

INSPECTION OF MEDWAY SECURE TRAINING CENTRE

Kent

October 2003

SOCIAL SERVICES INSPECTORATE

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 - to monitor the implementation of Government policy for the personal social services.
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Kent

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Work Year: March 2003 – April 2004
Authorities involved: Under contract to Youth Justice Board
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First Published: 2 April 2004

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Acknowledgements

The SSI team and the inspectors from HMI OFSTED would like to thank all those who participated in the inspection, for their willingness to discuss the issues important to the development of Medway and for providing us with valuable information to assist the inspection process.

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Summary

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- 1.1 This two phase annual inspection of Medway STC took place in June and July 2003 (Phase 1) and October 2003 (Phase two). It was conducted by SSI, a manager from NCSC, an inspector from HMI (Prisons) and HMIs (Ofsted).
 - 1.2 The approach agreed in conjunction with the YJB enabled an assessment to be made of progress across each part of the STC's development plan which was produced before phase one of this inspection. It followed a further disrupted period in the life of this establishment and a consequent management reorganisation. The seriousness of the situation in terms of strategy, management and practice was fully understood by all concerned.
 - 1.3 The inspection findings showed some significant improvements in a number of areas crucial to day-to-day care of young people.
 - 1.4 For example we found:
 - a more coherent management structure;
 - defined roles, accountabilities and responsibilities throughout the establishment;
 - a much calmer atmosphere;
 - improved assessment and planning;
 - an education service which was again providing a good service;
 - an improved supervision structure;
 - improved provision of basic essentials for every day living, for example hair and skin care products;
 - less reliance on intervention and more on encouragement such as the incentive scheme;
 - improved physical conditions; and
 - improved building and systems security.

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- 1.5** There remains a full agenda of issues to take forward in order to ensure a sustainable quality service. In part there are some issues in which progress in the short term will be limited by staff shortages.
- 1.6** There are areas however in which immediate inroads can be made or preparatory planning can take place in relation to:
- dealing satisfactorily with complaints about food;
 - planning a training and staff development strategy;
 - improving further on the deployment and use of physical interventions, single separations and sanctions;
 - Medway social services responding more effectively to child protection matters passed to them by the STC;
 - considering further the policy and practices around bullying and assault;
 - responding to planning meetings cancelled by YOTs and Social Services and working with those organisation to improve the involvement of parent/carers; and
 - increasing with immediate effect the numbers of waking night staff on duty so that the emphasis of their work goes beyond ensuring basic safety and security in the establishment.
- 1.7** STC managers and staff can draw some satisfaction from the products of their hard work and effort particularly between phases one and two of this inspection. However the report also sets out another robust agenda for the next phase of the centres development, but one which is realistically achievable and is entirely consistent with best child care practice in specialist, secure children's establishments.
- 1.8** The report may need to be modified or expanded when a number of outstanding child protection matters/complaints currently before Medway Social Services are reported upon. Meanwhile managers and staff should be encouraged to develop a focused and managed action plan to address the recommendations of this report. It is vital for the communities in which the trainees live and settle for the centre to be effective. For this to occur, the STC must become and be sustained as a centre of excellence. Its cyclical history since opening which has been characterised by the launch of services, disruption and re-launch can not be allowed to repeat itself again.
- 1.9** The director believes, as do his management team, that there is now sufficient strength and stability in the senior and middle management teams to achieve and maintain high standards. They believe that as the

general staff group increases to full capacity the scope for improvement is considerable. We share, with cautious optimism, this view but we emphasise that success can only be achieved by the effective implementation of the fundamental core businesses of the STC, some of which remain areas of concern.

Reading the remainder of this report

1.10 This report is set out in a way to enable the reader to have an understanding about every aspect of the inspection:

- Chapter 1 is a summary of the key themes which have emerged from the inspection;
- Chapter 2 provides a list of the recommendations we have made;
- Chapter 3 gives a brief description of the aims and methods of the inspection;
- Chapter 4 sets out the context in which the secure training centre is operating;
- Chapter 5 and each subsequent chapter detail the evidence which led us to our conclusions and recommendations.

Recommendations

2

Statement of Purpose

- 2.1 The Director should identify and implement a course of the action to improve and integrate the equal opportunities agenda across the centre.
- 2.2 Managers should identify the unresolved difficulties in relation to the provision and choice of food available to young people and ensure that religious and cultural preferences are respected.

Management and Staffing

- 2.3 Managers should give immediate attention to the weekend and night time staffing levels.
- 2.4 Managers should re-instate team meetings and supervision as soon as staffing numbers allow.
- 2.5 The Director should ensure that the training and development strategy should be consistent with the priorities set out in this report and the corporate aims and objectives of the STC.

Assessment Planning and Review

- 2.6 The director should write expressing concern to the relevant Youth Offending Team manager (copied to the Youth Justice Board monitor) every time a planning meeting is cancelled without acceptable reason.
- 2.7 The STC should encourage all youth offending teams or social services departments to actively support and facilitate the attendance of parents and carers at relevant planning meetings and reviews.

Care of Young People

- 2.8 The revised complaints and child-protection protocol agreed between the STC and Medway ACPC should be implemented as soon as possible.
- 2.9 Staff should be trained so that they understand the content and implications for practice contained in the revised complaints and child protection protocol.

-
- 2.10 A nominated senior manager should lead the review of each episode of disruptive behaviour which results in the use of physical intervention to ensure best practice.
 - 2.11 The agreed child protection protocol between the STC and Medway SSD should be updated to include procedural guidance for responding to historical abuse.
 - 2.12 The Director should consider creating a trained pool of staff to act as a resource for advice and information in relation to child-protection.
 - 2.13 The management of, and response to incidents of bullying should be reinforced by supervision and training.
 - 2.14 The purpose, content and conduct of trainee meetings and the trainee counsel should be developed with a view to realising the potential of both meetings.
 - 2.15 All sanctions should be recorded in the sanctions log and compliance with the requirement should be monitored by the nominated senior manager.

Education and Vocational Training

- 2.16 The Head of Education should ensure that the systems of accreditation are developed.
- 2.17 The Head of Education should ensure that multi-media ICT facilities are developed.
- 2.18 The Director should ensure with the Head of Education that initial assessments are improved.
- 2.19 Managers should ensure that relationships between care and education staff are improved.
- 2.20 The Head of Education should improve and monitor target setting for, and the progress of students.
- 2.21 The Head of Education should develop further the resources in the library.

Tackling and Offending

- 2.22 Managers should ensure that crime avoidance and offending behaviour programmes should be delivered by staff who have been appropriately trained to the required levels of competence.

Health Care

- 2.23 Contacts between young people and nurses should be risk assessed and management plans put in place where necessary.
- 2.24 The Director and Health Care Manager should consider plans to create a specialist Mental Health Team.

Premises, Security and Safety

- 2.25 The Director should consider the acquisition of a hand-held camcorder in order to improve the training of premises searching practices.
- 2.26 The Director should ensure that the plans for a major incident simulation exercise should be confirmed and implemented in the first half of 2004.

Introduction and Profile of the Establishment

3

- 3.1 This inspection of Medway Secure Training Centre (STC) took place in two phases over a total of six days in June, July and October of 2003. It was carried out in accordance with the provision of a service level agreement between the Home Office and the Social Services Inspectorate (SSI).
- 3.2 Medway STC is a purpose built secure establishment near Rochester, Kent. It was originally designed to house 40 young offenders and at the last inspection in April 2002 was looking after 44 young offenders including four Section 91s. Since the last inspection the Centre undergone several changes. From 25.4.02 Medway changed configuration to accommodate five female remand beds. From November 02 Medway expanded increasing capacity to accommodate 76, eight beds being fenced for section 91. This expansion included a refurbishment of the existing units and education centre and the purpose built 32 bedded unit broken down into living groups of eight with an additional and new purpose built education centre which significantly increased opportunities for teaching and learning. From February 03 Medway changed configuration to accommodate five male remand places. From June 03 the configuration changed again to accommodate 32 female places.
- 3.3 Medway STC was the first STC in the country and opened in 1998. Its history has been characterised by a periods of instability in the staff group and among the trainee population. In this time there has been two Directors of the establishment. Following the resignation of the second, the management was assumed by Rebound ECD's (the parent company) Director of Children's Services. This arrangement will continue for the foreseeable future as part of the company's commitment to achieve consistently high practice standards at the centre.
- 3.4 Young people detained in Medway STC are subject to a Detention and Training Order (a DTO), remanded pending trial and/or sentence or serving section 91sentences. DTO's are made by a Youth Court or Crown Court and relate to offenders aged from 12 to 17 years who otherwise meet the criteria for a custodial sentence.
- 3.5 The purpose of the inspection was to evaluate the effectiveness of the custodial element of the DTO and the arrangements for remanded young people. The community-based element of the DTO is to be subject to separate evaluation. Specific attention was paid to the young people's

education, diversion from offending programmes, their day-to-day care and the work being undertaken with remanded young people.

- 3.6 The inspection used the standards and criteria devised by the Home Office in consultation with SSI. These are reproduced at Appendix A to this report. They draw upon the Department of Health secure accommodation standards and criteria, lessons from research, understandings of good practice, relevant legislation and guidance.
- 3.7 During this inspection interviews took place with the young people, managers and training staff of the STC, two parents, administrative staff, education, nursing and social work staff, and a representative of an independent agency which provided an advocacy service to the young people (the VCC). In addition representatives of Medway Social Services were interviewed and S T C records were examined and personal case files reviewed. The Youth Justice Board monitor, a senior member of Rebound ECD and a trades union official were also seen formally.

Profile.

- 3.8 Medway STC is a purpose-built secure establishment located near to Rochester, Kent. It was originally designed to house 40 young offenders but this maximum number has been increased to 76 to accommodate the extra demands being made of the Juvenile Secure Estate. At the time of the inspection the establishment had between 69 and 74 young people placed. They were a mixture of young men and young women.

See below for current population statistics.

