Report for an Additional Inspection

Sibford School

November 2020

School's details

School	Sibford School
DfE number	931/60005
Registered charity number	1068256
Address	Sibford School The Hill Sibford Ferris Banbury Oxfordshire OX15 5QL
Telephone number	01295 781200
Email address	office@sibfordschool.co.uk
Head	Mr Toby Spence
Chair of Governors	Mr Jonathan Lingham
Age range	3-18
Number of pupils on roll	429

	Day pupils	400	**Boarders**	29
	EYFS	7	**Juniors**	96
	Seniors	244	**Sixth Form**	82

Date of visit	4 November 2020

1. Introduction

Characteristics of the school

1.1 Sibford School is an independent co-educational day and boarding school, with a Quaker ethos. It is situated in a village not far from the outskirts of Banbury, Oxfordshire. Boarding provision is available from the age of 11 and an Early Years Foundation Stage (EYFS) setting is accommodated on the main school site. The school is a registered charity, overseen by a board of governors known as the school committee. The school has 114 pupils who require support for special educational needs and/or disabilities, of whom 4 have an education, health and care plan. There are 22 pupils who speak English as an additional language. The school's previous inspection was a regulatory compliance inspection in April 2018.

Purpose of the visit

1.2 This was an unannounced additional inspection at the request of the Department for Education (DfE) which focused on the school's compliance with the Education (Independent School Standards) Regulations 2014 (ISSRs), the National Minimum Standards for Boarding 2015 and the requirements of the Early Years Statutory Framework. The visit was focused in the senior school.

Regulations which were the focus of the visit	Team judgements
Part 3, paragraphs 7 (safeguarding) and 8 (safeguarding of boarders); NMS 11	**Not met**
Part 3, paragraph 9 (behaviour); NMS 12	**Met**
Part 6, paragraph 32(1)(c) (provision of information)	**Met**
Part 7, paragraph 33 (handling of complaints); NMS 18	**Met**
Part 8, paragraph 34 (leadership and management); NMS 13	**Not met**

2. Inspection findings

Welfare, health and safety of pupils – safeguarding [ISSR Part 3, paragraphs 7 and 8; NMS 11]

Safeguarding policy

2.1   The school does not meet the requirements.

2.2   The school's policy for safeguarding does not provide suitable arrangements to safeguard and promote the welfare of pupils at the school because: references to statutory guidance and external agencies are out of date; there is insufficient detail about support provided for perpetrators following incidents of peer-on-peer abuse; stated procedures for referring allegations against senior leaders are contradictory in terms of whom to inform in the event of an allegation against the head and lack the provision that the head must not be informed if they are the subject of an allegation; and information about the required training timescales for those with designated responsibilities is incorrect.

Safeguarding implementation

2.3   The school does not meet the standards.

2.4   Staff with designated safeguarding lead (DSL) responsibilities work closely together and meet regularly as a team to discuss the needs of pupils, including children in the EYFS. During interviews, staff stated that they feel very well supported and that prompt action is always taken by the DSL team should they raise a concern about a child. Pupils, during discussion, also commented that the DSL and team are readily available to them should they have any personal worries, that they are listened to, receive a response and that suitable action is taken. Inspection evidence, such as scrutiny of safeguarding referrals to external agencies, concludes that pupils' welfare, including those who are most vulnerable, is prioritised; that the DSL readily seeks advice should the need arise; and works in close partnership, as appropriate, with parents and carers. However, safeguarding records lack coherence. This is because many are in hand-written form, relying on additional, unwritten detail understood by individuals in the safeguarding leadership team for them to be a comprehensive record. The school's electronic safeguarding log requires such detail to be included, but not all records are stored there. This means that an overview of a child's needs is fragmented and poses difficulties in monitoring on-going action and outcomes.

2.5   The DSL and team have the appropriate level of advanced training required for the role. The DSL provides regular training for all staff, such as a recent training on changes to *Keeping Children Safe in Education 2020*. Staff, who were unable to attend this inset have received electronic notes of the presentation and a link to online training. However, there has been no follow up to check that staff have understood the revised guidance and records show that not all such staff have completed the online training. Additionally, staff have not received any training on how to manage a report of peer-on-peer sexual violence or sexual harassment, as required by current statutory guidance. New staff, on joining the school have an induction process which includes all required documents and procedures. Staff are clear on the expectations of their conduct and have a clear understanding about the instigation of the whistleblowing procedures should the need arise.

2.6   Governance reviews safeguarding practice at each termly board meeting and undertakes an annual review of safeguarding practice. However, the issues outlined above had not been identified and addressed. It ensures provision for suitable staff recruitment procedures within its safeguarding policy. Appropriate filtering systems are in place for the use of technology by both staff and pupils and scrutiny of records shows that any misuse of mobile technology is swiftly dealt with.

