unable to show improvement this would

| trigger addition: | al actions on t | he part of Ofste | d and they car | n then require tl | he LA to cl | ose the |
|-------------------|-------------------|------------------|-----------------|-------------------|-------------|---------|
| school without t | the ability to tr | ansform the pro | vision into a s | ervice. | | |

Background papers:

Alternative Complementary Education Strategy - 2009

Sign off:

| Fin | RO/Ch S0299 /1.7.10 | Leg | DVS 1141. | HR | SJ 20.07. 10 | Corp Prop | | IT | | Strat Proc | |
|---|---------------------------|-----|--------------|----|--------------------|--------------|--|----|--|------------|--|
| Originating SMT Member: Colin Moore, Assistant Director for Lifelong Learning | | | | | | | | | | | |

1.0 Introduction

- 1.1 The Plymouth Hospital School and Outreach Centre has five different sites. It caters for pupils with medical, physical, psychological and emotional needs. Most pupils come from the city of Plymouth, although one of the sites caters for young people from the whole of the south-west peninsula. The large majority of pupils are of secondary school age with some pupils having a statement of special educational needs. Depending on the nature of the pupils' particular needs, a placement may be short-term or pupils may attend the school for a considerable amount of time.
- 1.2 The hospital school also manages the home tuition service for some pupils who are unable to attend school for medical reasons.
- 1.3 The school's longer-term provision for pupils aged 11 to 16 moved to temporary buildings two years ago and are waiting to move to new premises on a local secondary school's campus. The role of one of the units for pupils with mental health needs has recently been changed to form a community outreach team and another unit, for primary-aged pupils, is currently under review by the Plymouth Child and Adolescent Mental Health Service.
- 1.4 The hospital school was inspected on 4-5th March 2010 and was given a notice to improve. The school and the governors in conjunction with the LA have put in place an improvement plan to address the areas of action identified in the Ofsted report.
- 1.5 The LA has submitted and had accepted by Ofsted an action plan to support the school that outlines clear milestones for action. This plan covers the period to January 2011. A decision has been made to change the designation of the provision from school to a support service to be managed as part of the new ACE (Alternative Complimentary Education) Strategy. The LA will work with Governors to put together a transition plan to manage the transfer from school to support service designation should this proposal be approved.

Ofsted will re - visit the school 6 months from inspection, in practice this is likely to be October 2010, to check progress on the action plan. If the school is unable to show evidence of improvement this would trigger additional actions on the part of Ofsted and the LA. Ofsted can make a decision to close the school if it feels that the school is unable to address the actions in the plan within the required timescales (normally 12 months from inspection) and is not on a clear trajectory to improvement at the 6 month period.

2.0 Statutory Procedures

- 2.1 To close community special schools, local authorities are required by law to undertake statutory procedures involving formal consultations with all interested parties and the publication of formal proposals. Recent changes in the law, which have clarified the role of the local authority as the *commissioner* rather than the *provider* of school places, mean that, if statutory procedures to close a community school are embarked upon, it is the local authority itself that would take the final decision, rather than the Office of the Schools Adjudicator.
- 2.2 The first stage of statutory procedures normally 6 weeks is to hold detailed and formal consultations with all interested parties, including parents, staff, governors and trade unions, as well as all other schools in the City and other public agencies. There are detailed provisions in DFE guidance as to the prescribed information that must be made available to all consultees, which includes the details of the proposal, the impact of the proposal on students, staff, governors and the local community, and the alternative arrangements that would be made for the education of pupils following the implementation of the proposal.

- 2.3 Following completion of stage 1, the second stage prescribes that the local authority must give careful consideration to all the outcomes of and responses to the consultation and then decides in the light of those outcomes and responses whether to publish a formal proposal, in the form of a public notice, to close the school. The notice must be published for 6 weeks.
- 2.4 Following completion of stage 2, the third stage prescribes that the local authority must give careful consideration to all the outcomes of and responses to the public notice and then decide in the light of those outcomes and responses whether and when to discontinue the school in question.
- 2.5 The 4th and final stage is to implement the proposal. On the date that a school closes, all governors' terms of office will cease and all staff will be issued with new contracts as part of the new ACE service.