Profile of young people Admitted in Period 1/4/2002-31/09/2003

	Admitted	Discharged
Male	249	235
Female	150	139
Total	399	374

Details of Discharge since 01/04/2002

	Male	Female
Release Date Reached	165	93
Transferred to YOI	26	0
Transferred to STC	12	8
Transferred to LASCH	15	14
Transferred to Prison	0	7
Early Release	8	12
On Appeal	9	5
Not Recorded	0	0
Total	235	139

Age of Young People on Admission

Age	Male	Female
12yrs	5	3
13yrs	31	13
14yrs	122	30
15yrs	64	56
16yrs	27	47
17yrs	0	1
Not Recorded	0	0
Total	249	150

Sentence Length: Detention and Training Order

Length of Sentence	M	F
6 months or Less	101	42
7-12 Months	68	29
13-24 Months	17	10
Sentence Recall	10	4
Total	196	85

Sentence Length: Sect 91

Length of Sentence	M	F
0-12 Months	1	0
13-24 Months	4	4
25-36 Months	3	2
36-48 Months	14	1
Total	22	7

Ethnicity of Young People

	Male	Female
White	160	94
White Irish	0	2
Black African	17	7
Black Caribbean	25	12
Indian	6	1
Pakistani	0	0
White Other	0	2
Mixed White Black Caribbean	17	7
Mixed White / Asian	3	1
Mixed White / Black African	12	2
Other Ethnic Groups	1	4
Not Noted	0	0
Total	249	150

Statement of Purpose

4

STANDARD 1: STATEMENT OF PURPOSE

The STC has a clear and well understood sense of purpose which fully reflects the vision, goals and values determined for STCs by the Home Office.

This standard looks at whether:-

- the quality and accessibility of the statement of purpose;
- the quality of the STC's equal opportunities policy; and
- the involvement of trainees, their parents and carers with the STC in the processes which affect them.

STATEMENT OF PURPOSE

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • The Statement of Purpose remains clear and concise and is prominently displayed. • Having negotiated another crisis caused by the absence and loss of key directing staff, managers and staff are displaying confidence that the progress which has been made subsequently is sustainable and can be built upon. • Good evidence that trainees were treated as individuals in multi-disciplinary meetings. • Parents and carers reported being kept informed of progress and events and consulted about trainees. • At the completion of phase one of this inspection we commended that a course of action be implemented to address deficits in meeting the primary care needs of black and minority ethnic trainees. Phase two showed evidence of significant progress. 	<ul style="list-style-type: none"> • Every effort should be made to collaborate with the young persons' YOT worker or social worker to ensure regular family/ carer visits when this is in the best interests of the trainee. • The dietary preferences of black and minority ethnic trainees and those of specific religious persuasion need to be taken into account as a priority.
RECOMMENDATIONS	
<ul style="list-style-type: none"> • The Director should identify and implement a course of the action to improve and integrate the equal opportunities agenda across the centre. • Managers should identify the unresolved difficulties in relation to the provision and choice of food available to young people and ensure that religious and cultural preferences are respected. 	

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- 4.1 The Statement of Purpose was amended in April 2002. It was an accurate and concise statement of the overall aim of the STC and the commitment of Rebound ECD to delivering a quality service to help direct young people from offending and to enable them to live successfully in their communities. It was displayed throughout the centre and was incorporated into the relevant literature including that available to parents/carers and young people.
 - 4.2 We found that there was an increased sense of "sign up" to the vision, goals and values of the STC. For reasons which will become evident as this report is read, we saw direct evidence of this commitment being translated into action during Phase 2 of the inspection. A key challenge for managers and staff in the immediate future will be to ensure that it is consolidated and sustained.
 - 4.3 The STC has an equal opportunities policy which was in accordance with Home Office guidance. Staff and young people were aware of it. Although we concluded that we did not observe any evidence of institutionalised discriminatory behaviour, we found that there remained much to be done before the equality agenda was fully and appropriately integrated across the STC. For example during the course of the first phase of this inspection we drew attention to be unacceptable delay experienced by some black young people in obtaining hair and skin care products. A young person was also provided with a meal which was wholly inappropriate to his cultural and religious persuasions. Frankly it beggars belief that such errors should occur in a centre which has been operational for a considerable period of time. It is therefore an immediate requirement that the necessary action is taken to prevent recurrence. This will be a major undertaking and will need to involve every department of the establishment. Management of this process will need to be rigorous and attentive to detail.
 - 4.4 We did see examples of good practice in relation to equal opportunities however. For example one member of staff produced a pictorial, laminated version of the STC's incentive scheme for a young person with little spoken English. This display was subsequently made available for use of across the centre. We also noted at the action taken between the two phases of the inspection to improve practice and monitoring in relation to the provision of basic care products.
 - 4.5 We saw good evidence of the trainees being assessed and treated as individuals. On case files we found a number of tools used to work with young people (for example a drugs quiz and an assertiveness questionnaire). This material was used together with contributions from parents/carers, professionals and the young person concerned in all assessments and planning meetings. We observed these meetings to be focused and managed well for process and content. This was a significant improvement upon previous inspection findings in this centre.

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- 4.6** Accordingly young people reported that they considered themselves to be involved and instrumental in determining and "shaping" their plans. The two parents we interviewed were also very positive about the planning process, reporting that they were each involved in their son's care and felt that their views and worries were heard and responded to. However we have continuing concerns about the extent to which parents and carers were enabled to play a full part in the assessment and planning processes and we refer to the nature of these concerns in fuller detail in Chapter 6.
- 4.7** Young people were made aware of their responsibilities and the standards of behaviour expected. Discussion during the induction phases of their placement in the STC and the use of relevant literature were two key methods employed. They were reinforced by subsequent discussion in key work sessions and by the inevitable interaction in the working day.
- 4.8** The incentive scheme had been revised and as a result young people were able to quickly progress through the scheme by displaying positive attitudes and by making consistent effort, thereby achieving the rewards associated with higher levels. Young people and staff were very clear about the mechanics of the scheme and were positive about its value. We concluded that it contributed to the calmer atmosphere we saw in the living units by offering young people greater opportunity thereby reducing tension.

Management and Staffing

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STANDARD 2: MANAGEMENT AND STAFFING

The STC has sufficient trained staff to achieve the goals set by the Home Office.

Staff are properly managed to enable them to work effectively as a multi-disciplinary team and operate the STC to the standards required.

This standard looks at whether:-

- the suitability, competence and deployment of managers and staff;
- the availability of staff training and staff development opportunities; and
- the availability and suitability of staff supervision, team briefing and de-briefing meetings.

MANAGEMENT AND STAFFING

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • The management team has been realigned with the intention of maximising its individual and collective strength. • Managers and staff spoke of being clearer about their roles, responsibilities and accountabilities. • Managers and supervisors have demonstrably benefited from formal supervision training. There was some evidence of improvement in practise but this needs to remain a priority area as the staff team grows in number. • Employment practices remain sound and the recent attention to grades and condition of service has brought about an increased number of job offers from the last recruitment round which should impact upon the balance and size of the staff team. • The relationship between the monitor and the STC appears to be businesslike and appropriately challenging. 	<ul style="list-style-type: none"> • Staff numbers currently remain low placing significant pressures on the establishment particularly at weekends and at nights, when in our judgement the staffing levels are at times too low to provide a satisfactory level of care. • A consequence of staffing problems is that team meetings, resident meetings, training and operational development have each been sacrificed. This must be a major improvement area in the next phase of the centre's development. • There needs to be a training and development policy linked to the strategic and operational priorities of the STC.
RECOMMENDATIONS	
<ul style="list-style-type: none"> • Managers should give immediate attention to the weekend and night time staffing levels. • Managers should re-instate team meetings and supervision as soon as staffing numbers allow. • The Director should ensure that the training and development strategy should be consistent with the priorities set out in this report and the corporate aims and objectives of the STC. 	

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- 5.1 Since the 2002 inspection the senior management team of the STC has experienced considerable disruption and turmoil. The Director resigned following a period of ill health, his deputy resigned to take up another post, another senior manager suffered a period of illness and a 4th enjoyed maternity leave. Given that other managers in the senior management team of the centre were relatively new to post, it was not surprising that the consequences of the disruption were experienced throughout the centre.
- 5.2 In order to bring some stability to the STC, Rebound ECD's Director of Children's Services moved into the post as the temporary centre head. There was a sense that this move initially added to the confusion being experienced by the Centre as the temporary director's management style was significantly different from his predecessor and (his predecessor's) deputy. At the time of the first phase of this inspection a number of managers and staff told us and that the " jury was out" in relation to judging whether yet another change in direction of the STC was a positive move for the young people and themselves. The doubts had largely dissipated by the time of phase two of this inspection, when the same managers and staff told us about their new found clarity of purpose. As a result they described more focused roles, responsibilities and accountabilities.
- 5.3 In part this was a result of a period of very active management working upon an initial development agenda resulting from the findings of phase one of the inspection. It was also a product of some changes within the senior management team designed to maximise its collective strength by deploying the skills and competencies of individual members of the management team in the most suitable management jobs. These developments were part of a concerted drive to instil a performance management culture in which tasks were clear, quality expectations defined and monitoring and evaluation processes in place.
- 5.4 A key factor in the future success of the STC will be the management team's ability to sustain the stability it has set out to achieve. It will need to continue to work collaboratively on its development agenda, an attribute of the previous Director's style which a number of managers and staff were wanting his successors to embrace.

Staffing and Recruitment.

- 5.5 Staff throughout the centre will need to be led dynamically and be helped to contribute to the essential drive to improve standards of practice across the centre. However we recognise, and it is a recurring theme of this report, that although the " ground work" can be done and a framework for the future development of the STC can be set out, progress cannot be made any significant extent until staffing levels are increased in the care staff grades.

5.6 The STC and Rebound have taken measures to improve staffing:

- there has been a significant increase in basic pay grades which for the first time have made the STC a competitive employer locally in the jobs market;
- there was an intention to create a pool of relief staff;
- basic training has been updated and there was a proposal to introduce advanced training and regular team training days to improve the core skills of staff;
- supervision training has been provided to all those who have supervisory responsibilities.