Welfare, health and safety of pupils – behaviour [ISSR Part 3, paragraph 9; NMS 12]

2.7   The school meets the standards.

2.8   Suitable behaviour management policies are implemented, including in boarding, and these are published on the school website. This ensures that parents have easy access to the school documents and in particular, the school's sanctions system in the event of pupil misbehaviour. An appropriate log of serious sanctions is kept as required and regularly monitored by the senior leadership team. The pastoral team meet regularly to discuss pupil concerns and these discussions often result in chances for change; targets set to help pupils improve any negative behaviour. Scrutiny of the log and records shows that careful consideration is given towards a pupil's vulnerability and that it is rare for a serious sanction to result in permanent exclusion on the first misdemeanour. Pupils, during discussion, commented that they are fully aware of the school rules and sanctions system and in particular, those given in the event of serious misbehaviour, which they perceive to be fairly administered.

2.9   Staff state that a room for quiet reflection is a popular independent request from pupils who wish to have some time for reflection. On rare occasions, it may be used for pupils who have significant difficulty in managing their personal behaviour, providing an opportunity for calm and reflection, with support from the pastoral team. Staff have all received training in behaviour management.

Provision of information [ISSR Part 6, paragraph 32(1)(c)]

2.10   The school meets the requirements for providing information relating to safeguarding to parents. Particulars of the arrangements for safeguarding are published on the school's website.

Manner in which complaints are handled [ISSR Part 7, paragraph 33; NMS 18]

2.11   The school meets the standards.

2.12   Senior leadership and management address all concerns and complaints in line with their current published procedures, which meet the regulatory requirements. Timescales for responding to any concerns and complaints are suitable and adhered to rigorously, and appropriate records are kept of all correspondence. Records show that panel hearings are conducted in accordance with regulatory requirements: the panel consists of at least three people who were not directly involved in the complaint, one of whom is independent of the management of the school. In accordance with regulations, complainants are provided with a written document detailing the findings and recommendations of the hearing; any such documents are retained and stored confidentially on the school premises, as required.

2.13   An appropriate complaints' log, which identifies any which relate to boarding, is kept as required and is monitored regularly by senior leaders and governance.

Quality of leadership and management [ISSR Part 8, paragraph 34; NMS 13]

2.14 The school does not meet the standards.

2.15 The proprietor does not ensure that the leadership and management demonstrate good skills and knowledge, fulfil their responsibilities effectively and actively promote the well-being of the pupils. The safeguarding policy, currently in use by the school as published on the website does not reflect current statutory guidance; records, relating to safeguarding concerns lack a systematic approach to ensure a pupil's needs are fully supported and monitored; staff have not received adequate safeguarding training in managing a report of sexual harassment and violence; training for those who were unable to attend recent training has not been monitored and not all relevant staff have completed the alternative online training as required by the DSL. Leadership and management have ensured that appropriate measures are in place to minimise the spread of infection during the current COVID pandemic.

3.   Regulatory action points

3.1   The school does not meet all of the requirements of the Education (Independent School Standards) Regulations 2014, National Minimum Standards for Boarding Schools 2015 and requirements of the Early Years Statutory Framework and should take immediate action to remedy deficiencies as detailed below.

ISSR Part 3, Welfare, health and safety, paragraph 7 and 8; NMS 11

- Improve the wording of the safeguarding policy to meet current statutory guidance as follows:
  - include accurate references to statutory guidance and external agencies;
  - give detail of support provided to perpetrators following incidents of peer-on-peer abuse;
  - ensure clarity about the procedures for referring allegations against senior leaders;
  - include the correct detail for the referral procedure should the head be the subject of an allegation and specify that the head must not be informed of any allegation;
  - give the correct detail about the required training timescales for the DSL [paragraphs 7(a) and (b) and 8(a) and (b); NMS 11.1; EYFS 3.4 and 3.7]
- Ensure that all staff have completed and understood recent training, in line with current statutory guidance [paragraphs 7(a) and (b) and 8(a) and (b); NMS 11.1; EYFS 3.6]
- Ensure that training for all staff includes appropriate guidance on how to manage a report of sexual harassment or violence [paragraphs 7(a) and (b) and 8(a) and (b); NMS 11.1; EYFS 3.6]
- Improve the coherency of safeguarding records and ensure that such records contain all relevant detail about a pupil's needs [paragraphs 7(a) and (b) and 8(a) and (b); NMS 11.1; EYFS 3.4 and 3.7]

ISSR Part 8, Quality of leadership in and management of schools, paragraph 34; NMS 13

- Ensure that leaders and managers demonstrate the good skills and knowledge necessary to fulfil their responsibilities effectively, so that the other standards are met consistently, and pupils' well-being is actively promoted. In particular, ensure that published safeguarding documentation is in line with current statutory guidance; that all staff have received appropriate and comprehensive training for their roles and that safeguarding records are correctly recorded and monitored [paragraph 34(1)(a), (b) and (c); NMS 13.1, 13.3 to 13.5, 13.7 and 13.8].

4. Summary of evidence

4.1 The inspectors held discussions with the head, senior leaders and other members of staff and had a telephone conversation with the clerk of the committee. They talked with groups of pupils. They scrutinised a range of documentation, records and policies.