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ROCHDALE AIDS UNIT. [REDACTED]

KNOWL VIEW SCHOOL - REPORT

INTRODUCTION

This report follows a training day at the school on [REDACTED]. Trainers were [REDACTED]. We had been asked to commence training around Sexuality with [REDACTED]. The request came from the [REDACTED] via [REDACTED]. Another member of my staff had previously worked with some of this group in [REDACTED] around H.I.V./AIDS issues.

Most of the day was spent with the staff voicing very strong feelings about problems at the school, in particular concerns about the safety and behaviour of some of the [REDACTED]. What emerged was a picture of what had until recently been a disorganised school, lacking co-ordination and co-operation, and a sense of frustration from undervalued staff. The last term has seen vigorous efforts by the temporary head to pull the school together, but time has not been on his side.

Most of what follows is biased information from one group of staff and is obviously not the whole story. Attempts by me to clarify what action if any has been taken by various agencies involved with the boys has so far been fruitless. Nevertheless I feel that the information is valid in as much as these [REDACTED] with the boys and are in a good position to judge how they are affected by broader issues within the school.

Knowl View School is a residential school for boys aged approx [REDACTED] years. The boys have learning difficulties due to behavioral problems. For some referrals, Knowl View is a last resort. The residential part is split into four units; 2 senior [REDACTED] Norden and Egerton, and 2 junior [REDACTED] Ashworth and Bamford.

Present difficulties came to a head in [REDACTED] when an intruder entered the school, two nights running and had some sexual contact with one or more of the boys. This matter is apparently in police hands. One suspects that sexual problems of one sort or another have been a feature of the school for some time. The present situation within the school as described by staff is as follows:

*One boy who is homosexual has contact with an adult outside the school.
Several of the [REDACTED] boys indulge in oral sex with one another.
Reputedly [REDACTED] of the [REDACTED] boys have been or are involved in "cottaging" in and around public toilets.
Men as far away as Sheffield are believed to be aware of this activity and travel to Rochdale to take part.
One [REDACTED] is thought to have been involved. The police are aware of the problem. What action has been taken is not known.
One "rent boy" has been removed from the school.
The suggestion that he may return soon has angered the staff.
Some boys have been "forced" to have sex with others.*

This degree of sexual activity, if it is factual, points to fundamental problems within the school. Most people, not least parents of children at the school would be horrified were these facts to be made known. Unless some incisive action is taken soon it is more than likely that this activity will become a public scandal.

What then are the problems within the school?

Firstly, it is recognised that over the last [redacted] years, there has been a degree of disruption due to problems of appointing a [redacted].

The school runs around two systems, which appear not only to run separately, but in opposite directions: The teachers are on duty until 3.30 p.m. after which the Social Care Staff; Houseparents, take over the children's care. A head of care is presumably the link between the care staff and the headmaster. The communication between the two departments is tenuous to say the least. Staff meet casually in the staff room, where there seems to be a friendly relationship, but otherwise no official communication of note.

There is one curious area of overlap. Teachers have to work 10 hours per week E.D.A. (Extra-neous Duties). These hours are often split to cover lunch, breakfast and some evening work. What was once apparently a system designed around project work in the evening is now simply a matter of making up hours and staff members.

Social care staff see teachers frequently undergoing training of one type or another, whilst they have little or none. They are therefore frustrated at being unable to help the boys with counselling or support as they are largely untrained in this area. It is not certain that anyone else has offered any of the boys involved any counselling.

There is a management group:

Social Care Staff comprise:

[redacted]
[redacted]
[redacted]
[redacted]

These staff describe themselves as [redacted]. They are unique within the [redacted] in Rochdale. As such, they feel isolated, as senior managers outside the school are rarely seen.

They have a training budget which amounts to peanuts, and they perceive themselves as second class citizens within the service. They are often deprived of information they believe to be relevant and important, i.e. background social histories of children, and even the fact that an intruder had been in the school was not communicated to some staff for days!!

The units where least problems occur appear to be where staff consistently are able to work "back to back" but even then it means that staff on an inappropriate grade are left to supervise units; they themselves feeling that this is unsafe. Amazingly it would appear that anyone can be left to supervise the children, and on [redacted]

How can staff have any sense of worth, self esteem, motivation? when they are on low grades; anyone else will do to cover their work, they are not offered training, not given information and unable to effectively communicate with other staff??

[REDACTED]

Certainly the most amazing thing to me, after some months, and possibly years of sexual problems within the school, there appears to be no real sex education for the pupils. Other staff in contact with pupils [REDACTED] are viewed as "taxi drivers".

We felt a degree of anger, a degree of desertion and isolation, even a degree of despair within this group of staff. At the moment there is a reluctance to form links with [REDACTED] staff as past experience has shown this to be fruitless. This deep seated divide must be taken into account when planning in future.

Difficulties encountered by us in attempting to speak to various agencies outside the school lead me to believe that although a lot of people know bits of information about children in this school, there is no-one pulling this information together. Symptoms are being treated without the real problems being recognised. If I am wrong in this belief communications between staff groups is certainly abysmal.

The sexuality course we had planned was largely abandoned for obvious reasons. Nevertheless some important information did emerge about feelings and attitudes, not just to sexuality but to infection control measures; these need to be dealt with alongside everything else at a later date.

We asked the staff what their one main aim was in the coming months. Their answer was:

To Achieve consistent, quality child care

It would be nice to think that this could be achieved within the next 2 years.

With the help of these staff I am now going to make some suggestions by way of a strategy, in the hope of stimulating discussion:

STRATEGY

01. All staff involved in any way with children in this school should meet urgently to collate information. This to include education staff, social workers, child protection officers etc.
02. The management structure of the school should be reviewed, with particular attention paid to the relationship between education and social services staff.
03. A policy review should be carried out to cover areas of reporting of incidents - staffing levels, management procedures, training.
04. Regular management - staff meetings (including lowest grades) to avoid present crisis management.
05. Regular formal meetings between all grades of staff should be implemented, during which free exchange of information should take place. i.e. educational and social.
06. [REDACTED] staffing levels should be increased and maintained to avoid the present situation of [REDACTED] staff taking responsibility.

07. [REDACTED]

08. Training courses should be undertaken jointly by Education and Social Workers around a variety of subjects. These may include, amongst others:

Group Work Skills,
Team Building,
Counselling Skills,
Sexuality and Sex Education (this area is apparently now under consideration by Kath Widdowfield).

09. Specific Social Work training for Social Work Staff.

10. The E.D.A. system should be reviewed with a view to scrapping it.

11. Education content should be reviewed and teaching methods scrutinised, in order to create a balanced day for pupils.

12. Sex education should be implemented urgently following appropriate staff training and consultation.

13. Avoid the present suggested closure of [REDACTED]
[REDACTED]

What then has all this to do with the AIDS unit?

Firstly we are committed to preventing the spread of H.I.V. The boys in this school look to us to be increasingly at risk, and this is something that needs very careful consideration at management level, not least because of the legal implications.

Secondly we were asked to train care staff in Sexuality as part of a piecemeal approach to problem solving. Having identified deeper issues we cannot sit by and see them continuing to simmer.

We have heard it said that the problems at Knowl View are "not as bad as people are making out".

In our opinion there are enormous problems which require solving with imagination, innovation and a great deal of motivation of staff.

In writing the above we in no way wish to ignore the amount of work done in the last term by [REDACTED]
[REDACTED] in trying to achieve some of the very things we have highlighted.

[REDACTED]