5.7 Each of these steps has been designed to bring about improvement in practice and to recruit and retain a balanced and skilled workforce. The most recent recruitment "round" resulted in 31 job offers being made, the most achieved since the STC has been operational. Together with the nine new staff who were due to commence work before Christmas, they will provide a timely boost to the staff complement.

5.8 We have also noted that for the three months preceding the inspection, the rate of resignation was at its lowest since the centre has opened. Although it was too early to see this as a trend, there was the view expressed among some care staff that greater clarity of task, improved management, a more defined vision of a stable future and an enhanced salary structure had impacted. These views were shared by their managers.

5.9 While we welcome this evidence and share the cautious optimism that the long-term staffing problems may begin to alleviate, we underline the importance of the centre being adequately staffed to deliver a quality and level of service commensurate with its contract. At the time of both phases of this inspection we found evidence of insufficient staff at weekends and at night to enable a satisfactory level of care to be afforded. We also took cognisance of the fact that staff meetings and training opportunities had to be sacrificed in order to enable as many people as possible to work directly with the young people during each shift. Although understandable, it was not sustainable or acceptable for a STC in its 6th year of operation to be unable to deliver aspects of its core business and to provide its staff with appropriate non-contact time (i.e. time away from young people) during which they (the staff) can attend to priority matters, develop their skills or have the opportunity to benefit from regular and programmed supervision.

5.10 Recruitment practices remained a strong feature of the STC with extensive checks and vetting carried out. Job descriptions were available for all posts and as we have already reported lines of accountability and statements of responsibility have recently been revised.

Training

5.11 As we have already indicated, training has fallen victim to operational pressures affecting the establishment. This has adversely impacted upon the skill base of the staff group. It is essential that a revised training and development strategy is developed to reflect the priorities of this report and to ensure that opportunities are afforded for staff to meet their personal development targets and to contribute towards the STC achieving its corporate aims and objectives.

External Management and Monitoring.

5.12 The STC has clear external management arrangements and we have been directly informed by a top manager of Rebound ECD of their commitment to achieving a successful centre. This will be valuable and necessary support as the centre faces the challenges of the immediate and longer-term future.

5.13 The full-time YJB monitor and an assistant work permanently in Medway and during and subsequent to the inspection field work phases we have found considerable evidence of a businesslike and appropriately challenging relationship.

Assessment, Planning and Review

6

STANDARD 3: ASSESSMENT, PLANNING AND REVIEW

There is a full assessment of each trainee's individual needs and problems and flexible, individual training plan for meeting as many of those problems as possible and for the directing of remedial attention to offending behaviour.

This standard looks at whether:

- the establishment's planning and review policies and procedures and establishes the quality of the work which is carried out.

ASSESSMENT, PLANNING AND REVIEW

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • Each young person had an initial assessment on their files during phase two of this inspection. • A range of assessment tools were in use. • Planning meetings were taking place to time and were managed well and actively involved young people. • Training plans were monitored by the multi-disciplinary meetings. 	<ul style="list-style-type: none"> • Efforts need to be made to engage parents and carers in the planning process. • We noted that a number of planning meeting and reviews were cancelled without notice by the YOT to the frustration of STC staff and trainees.
RECOMMENDATIONS	
<ul style="list-style-type: none"> • The director should write expressing concern to the relevant Youth Offending Team manager (copied to the Youth Justice Board monitor) every time a planning meeting is cancelled without acceptable reason. • The STC should encourage all youth offending teams or social services departments to actively support and facilitate the attendance of parents and carers at relevant planning meetings and reviews. 	

- 6.1** We closely examined case files during the second phase of this inspection and each had an initial assessment document incorporated. They drew upon court reports and the material submitted by the youth offending teams or the social services departments responsible for the young person. In previous inspection reports of STC's we have reported upon the difficulties experienced by staff in obtaining relevant pre-admission material. We were told during this inspection that this situation had improved although there were still occasions when absent or insufficient material complicated the processes.
- 6.2** We saw evidence of the use of a wide range of assessment tools which had been selected for their suitability for use with this particular user group, recognising the range of problems and challenges they were facing. We welcomed this development and considered that the focus upon the needs of the young person contributed to the feeling that they were involved in assessment and planning which was reported upon in Chapter 4.
- 6.3** Risk assessments were carried out at the point of admission to the STC. It was important in this context for STC staff to have been provided with key and relevant pre-admission material relating to the young persons psychological or mental health. In those cases where the material was not immediately available, there was a presumption made that the young person needed to be managed and monitored closely until such time that the relevant material could be obtained.
- 6.4** Risk assessments were reviewed on a weekly basis at a multi-disciplinary meeting and more frequently if necessary. In cases where the level of concern for the young person was significantly raised, the suicide and self-harm (SASH) policy was implemented. This meant that any further assessment or treatment by specialists was provided and the young person was kept under close observation which, in extreme cases, could be continual. Young people subject to SASH were continually reviewed and the SASH plan modified when necessary.
- 6.5** Staff from each discipline in the STC were acutely aware of their responsibilities in this regard, a fact reflected by the relatively low number of episodes of self-harm which had occurred and the complete absence of suicide.
- 6.6** Sentence planning meetings were also thorough and to a large extent were being carried out to time. However there was frustration being experienced in the STC as a result of some meetings being cancelled by youth offending team members with little or no notice. This caused significant disruption in the establishment, not least because cover staff were usually provided to free colleagues with responsibility for the young person to attend. Young people were remarkably tolerant of these systems failures despite often being anxious in anticipation of a meeting which was

intended to shape the next phase of their custodial experience and/or their post release plans.

- 6.7** We were concerned that for reasons beyond the control of the STC, parental attendance at review and planning meetings was below 20 per cent. Clearly this low figure had implications, not only for the assessment and planning processes, but also for the post discharge arrangements and their success. We shall raise this matter separately with the YJB so that they can consider the nature and content of future discussion with local councils and youth offending teams in order to address this issue. However the STC should continue to encourage the relevant youth offending team or care authority to support the visits when they are in the best interests of the young person.
- 6.8** Locally we noted the offers to families of accommodation and in specific circumstances assistance with travelling costs. Links have also been made with Medway Social Services Department's fostering service who have agreed to consider providing a resource for children of visiting parents.
- 6.9** The monitoring of training plans has significantly improved since the 2002 inspection report was published. A weekly multi-disciplinary meeting took place in each house block. All departments of the STC contributed to the meeting and the residential services manager (RSM) took responsibility for ensuring that the training plan was implemented fully. Within their work groups the RSM's pursued these accordingly. We were impressed by the meetings we observed and took note of the increased accountability of the participants which was a helpful development relevant to good outcomes for young people.

Care of Young People

7

STANDARD 4: CARE OF YOUNG PEOPLE

Day-to-day care is of a good standard, provided by staff who can relate effectively to trainees in a way which takes into account their individual needs and safeguards and actively promotes their welfare. Trainees whose conduct is unacceptable are dealt with using positive and fair sanctions.

Trainees are given every opportunity and encouragement to re-establish, maintain and strengthen contacts with family, friends and significant others outside the STC.

The STC's admission procedure is positive and welcoming, not overbearing and intimidating.

The induction programme is designed to establish positive relationships and co-operation with trainees, to help them to adjust to life in the STC, and to set clear expectations about their behaviour in custody and on release.

This standard looks at whether:

- the quality of day-to-day care, the means of dealing with challenging behaviour and relationships with the trainee's family, friends and significant others.

CARE OF YOUNG PEOPLE

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • Young people told us consistently in phase two of this inspection that they enjoyed positive relationships with care and education staff. • Control of young people which was noticeably tenuous in phase one of this inspection had been regained by phase two. • The use of physical intervention has reduced considerably. • Young people understood and respected the incentive scheme. • There has been significant effort to introduce a wide range of positive activities. • Considerable work had been undertaken between the two phases of this inspection to strengthen and make functional the complaints systems. • The management of self-harm remains strong. 	<ul style="list-style-type: none"> • Episodes of single separation had reduced but we found significant use of brief periods of single separation (up to 5 minutes) which were not adequately recorded. • Sanctions were being used more appropriately and less frequently in recent months, but recording needed to be more consistent. • Physical interventions need on every occasion to be used or planned in accordance with regulation and guidance. • A number of complaints had been referred to Medway Social Services to be investigated in accordance with the child protection procedures but we noted that few had been completed. • A priority development is to improve the ability of staff to respond appropriately to child protection matters with particular attention to the management of disclosure. • The effective implementation of the bullying procedure requires further work.

RECOMMENDATIONS

- **The revised complaints and child-protection protocol agreed between the STC and Medway ACPC should be implemented as soon as possible.**
- **Staff should be trained so that they understand the content and implications for practice contained in the revised complaints and child protection protocol.**
- **A nominated senior manager should lead the review of each episode of disruptive behaviour which results in the use of physical intervention to ensure best practice.**
- **The agreed child protection protocol between the STC and Medway SSD should be updated to include procedural guidance for responding to historical abuse.**
- **The Director should consider creating a trained pool of staff to act as a resource for advice and information in relation to child-protection.**
- **The management of, and response to incidents of bullying should be reinforced by supervision and training.**
- **The purpose, content and conduct of trainee meetings and the trainee counsel should be developed with a view to realising the potential of both meetings.**
- **All sanctions should be recorded in the sanctions log and compliance with the requirement should be monitored by the nominated senior manager.**

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- 7.1 During the first phase of this inspection we were significantly concerned about aspects of care afforded to young people. Disruptive behaviour was commonplace and sometimes serious in nature. One inspector concluded that he had been in a situation in which he judged that neither staff nor young people were sufficiently safe at that time.
- 7.2 We were told consistently that this behaviour had been evident for some months and staff reported that it coincided with the introduction of a more psychodynamic, therapeutic regime by the previous management team. We were not in a position to judge whether or not this analysis was entirely correct. However we were left in no doubt by most staff that they were confused about their roles and their authority in intervening in challenging situations. They also considered that their skill base was insufficient for them to implement effectively a therapeutic approach. The result of this was a group of staff who consistently reported themselves as being tentative and lacking confidence in everyday dealings with young people.
- 7.3 Action had been and was being taken to improve matters and this included:
- the reinforcing and in some cases re-allocation of roles, responsibilities and accountabilities of staff, teachers and managers;
 - identifying "hot spots of challenging behaviour" and developing strategies to manage them more effectively;
 - reinforcing the existing expectations of behaviour of young people;
 - introducing a revised complaints system overseen by a quality assurance manager which was designed to be more responsive and ensure that young people concerns were fully heard, properly considered and appropriately responded to;
 - quality assuring practice through the close involvement of unit management;
 - enhancing the quality control of day-to-day care by extending the monitoring roles of senior managers;
 - making best use of the incentive scheme for young people;
 - focusing upon improving constructive after school and weekend activity.
- 7.4 These measures have brought about significant improvement by the time we carried out phase two of the inspection. There had been a renewed focus upon delivering a child centred approach to the centres work. As a

result young people were generally positive about staff and their interactions with care staff that we observed directly were largely positive.

- 7.5 There was a focus upon good order and control which was most apparent in the movement of young people around the campus. Staff had split young men's groups from those of young women and reduced the numbers of young people eating in the dining hall. It was anticipated that there would be a return to whole group dining and increased contact between young men and young women once the behaviour management strategy had been consolidated.
- 7.6 The incentive scheme had been revised and young people were able to progress through to higher levels more quickly. Young people confirmed that they enjoyed the rewards that the higher levels provided. Another incentive was provided by the introduction of an awards of "unit of the week" and "tutor group of the week". The young people concerned were able to eat their meals in the dining room and were able to play pool during lunchtimes in their house units. One group of young people told us that "life is sweet when your are unit of the week!"
- 7.7 Young people had the opportunity to take part in a trainee meeting and could should they wish, put themselves forward as a house representative to attend the trainee council meeting which convened on a fortnightly basis. Neither meeting was seen by young people or staff as being particularly effective. Further work was required to enable their potential to be maximised.
- 7.8 However each of these initiatives have contributed to an overall feeling of greater calmness, a conclusion which was reinforced by the statistical evidence provided by the YJB monitor which showed a significant reduction in the number of critical incidents and physical interventions. Staff and young people have both benefited from the improved atmosphere and we were consistently told by staff that they had much more confidence in the ways in which they were being asked to work at the time of the second phase of this inspection. We particularly took note of some staff, including senior and middle managers, who had previously supported the therapeutic model but were later acknowledging the progress and benefits of greater clarity in the new regime.
- 7.9 There was however much to do and some of the required improvements were in the following areas which were fundamental to best and safe practice.

Physical interventions

- 7.10 In the period between the 1st January 2003 and the 15th October 2003, Medway social services had received 29 referrals from Medway STC. These resulted from complaints made by 23 young people about the manner in which they were handled during the course of a physical

intervention, "a restraint". In strict accordance with the Youth Justice Board expectations when such a complaint is made, the relevant reports and relevant video material downloaded from the STC's security camera network was in each case gathered in, secured and made available to Medway Social Services and, if necessary, to the police. Records held by both the STC and the social services showed that the written material was always forwarded within the laid down timescales of 24 hours.

- 7.11** At the time of the second phase of this inspection a significant number of the complaints were still being investigated by the Social Services and/or the police. In addition there was an ongoing independent review of a number of the same referrals and some new allegations, a course of action commissioned by the Medway Social Services in consultation with the Youth Justice Board. Once the outcomes become known we will consider the findings and their implications and if necessary produce an addendum to this report.
- 7.12** Notwithstanding this outstanding work, our review of the procedures deployed by the STC and the Social Services Department in these circumstances has clearly identified that a revision is necessary. We have since been informed that a revised protocol clarifying the processes of inquiry and investigation into complaints and establishing timescales for response has been produced and in principle agreed between the social services, the police and the STC. It was to be presented to the next meeting of the Medway Area Child Protection Committee for formal ratification. An additional safeguard for the young people concerned was to be the introduction of a rigorous monitoring process by the Youth Justice Board to ensure that the timing and quality of response to the referrals was in accordance with procedural expectation. We support these developments and commend that all staff are sufficiently trained to gain a full understanding of the content and the good practice implications of the revised procedural guidance. We also understand that the Director is to become a member of the ACPC.
- 7.13** We have also concluded that in order to achieve consistency of practice in managing challenging behaviour, the senior manager should conduct a review on each occasion when physical intervention is deployed. The outcome of this additional activity will be an assurance that each physical intervention is in accordance with guidance and procedures and that it was managed and conducted to the highest quality standards. If effective, the measure should also impact upon the number of occasions that physical intervention has to be used.

Child Protection

- 7.14** Much of what has been written in relation to the complaints resulting from the physical interventions has a direct "read across" to child protection. We have already indicated that should the ongoing external investigations

into complaints reveal a need for further comment, an addendum to this report will be produced. However there were examples which demonstrated that existing internal procedures had been used properly and effectively in circumstances when the practice of managers and staff needed to be investigated in a child protection context. In each of these cases the personnel and child-protection procedures were both appropriately and speedily invoked and at the time of writing the investigations by the appropriate authorities were ongoing.

- 7.15** We were initially surprised to find that the cases referred to the local social services did not contain any which related to historical abuse preceding placement in the STC. Further inquiry during the inspection revealed that there were six cases in which disclosures of this type were made in the previous year. These matters were reported directly to the young person's YOT worker or to the local authority which had responsibility for the young person. This meant that the local social services department was by-passed. It is important that procedure and practice in these circumstances reflect the guidance set out in Working Together and we therefore commend that the STC procedure is reviewed in order to achieve consistency. Furthermore we commend that staff are suitably trained and that child protection policy and procedures be regularly reviewed by the STC and Medway Social Services.
- 7.16** Research evidence indicates a significant correlation between offending behaviour and previous abuse. It is therefore important that the STC has sound expertise within the establishment to support that provided by the local social services. This is especially relevant in an establishment which relies upon a largely unqualified and relatively inexperienced workforce. For this reason we commend that a number of selected staff receive additional child protection training to enable them to become a day to day resource for advice and information.
- 7.17** We noted the lack of clarity among staff about what constituted bullying. For example we spoke to several house unit staff who considered assaults by young people upon their peers as "normal" institutionalised behaviour. Therefore we confidently speculate that there has been a significant under use of the bullying procedure in the establishment. This is an issue which needs to be given priority in the next phase of the units development.
- 7.18** A key element in the protection of children is the existence of processes which treats seriously reports of concerns about young people and which gives children a voice. We saw a number which were relevant:
- the Public Interest Disclosure policy, "the whistle-blowing policy". This was a well-established document issued in March 2003 which set out the rights and responsibilities of staff and the framework within which they were expected to take action in the exceptional circumstance of the STC senior managers failing or refusing to discharge their duties to young people;

- the advocacy service. This service was provided by The Voice of the Child in Care (VCC), an experienced and reputable organisation which has persistently advocated on behalf of young people. Regular meetings were held with that the Director and the Youth Justice Board monitor. Representations made on behalf of young people were actively pursued. We noted that a revised protocol agreed by the STC and the VCC had been developed which clarified the processes to be used in these circumstances.
- the previously reported trainee meetings and the work of the trainee council should also be important vehicles for enabling young people to have their voices heard.

Single Separation and Sanction

- 7.19** We found evidence to suggest that there was significant under-reporting of both single separation and sanction. We saw and were told of many occasions when brief periods of single separation were used (up to 15 minutes' duration) without being recorded. Equally we found evidence of numerous examples of sanctions which had been applied to young people and recorded in the staff communication book but not in the sanctions record.
- 7.20** We have stressed to managers and staff the importance of this information to case management and to performance monitoring. The monitoring of compliance with the requirement should be drafted into the responsibilities of the appropriate senior managers.

Centre activities

- 7.21** The STC saw the extension of the activities available to young people as important in providing them with a positive experience of constructive leisure and a key element in reducing disruptive behaviour. As a consequence there had been an attempt, ultimately unsuccessful, to recruit a youth worker. An existing manager in the centre had been subsequently seconded to develop the service. Since being in post he had developed a range of weekend activities and was in the process of developing an after-school program. There was a consistent view expressed that these activities have made a difference to the quality of life in the centre. For example it has been noted that incidents at weekends have reduced significantly and it was thought that this was as a direct result of more activities being available.
- 7.22** Teachers were offering to run after school clubs and a skills audit has been undertaken in preparation. Some care staff were also offering to run clubs following their shifts. However we did not see this as a feasible option until the staffing situation of the centre improves.

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- 7.23 Links were being developed with the Prince's Trust and the local army youth team with a view to young people being registered to take part in the Duke of Edinburgh's Award Scheme.

Religious Observance

- 7.24 Young people were encouraged to practise their faith. Appropriate arrangements were made for young people according to their religious persuasion. The two on site chaplains were involved in the life of the centre and religious services were an integrated feature of the STC and pastoral services were also offered and established.

Food

- 7.25 We remain concerned about the timeliness and quality of food throughout both phases of this inspection. We drew attention to the provision of the culturally inappropriate food in Chapter 4. We were also told consistently by staff and young people that food was often delayed in arriving on the unit and there was considerable discontent with the way in which it was transported in boxes.
- 7.26 We observed young people dining at 7pm having not eaten since lunchtime. We also noted that they did not eat or drink in school. This meant that young people could go from 8:15am to 1pm without any sustenance.
- 7.27 This is an area of primary care which requires resolution as we share staff conclusions that it will otherwise remain a contentious issue and, on occasions, a contributory factor to disruptive behaviour.

Education and Vocational Training

8

STANDARD 5: EDUCATION AND VOCATIONAL TRAINING

The STC conveys an ethos where learning is valued and trainees are encouraged to improve their standards of education or achievement.

Trainees of school age will experience a broad and balanced curriculum appropriate to their age, ability and level of attainment with a view to a return to school on release.

Trainees who will be above school age on release will receive a programme of educational and vocational training designed to prepare them for entrance to further education, training or work experience.

This standard looks at whether:

- all aspects of the education and vocational training available to the trainee.

EDUCATION AND VOCATIONAL TRAINING

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • Improving roles of accreditation. • The quality of the teaching and learning. • Behaviour management in education. • The quality of accommodation overall. 	<ul style="list-style-type: none"> • The levels and types of accreditation needed to be developed. • A wider range of multi-media and ICT facilities in classrooms were required. • The quality of initial education assessment needs to be improved. • Care staff and education colleagues needed to improve their communications. • The effectiveness of the new system for target-setting and setting the tracking of student progress needed to be monitored. • The role of, and resources available in the library needed to be further developed. • The recent improvements in the leadership and management of the establishment and the education department needed to be sustained.
RECOMMENDATIONS	
<ul style="list-style-type: none"> • The Head of Education should ensure that the systems of accreditation are developed. • The Head of Education should ensure that multi-media ICT facilities are developed. • The Director should ensure with the Head of Education that initial assessments are improved. • Managers should ensure that relationships between care and education staff are improved. • The Head of Education should improve and monitor target setting for, and the progress of students. • The Head of Education should develop further resources in the library. 	

ACHIEVEMENT AND STANDARDS

1. How well do learners achieve?

Since the last inspection, the capacity of the centre had nearly doubled to 76 including some girls and a small proportion of children on remand, aged predominantly 14 to 16. Initial assessments of reading age, spelling age and Maths age showed most to be performing well below their chronological age, sometimes by as much as 7 years, but more commonly as an 11 or 12 year old. Over the last 6 months, 60 per cent of young people stayed less than two months. Most had only very disrupted previous education and low expectations of their ability to learn. A few were known to have had statements but specific information being made available through court documentation was lacking in some cases.

Achievement and standards were rising and becoming good.

The levels of achievement had been rising significantly and were set to improve further as the use of AQA unit awards and other accreditation became more firmly established. At the time of the inspection the accreditation rate was calculated to have reached about 4.1 units per DTO trainee per month. Accreditation was available across all subjects of the curriculum including PE.

The development of challenging individual targets had yet to have a significant influence but over the last three months, 98.6 per cent of trainees had achieved their specified education and training DTO targets.

There had been a very significant improvement in behaviour, timekeeping and attendance since the first phase of the inspection. Most young people behaved well and were learning in classes. A few lost concentration but mainly responded appropriately to prompts and were courteous. Movements to and from classes, and between classes were orderly but the learners were naturally lively and mainly good-humoured. Temporary exclusions enabled some to “chill out” for a few minutes before returning to lessons and only a small minority needed to be educated separately in the living units. Punctuality was satisfactory and little time was lost. Attendance was good although those on remand were more likely to have to miss sessions for legal visits or court appearances. Those on Detention and Training Orders (DTOs) had averaged nearly 24.5 hours per week out of 25 hours.

The curriculum delivered was generally appropriate for young people returning to some form of school education: 90 per cent had moved on to mainstream schooling, PRUs or special programmes on leaving the establishment.

2. How effective are teaching, training and learning?

Overall, the teaching and learning was good and only one unsatisfactory lesson was observed.

In most sessions, teachers had planned well with clear introductions and objectives, a series of well-timed activities and a final review including an assessment of how well each learner had behaved, which was recorded. Lessons were linked to suitable AQA unit awards, GCSE or NVQ and there was a good sense of purpose.

In the best sessions, learners were brought in to whole class discussions or question and answer sessions as well as working individually on tasks which allowed some differentiation for those able to work more quickly. Practical work was stimulating and individuals were enthusiastic. In one PE session, linked to an AQA fitness unit, the girls were using their individual record sheets whilst working out on the good quality cardio-vascular equipment to achieve the targets that they had agreed. They understood what they were achieving and were well motivated. In a history class, after some initial discussions, all were working through exercises structured around a worksheet which required them to think about problems, suggest solution and then evaluate the reasons for what had actually been done. The lesson was well timed and all learners were able to achieve satisfactorily with some able to produce more substantial answers than others. Interest never flagged and they the lesson ended well. In a stimulating drama class, learners who had previously devised an outline story, broken into sections, were listening to snippets of music and making decisions about which should be used where, and why.

Overall, good use was made of the resources although there was little use of visual or multi-media equipment or resources. Music was used in two lessons and a video in another. No ICT was used other than in ICT lessons although on one occasion, an arrangement had been made for work done in a lesson to be word-processed in their next ICT lesson.

The learners' responses were varied but most showed interest and sometimes enthusiasm for the lessons. The majority behaved suitably throughout lessons although teachers needed to remind them of the rules, which were prominently displayed, and they were clearly concerned not to lose points. Some worked conscientiously with little supervision but most needed considerable individual support, reflecting their lack of previous education. The amount of work completed was very variable with a few failing to do very much but overall, the pace was good and appropriate work was completed.

Some individuals showed signs of personal problems or difficulties but with no diagnosis from a Special Educational Needs Co-ordinator (SENCO) and no guidance to teachers on preferred learning styles or specific behaviour

management, they lacked the support needed in classes. One boy, who was receiving 1:1 support for literacy once or twice a week, was having problems in staying on task in other classes and was losing points for behaviour. Better diagnosis and guidance could have enabled him to be better supported and to have achieved more.

Training assistants were playing an important role in classes in supporting individuals and the teachers. The more experienced and confident were able to take more initiatives and to contribute more. Some were supervising learners learning from packs of materials on the units and making an a valuable contribution, not just by that particular work, but by helping to establish a climate where education was seen as important and was valued. Others were more passive and given suitable guidance, could learn to take on a more positive role.

3. How are achievement and learning affected by resources?

The teaching staff were well qualified but the majority had been in post for one year or less. There was a newly created senior management structure with the recent appointment of two Deputy Education Managers and three Senior Teachers. Roles and responsibilities at senior management level were clearly defined and carefully monitored by the Head of Education. There was a strong emphasis on the day-to-day management of the education department with insufficient attention given to quality assurance and strategic planning. The Special Education Needs Co-ordinator (SENCO) was unable to have direct contact with young people because of time delays in gaining security clearance from the appropriate bodies.

The quality of teaching accommodation was good. There was an impressive range of specialist teaching accommodation in Food Technology, Physical Education, Hairdressing, Information and Communications Technology (ICT) and the Performing Arts. Most rooms were fit for purpose but many were in poor decorative order. Resources to support learning were generally good although there was a lack of multi-media and ICT resources outside of the specialist teaching areas. There was, however, poor ventilation in the Hairdressing suite and the fixed chairs in the ICT rooms were unsuitable.

A designated library area had been established in the new teaching block. There was a very limited range of stock either for reference or lending purposes and an absence of suitable materials to support learning.

4. How effective are induction, assessment and the monitoring of learners' progress?

Initial assessment of young persons prior educational attainment was too hurried and superficial. For example, young people were placed on residential units and completed a basic skills assessment within the first 24 hours of their stay at Medway. Attempts should be made to conduct a more detailed assessment over a longer period of time to ensure that teaching, guidance and

support staff had a greater understanding of a students' background and educational needs. Education staff attended most of the Detention and Training Order (DTO) planning and review meetings and offered valuable and detailed reports relating to a young persons progress in education. There was, however, a tendency for staff to talk at rather than negotiate with young people in these sessions. Further work was necessary to improve communications and the exchange of information, on site, between education staff and the Youth Offending Service (YOS).

Good progress had been made in improving the quality of target-setting and the monitoring and reporting of student progress within the education department. The revised arrangements, introduced at the time of the inspection, allowed for the setting and monitoring of more detailed targets for education and clearer reporting procedures.

The work of Training Assistants (TAs) in classrooms varied considerably. In the best practice, TAs were briefed by the teachers and played an active part in supporting learners. In the poorer examples, the TAs showed little or no interest in the lessons or the young people and did little to support learning. Clearer guidelines with appropriate training were necessary to ensure that maximum benefit was obtained from this valuable resource.

5. How well does the curriculum meet the national targets and needs and interests of learners?

The curriculum had improved and was continuing to do so, especially in terms of the range of suitable accreditation available.

It was well designed to provide education for those who could be anticipated as returning to secondary education, the majority of the learners. As well as the main curriculum subjects, there were vocationally oriented courses including Leisure and Tourism and Business Studies, and NVQ Hairdressing. GCSE support was available to those part-way through courses, sometimes in conjunction with their previous schools and a limited programme of 1:1 for those with particular literacy or language needs. Suitable provision for the very few who were over school leaving age was lacking.

The broad curriculum reflected the national curriculum, apart from Modern Languages. Lessons were planned for 45 minutes each in the morning and 40 minutes in the afternoon, but with no mid-morning drink break. Double periods were well used for practical subjects and there was good variety throughout the day. The weekly programme included tutorial time. The scale of specific English and maths lessons was well below that expected. Groups only attended 7 specific lessons, amounting to only about 5 hours per week for both subjects. Whilst there were good opportunities for written and oral English in other lessons such as drama and Humanities, the level of maths/numeracy provision was a concern.

Evening and weekend activities were not included in the Education Department programme but the units made some arrangements. Homework was not set as standard.

All courses were well linked to suitable accreditation, mainly through the AQA Unit Award scheme and learners had started to gain significant numbers of nationally recognised awards. On call examinations were being used for literacy and numeracy and others which might prove more appropriate to short-stay learners were being explored. Initial steps had been taken to introduce KS3 SATs tests, where possible, but the short time that teachers knew learners was seen as a possible difficulty when providing teachers' assessments. GCSEs continued to be supported and 10 had passed the summer examinations, some in conjunction with their schools.

The learners were allocated to classes on the basis of their living unit, which helped to ensure social stability in classes, and was generally beneficial. However, classes became very mixed in terms of age and attainment so that there was a particular need for differentiated work. Whilst some attempt was made by teachers and their expectations of learners were generally appropriate, there was a lack of suitable information on individuals' particular needs which will need to be addressed when there is a SENCO effectively in post. There was insufficient emphasis on providing individually challenging work or specific learning approaches.

6. How well are learners guided and supported?

The quality and provision of guidance and support for students ranged from good to satisfactory. Personal Advisors from the local Connexions partnership made weekly visits to the establishment to interview young people to provide information and offer individual support. The service level agreement with the local Connexions partnership was agreed some time ago and was in need of updating to reflect the needs of the establishment and in developing the role of the Personal Adviser. Students had access, on site, to a very limited range of careers information.

Significant progress had been made since the previous visit in developing and implementing an effective behaviour management policy. Students understood the new system which was applied, though the award of points at the end of each session, in a consistent manner. The behaviour of each student was reviewed at the end of each day at lengthy staff meetings and appropriate information forwarded to the residential units. Behaviour plans, with clearly stated targets, were set for those students considered to be in need of specific and additional support. Young people referred to the 'chill out' room were dealt with in a supportive manner.

LEADERSHIP AND MANAGEMENT

7. How effective are leadership and management in raising achievement and supporting all learners?

Considerable progress had been made since the previous inspection visit in improving the quality of leadership and management of the education department. Duties of several managers had been clearly defined and were being monitored on a regular basis. Attempts were being made to increase the accreditation rates and improve the quality of curriculum planning. Very good progress had been made in developing and implementing an effective behaviour policy.

Arrangements for the supervision of staff were not applied consistently across the department and there was a degree of confusion and time delays in organising staff supervision sessions. There was a system of lesson observations organised by service staff which was working satisfactorily.

The quality of documentation was good. The self-assessment schedule was realistic and well presented. The quality of quantitative and qualitative data relating to student performance was good.

Tackling Offending

9

STANDARD 6: TACKLING OFFENDING

Each trainee is subject to an individual offending behaviour programme which is consistent with his/her assessment and other elements of the training plan.

The director has mechanisms in place to develop, monitor and evaluate the STCs offending behaviour programmes, drawing on advice from external consultants.

This standard looks at whether:

- the nature and effectiveness of the individual trainee's offending behaviour programme.

TACKLING OFFENDING

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • A range of crime avoidance packages are in place. • Crime avoidance sessions take place twice daily. • There are much clearer links between key work sessions and the training plan which is monitored. • The YOS team's attachment to, and location in units has improved accessibility and inter – disciplinary working. 	<ul style="list-style-type: none"> • A major priority area in the next phase of the centre's development should be targeted towards improving the quality of delivery of programmes.
RECOMMENDATIONS	
<ul style="list-style-type: none"> • Managers should ensure that crime avoidance and offending behaviour programmes should be delivered by staff who have been appropriately trained to the required levels of competence. 	

- 9.1 Tackling young people's offending behaviour is an activity fundamental to the purpose of the STC. The ability to do so has historically been hampered by staff shortages, inexperience and the frequent turmoil in the management team.
- 9.2 During the course of this inspection we have seen some signs of improvement but like the manager responsible for this service we have concluded that there is much to do to make it fully effective.
- 9.3 There was evidence of training plans having a sharper focus upon the young person's criminogenic attitudes and behaviours. As reported in chapters 4 and 6 these plans were monitored by managers and staff were held to account if the focus of the plan was not addressed in individual key work sessions. We saw direct evidence of managers auditing records and challenging staff when they found shortcomings.
- 9.4 There was also an expectation that crime avoidance programmes were delivered by unit staff on a twice-daily basis. These sessions were then monitored and evaluated on an ongoing basis. Comprehensive resource packs were held on each house unit with the expectation that each session will be planned in advance and delivered in sequence.
- 9.5 Both of these initiatives were important and we recognised the commitment to establish them at a time of extreme staffing difficulties. However we have concluded that it was an unrealistic expectation to expect inexperienced, unqualified staff to deliver sophisticated programmes of work which required at a minimum some theoretical understanding of the subject matter and counselling and communication skills in order to avoid inadvertently reinforcing inappropriately held attitudes and behaviours. We observed staff "grappling" with the content of individual sessions and finding themselves out of their depth when questioned or challenged by young people. We therefore commend that the staff charged with delivering such sessions are offered training and development opportunities to develop their competence and knowledge base. They should then be afforded opportunities to develop their delivery skills by working in conjunction with an appropriately qualified and experienced colleague.
- 9.6 We noted that two six-week long offending behaviour group work programmes were due to start in October. There was also an intention to introduce a wide range of materials designed to meet the needs of individuals. These developments have will also be potentially valuable, but again their success will be dependent upon the centre securing a stable management and staff group so that skills can be built and experience consolidated.
- 9.7 The Youth Offending Service (YOS) within the STC was an important resource carrying out individual work and providing an important conduit

to the young person's youth offending team or local authority social worker. The YOS workers had recently become unit based, an important development designed to build a stronger link between the various operational arms of the STC. The intention to extend further the multi-disciplinary nature of the team to comprise social workers, a drugs worker, youth worker and education welfare officer, a community reviewing officer and a mental health nurse will equip it with the range of skills necessary to provide a broad range of relevant and appropriate services to the young people. Young people will be able to utilise this service while in the STC and, importantly, immediately following release so that their transition from custody to community can be as smooth as possible.

Health Care

10

STANDARD 7: HEALTH CARE

All trainees will be provided with health care to National Health Service, and with health education.

This standard looks at whether:

- the extent and quality of health care, including health promotion and education.

HEALTH CARE

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • The health care team continued to make a positive contribution to the day to day care of young people. A comprehensive health care programme was available to all young people. • Health care staff were actively involved in the education of young people. A recent development was the provision of first aid training for young people. • The health care team continued to play a key role in the implementation and oversight of practice and procedures relating to self-harm and suicide. • Arrangements were in place for young people to see a female GP if this was required. • Health care staff were to be provided with training in breakaway techniques. 	<ul style="list-style-type: none"> • There had been a high turnover in staff in the health care team, resulting in a number of vacant posts. Agency staff had been used to supplement the health care team. A number of new staff had been appointed and were awaiting clearance. • There was a need to risk assess contacts between young people and nurses. • There had been a gap in the provision of psychiatric and psychological services. A new consultant psychiatrist was due to take up post in the near future and it was hoped to develop a specialist mental health service. • A review of the health care teams involvement in the post physical intervention period should take place.
RECOMMENDATIONS	
<ul style="list-style-type: none"> • Contacts between young people and nurses should be risk assessed and management plans put in place where necessary. • The Director and Health Care Manager should consider plans to create a specialist Mental Health Team. 	

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- 10.1** The health care services were sub-contracted to an agency Primecare Forensic Medical Services (FMS) which was responsible for providing professional supervision and management to the team. At the end of the first phase of the inspection the health care manager left the STC for a promotion opportunity after a period of three and a half years at the centre. Primecare provided a temporary manager for several weeks before the senior nurse was promoted. The new manager was still undergoing a detailed induction programme arranged by Primecare which included training and visits to other organisations at the time of the inspection.
- 10.2** The positive contributions made by the nursing staff to the day to day life of the centre had continued. The nurses were known and valued by young people and staff. However health care staff described the previous twelve months as a difficult period for the centre and for the health care team. They felt the expansion of the centre had been a difficult process to manage and they had struggled to appoint nurses to the team. The team had also lost seven nurses within the period between April 2002 to March 2003, resignations to which the unsettled nature of the centre had contributed.
- 10.3** The health care team comprised a health care manager, a senior nurse and 6.6 fulltime equivalent nurses. To cope with the large number of vacancies within the team the manager had recruited two experienced nurses from an agency upon three-month contracts. The new health care manager told us the team would not have been able to fulfil the contract with the YJB had these agency nurses not been available. During the second phase of the inspection we were told that two new nurses had been appointed but were awaiting CRB checks. An additional recruitment campaign was due to take place in October to appoint to the final 2.6 posts which remained vacant. The health care manager and one of the nurses had dual qualifications. They were both Registered General Nurses (RGN) and Registered Mental Health Nurses (RMN).
- 10.4** A psychiatric nurse (RMN) was also employed on a part-time basis by Rebound to undertake sessional work at the centre. The nurse offered individual work to trainees who were identified as requiring counselling. The RMN was placed in the Youth Offending Service team, but worked closely with the other health professionals at the centre.
- 10.5** The young people continued to have access to a visiting GP, dentist and optician and were able to access other NHS provision when health care needs could not be fully met within the centre. As part of the admission process young women were asked if they would prefer to be examined by a female GP. Although the medical practice providing the service did not have a female GP, one would be requested from elsewhere.

Role of the nursing team

- 10.6** The range of training, skills and experience of the health care team was broad enough to offer a varied approach to meet the needs of the young people. A health assessment was undertaken as part of the initial assessment for every new trainee. A risk assessment was undertaken by nursing staff at the point of admission, based on information received at the time of admission and after discussion with the young person. Nursing staff provided reports to planning meetings and case management reviews and attended whenever possible.
- 10.7** Every trainee was given the opportunity to be seen by a nurse each morning before attending school and each evening before going to bed. The young people generally appreciated the contact with the nursing staff. However, some nurses had been subject to verbal abuse by young people during the particularly difficult periods at the centre.
- 10.8** A medicine round was undertaken each morning, at lunchtimes and evenings, as necessary. Medicines were securely stored in the medical room and were securely transported around the centre.
- 10.9** Nursing staff were on duty in the centre until 10pm and then one of the team was available on-call during the night.

Professional practice

- 10.10** The nursing staff continued to play a key role in the review and oversight of practice and procedures relating to self-harm and suicide (SASH). A representative from the health care team attended each house unit's multi-disciplinary team meeting each week. All young people were discussed at the meetings and those subject to SASH or FOCUS (a lower order process of monitoring) were reviewed. A risk management plan was developed. Young people were only removed from the SASH procedure after full discussion had taken place at the weekly multi-disciplinary meeting.
- 10.11** The health care team responded expediently to all incidents of restraint by offering health assessments to trainees where there was no physical injury. They were expected to complete a 'body map' if any bruising or other injury had occurred. However, young people were not always willing to discuss how they were feeling with a nurse so soon after an incident. Some of them were still feeling frustrated and angry. The duty nurse always returned to the young person when they had calmed and followed the necessary procedure. They also talked with staff and ascertained if they had sustained any injuries. They kept a written record of all staff injuries reported to them. Young people were offered the opportunity to talk about how they felt after the incident and staff who were injured were offered counselling.

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- 10.12** Health care staff continued to provide health education for young people in the education facility. They were pleased to confirm that there had continued to be improvements in this area. The number and range of sessions had increased to twelve each week. These included health promotion, mental and physical health, substance misuse and sexual health. Young people were also being given the opportunity to learn first aid and earn a relevant and accredited certificate in basic practices.
- 10.13** The nursing team was also aware of the importance of supporting young people who had been involved in substance misuse. The nurse carrying out the initial health assessment asked the relevant questions about substance use and reviewed all the documentation accompanying the young person. They also carried out a visual check of the young person and if concerned would arrange for the GP to see the young person. The GP would examine the young person and strategies were in place for dealing with withdrawal symptoms if needed.

Future Development

- 10.14** There had been a gap in the provision of psychiatric and psychological services at the centre in recent months. A new consultant psychiatrist was to take up post in the near future. It was envisaged that he would provide two separate three hours sessions to the centre each month. Support and consultation were to be provided to staff and direct assessment of young people undertaken as necessary. Until the appointment of a permanent chartered psychologist, professional oversight was being provided by an interim chartered clinical psychologist contracted by FMS.
- 10.15** The new health care manager was keen to develop a 'mental health team' with the qualified RMN nurses, who would provide support and guidance to staff, as well as working effectively with young people presenting with mental health difficulties. The role of the sessional consultant psychiatrist was to be a crucial element to a team approach.
- 10.16** The nursing staff did not undertake the same training as care officers before taking up their post. An induction programme was available that had been produced by Primecare. The new health care manager was reviewing the induction programme and was planning to revise it in collaboration with staff from Rainsbrook STC. Nursing staff were not expected to be trained in PCC. However, it had been recently decided that the nursing staff would be provided with training in 'breakaway' techniques. This was a positive development.
- 10.17** It was also envisaged that nursing staff would be more regularly involved in training for care officers. This would include advising them about specific health issues that might arise with young people.

10.18 The new health care manager had a number of plans for the improvement of the medical centre, including replacing floor covering and purchasing new equipment. The Director was supporting this.

Premises, Security and Safety

11

STANDARD 8: PREMISES, SECURITY AND SAFETY

The design of the premises and the security measures in operation at the STC prevent unauthorised entry or exit and the passage of unauthorised items and substances, and ensures the safety at all times of trainees, staff and visitors.

The STC is properly maintained and furnished and has appropriate facilities.

This standard looks at whether:

- the security arrangements for the STC, the condition, adequacy and fitness for purpose of each of the buildings in the establishment.

PREMISES, SECURITY AND SAFETY

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • The living conditions had improved and the programme of decoration and refurbishment will maintain standards • There is a systematic programme in place to improve searching and other aspects of security. • Relationships between security, health and safety and operations was much more clearly defined. 	<ul style="list-style-type: none"> • The provision of a video camera would assist security training and operations. • Health and safety would benefit from an increased focus. • Consideration should be given to developing a Health and Safety consultative committee.
RECOMMENDATIONS	
<ul style="list-style-type: none"> • The Director should consider the acquisition of a hand-held camcorder in order to improve the training of premises searching practices. • The Director should ensure that the plans for a major incident simulation exercise should be confirmed and implemented in the first half of 2004. 	

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- 11.1** There has been a significant improvement in the quality of decoration and cleanliness of the establishment. A programme of decoration, refurbishment and repair was established and was intended to lead to the maintenance of consistently high standards on an ongoing basis.
- 11.2** Security at the establishment, like other key tasks, has also benefited from being given a clearer focus and priorities have been set. Searching, security maintenance and security intelligence have been identified as key target areas, and progress in each of these was being monitored at the security managers regular supervision with the Director. Regular audits covering all aspects of security was also in the process of development and implementation.
- 11.3** Each of these areas were high priority and we agreed with the security managers judgement that searching practice could be improved by staff having the benefit of regular refresher sessions video recorded and subsequently discussed during the course of supervision.
- 11.4** The interface between the security manager and operational colleagues has been redefined and as a result there was much greater clarity about respective responsibilities and accountabilities. It was anticipated that these improvements would be built upon by the security managers meeting with the residential service managers on a monthly basis.
- 11.5** Good relationships have been established with the police, the fire service and the prison service and it was intended to plan and undertake a major incident simulation in the first half of 2004.
- 11.6** Given the necessary increased focus upon security, it was perhaps inevitable that aspects of health and safety had not received the same level of priority. The planned Health and Safety Consultative Committee which at the time of the 2002 inspection was intended to be the vehicle for maintaining the health and safety profile across centre had not been formed. Given the complexity and increasing range of tasks being undertaken, we commend that further thought is given to its establishment.
- 11.7** However we found that:
- general tasks had been risk assessed;
 - free eye tests have been reinstated;
 - clubs for young people had been risk assessed ;
 - fire drills were taking place on a monthly basis;
 - safety signage, including fire escape signs had been improved;

- a protocol for " productions" i.e. the presentation of young people to the police or to court had been agreed;
- back to work assessments had been re-established;
- facilities for people with disabilities (including wheelchair access) had been improved; and
- the management of incoming mail had been improved and the necessary processes for managing opened mail or seized contraband established.

Standards and Criteria

A

STANDARD 1: PURPOSE AND FUNCTION

The STC has a clear and well understood sense of purpose which fully reflects the vision, goals and values determined for STCs by the Home Office.

Criteria

- 1.1** The STC has a written Statement of Purpose which describes accurately and simply its principal goals as laid down by the Home Office.
- 1.2** The statement is displayed prominently throughout the STC and is made available to the family/carer of each trainee and other relevant parties. (P.1)
- 1.3** Managers and staff understand and are committed to the vision, goals and values of the STC.
- 1.4** The STCs Equal Opportunities policy is fully in accord with Home Office policy, is published and drawn to the attention of all trainees, staff and visitors, and is routinely monitored. (A.17)
- 1.5** Trainees are assessed and treated as individuals. Each trainee and his/her family/carer is fully and actively involved throughout his/her assessment, planning and review processes as far as possible. (A.10)
- 1.6** The regime offers equal standards of care, education, training, safety and security to all trainees, irrespective of race, religion, gender or disability.
- 1.7** Trainees and their families are fully consulted about decisions, which affect their lives.
- 1.8** Explanations are given to all trainees and their families/carers about how particular decisions affecting them are reached.
- 1.9** Trainees are made aware of their responsibilities and the standards required of them and are informed of their rights and privileges. (A.11)

STANDARD 2: MANAGEMENT AND STAFFING

The STC has sufficient trained staff to achieve the goals set by the Home Office.

Staff are properly managed to enable them to work effectively as a multi-disciplinary team and operate the STC to the standards required.

Criteria

- 2.1** The number of staff on duty at the STC at any time is sufficient to ensure that all aspects of the regime is delivered to the specified standards.
- 2.2** The composition of the staff teams should take account of the gender and ethnicity of trainees. (A.4, 0.6, 0.9)
- 2.3** All posts at the STC have written job descriptions, setting out the lines of accountability, responsibilities and authority of the jobholder, and a summary of the personal qualities, competencies and skills required. (SAS 2.5, 0.11)
- 2.4** All applicants for jobs at the STC are vetted and all offers of employment are made subject to satisfying the relevant vetting requirements. No employee is allowed to work with a trainee until full employment vetting has been completed. (0.16)
- 2.5** Certified custody officers are the only staff at the STC who perform custodial duties in relation to trainees. (0.7, Section 9 CJPO 1994)
- 2.6** The staff team corporately possess the skills and knowledge required to meet the goals of the STC and each individual member of staff possesses the necessary qualifications, skills and experience for the work (SAS 2.13)
- 2.7** There is a continuing training and development programme for all staff consistent with the objectives of the STC and the individual members of staff personal development needs. (SAS 2.14, 0.24, 0.25)
- 2.8** Custody officers will receive annual refresher training by accredited instructors in physical restraint and initial and regular refresher training in the use of short duration breathing apparatus. (N5 and L3)
- 2.9** All work groups and individual members of staff have clear objectives and performance measures.

- 2.10** All members of staff receive regular supervision from their managers and records and decisions are closely monitored. (SAS 2.9, SAS 2.17, 0.42 and 0.44)
- 2.11** There are regular and programmed staff meetings, shift hand-over meetings and specialist team meetings to ensure that all staff are informed about contemporary issues and have the opportunity to feedback their views to appropriate managers. (SAS 2.11, SAS 2.25, 0.49 and 0.51)
- 2.12** Each STC has an external line manager who will monitor the performance of the STC. (SAS 2.20 and SAS 2.22)
- 2.13** All contracted out STCs have a Home Office monitor to monitor the performance of the STC against the requirements of the contract.

STANDARD 3: ASSESSMENT, PLANNING AND REVIEW

There is a full assessment of each trainee's individual needs and problems and a flexible, individual training plan for meeting as many of those needs and for tackling as many of those problems as possible and for the directing of remedial attention to offending behaviour.

The progress of each trainee is closely monitored, recorded and regularly reviewed.

Criteria

- 3.1** Each trainee will be the subject of an initial written assessment within 2 weeks of admission. (B.1)
- 3.2** Each newly admitted trainee will also be subject to a systematic risk assessment which is reviewed and updated throughout the period in custody. (SAS 5.35)
- 3.3** On the basis of these assessments, an initial training plan is produced within 2 weeks of admission to respond to identified need and tackle offending behaviour. The plan will define the work to be carried out, by which staff, and the timescales which will apply. (B.3)
- 3.4** The trainee's family and, if appointed, the post release supervising officer will have opportunity to actively participate in the assessment and planning process.
- 3.5** The training plan is monitored, regularly reviewed and updated in light of the trainee's progress. (B.5)
- 3.6** Management have mechanisms in place for supervising those involved in delivering the training plan and monitoring and evaluating its effectiveness. (B.5)

STANDARD 4: CARE OF YOUNG PEOPLE

Day-to-day care is of a good, provided by staff who can relate effectively to trainees in a way which takes into account their individual needs and safeguards and actively promotes their welfare. Trainees whose conduct is unacceptable are dealt with using positive and fair sanctions.

Trainees are given every opportunity and encouragement to re-establish, maintain and strengthen contacts with family, friends and significant others outside the STC.

The STC's admission procedure is positive and welcoming, not overbearing and intimidating.

The induction programme is designed to establish positive relationships and co-operation with trainees, to help them to adjust to life in the STC, and to set clear expectations about their behaviour in custody and on release.

Criteria

- 4.1** Trainees are helped by staff who can relate effectively to them. (SAS4.2, SAS 4.11)
- 4.2** Staff to ensure that trainees meet regularly as a group to share their views about daily life in the unit and that they and their families are fully consulted about decisions which affect their lives. (SAS 4.29, SAS 4.30)
- 4.3** Staff respect trainee's privacy and confidentiality so far as it is consistent with the provisions of security, protection of other residents and staff, and safety of the individual trainee. (SAS 4.31)
- 4.4** Trainees have available to them the choice of structured and unstructured activities enabling each day to be occupied purposefully in a way relevant to their needs and consistent with their individual training plans. (F2, F3, F4, F7 and F8)

- 4.5** Trainees are only locked in their bedrooms at night between the hours of 9.30pm and 7.30am or, exceptionally, when necessary for their own safety, the safety of other trainees or the security of the centre. Trainees are encouraged to maintain outside contacts by writing and receiving letters, telephone calls and visits from family and friends subject to the need to assure the security of the centre and the safety of the trainee. (H2, H3, H5 and H6)
- 4.6** The trainee should be encouraged to establish positive links with the local community through education, training and offending behaviour programmes.
- 4.7** Trainees will receive assistance and facilities to enable them to have access to their legal advisor, post release supervisor, the monitor, independent persons and, where necessary, other external agencies.
- 4.8** Each trainee is made aware about expectations of conduct and control in the STC. (SAS 4.14)
- 4.9** Good order and discipline is maintained and promoted by staff through appropriate supervision of trainees and understanding of instructions on the maintenance of good order and the application of sanctions. (M.1 and SAS 4.15)
- 4.10** Systems of roles, incentives and sanctions are published and explained and understood by all staff and trainees and there should be evidence that they are consistently and appropriately applied. There is a policy and written guidance on the use of restraint and there is evidence that this policy is implemented appropriately and is used only when necessary. (SAS 4.19, M.3)
- 4.11** Each episode of physical restraint, single separation or the application of sanctions should be separately recorded in permanent form. (SAS 4.19, M.4)
- 4.12** Trainees placed under single separation are checked in accordance with statutory rules and regulations. (M.6)
- 4.13** There is a representation procedure which provides trainees with the opportunity to make complaints about their custody and treatment in the secure training centre. (C.21)
- 4.14** All representations are treated confidentially and are investigated thoroughly and speedily. (C.21)
- 4.15** Trainees are aware that they can discuss their concerns in private with an independent person, a representative of an approved telephone help line, or with the Youth Justice Board Monitor. (C.21)

- 4.16** Systems are in place to monitor the incidence and outcomes of complaints. (SAS 4.39)
- 4.17** The STC has specific policies and practices for keeping trainees safe from self harm and abuse from family, staff, visitors and other residents. These policies and practices are consistent with the ACPC procedures in the area in which the STC is located and conform to guidance in 'Working Together under the Children Act'. (SAS 4.24)
- 4.18** Trainees are encouraged and allowed to practice their faith, observe their religious, racial and cultural identity as is their custom at home in the community. This extends to diet and physical appearance which should be appropriate to their religious, cultural and/or ethnic background. The admissions procedure should ensure that the legality of the secure training order is confirmed, the trainee's initial physical needs (including health needs) are met, and the trainee is immediately subject to the induction programme designed to provide guidance and information about the secure training centre.

STANDARD 5: EDUCATIONAL AND VOCATIONAL TRAINING

The STC conveys an ethos where learning is valued and trainees are encouraged to improve their standards of education or achievement.

Trainees of school age will experience a broad and balanced curriculum appropriate to their age, ability and level of attainment with a view to a return to school on release.

Trainees who will be above school age on release will receive a programme of educational and vocational training designed to prepare them for entrance to further education, training or work experience

Criteria

- 5.1** The training plan of each trainee will set out his/her educational goals which will be based upon the trainee's education records and level of attainment. The educational and vocational training goals will be regularly revised by teachers in the light of his/her progress. There will be close links between custody and care staff, with colleagues involved in education and this will be extended to maintaining close contact with schools in cases where trainees are of school age on release.
- 5.2** In conjunction with supervising services, links are developed with colleagues, employers and other community agencies to provide further education, vocational training, work experience and employment for trainees on release.
- 5.3** As far as possible, the national curriculum programme of study will form the basis of the curriculum for trainees of school age. Trainees above school age on release will receive an appropriate programme which prepares them for the next stage of education, training or employment.
- 5.4** The curriculum should be extended to include a range of cultural, sporting and leisure activities.
- 5.5** Trainees progress is monitored and evaluated and recorded so that records for parents, next educational placements and employers can be provided.

- 5.6** Each trainee is presented with an up-to-date record of achievement on release.
- 5.7** Trainees will receive spiritual, moral, social and cultural guidance designed to enhance their personal development, behaviour and attitudes.
- 5.8** Full time and sessional teaching staff should be suitably qualified and experienced and sufficient in number to deliver the planned programme of education and vocational training.
- 5.9** Teachers, instructors and care staff engaged on educational activities have sufficient knowledge and understanding of the subject or areas they teach/support.
- 5.10** Teachers have effective arrangements for induction, appraisal and professional and career development.
- 5.11** There is appropriate and varied accommodation and sufficient learning resources for the range of educational and vocational activities.

STANDARD 6: TACKLING OFFENDING

Each trainee is subject to an individual offending behaviour programme which is consistent with his/her assessment and other elements of the training plan.

The director has mechanisms in place to develop, monitor and evaluate the STCs offending behaviour programmes, drawing on advice from external consultants.

Criteria

- 6.1** Each trainee be the subject of an offending behaviour programme which is based upon his/her profile of criminal tendencies.
- 6.2** The programme is regularly reviewed by the trainee's keyworker in consultation with other staff and the post release supervisor. (E1, E6 + E7)
- 6.3** The post release supervisor monitors and keeps the keyworker informed of progress of the offending behaviour programme during the supervision period. (E7)
- 6.4** The Director has mechanisms in place to evaluate the effectiveness of the offending behaviour programme. (E3)

STANDARD 7: HEALTH CARE

All trainees will be provided with health care to National Health Service Standards, and with health education.

Criteria

- 7.1** All trainees will have as a right, access to NHS primary and secondary health care and this will include access to suitably trained and qualified medical and nursing staff, including on-call facilities for 24 hours a day. (G5 + G7)
- 7.2** Each trainee will be examined within 24 hours of admission and within the 24 hours preceding their release.
- 7.3** Each trainee will receive health education appropriate to his/her age, gender and lifestyles.
- 7.4** Adequate arrangements are made for the storage, recording and administration of medication.
- 7.5** All staff in regular contact with trainees are aware of those who have been identified as being at risk of suicide or self harm and strategies are in place to monitor, supervise and offer appropriate support. (G10)
- 7.6** Trainees admitted as in-patients in the STCs medical centre have access to normal education and daily training programme and regime activities subject to clinical restrictions. (G12)
- 7.7** Out-patients support and treatment will be available to all trainees discharged from health care centre. (G11)

STANDARD 8: SECURITY AND SAFETY

The design of the premises and the security measures in operation at the STC prevent unauthorised entry or exit and the passage of unauthorised items and substances, and ensures the safety at all times of trainees, staff and visitors.

The STC is properly maintained and furnished and has appropriate facilities.

Criteria

- 8.1** Within the constraints of safety and security, the STC provides an attractive, relaxed and homely living environment. (SAS 5.3)
- 8.2** Security management and audit procedures covering all aspects of security and safety are in place and all staff are fully aware of their responsibilities.
- 8.3** There is detailed policy and guidance on the searching of all communal areas, bedrooms, trainees and their belongings and of visitors, staff, goods and mail entering and leaving the STC. (J6, SAS 5.29)
- 8.4** Young people are aware of the rules covering searches. (SAS 5.29)
- 8.5** There is a policy and procedure for the maintenance of all security systems such as keys, magnetic cards, beepers, and alert systems. All staff are aware of how to use these and the circumstances for doing so. (J12, J13, SAS 5.32 + SAS 5.33)
- 8.6** There are adequate arrangements for safeguarding personal property from theft or damage by others and all goods which are stored on behalf of trainees are kept secure and are properly receipted.
- 8.7** Trainees should have their own room which is fit for purpose and they are permitted to personalise their own rooms to the extent approved. (K1, K2, SAS 5.8 + 5.9)
- 8.8** Subject to the need for security, trainees privacy and dignity is preserved. (K6 + SAS 5.11)

- 8.9** There is a health and safety policy statement which fully meets all statutory requirements and staff are aware of their responsibilities for health and safety. (L1, L2, SAS 5.13, 5.14 + 5.15)
- 8.10** Clear emergency procedures and contingency plans are in place for managing fire, emergency incidents and disruptions. These procedures and plans are regularly tested and updated and all staff are aware of their responsibilities and the action to be taken. (P2, P2, P3, SAS 5.16, 5.17, 5.19, 5.20, 5.21, 5.22 + 5.25)
- 8.11** Local authorities and emergency services are regularly consulted and involved in drawing up, testing and revising emergency and contingency plans. (P4 + P5)