

# **INSPECTION OF MEDWAY SECURE TRAINING CENTRE**

**KENT**

**OCTOBER 2004**

# COMMISSION FOR SOCIAL CARE INSPECTION

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  - Host the Children’s Rights Director role.
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# INSPECTION OF MEDWAY SECURE TRAINING CENTRE

## KENT

### OCTOBER 2004

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# Summary

## 1

- 1.1 This annual inspection was conducted in October 2004 by four Inspectors working for the Commission for Social Care Inspection (CSCI) and three of Her Majesty's Inspectors of Schools.
- 1.2 The report of the Social Services Inspectorate of October 2003 commented on the need for a period of consolidation within the Medway Secure Training Centre in order to allow plans drawn up at that time to bed down and achieve expected outcomes. The SSI described how the centre had been through a period of crisis following many changes in management personnel. At the time of the 2003 inspection a new management team was in place and plans drawn up to improve the care and treatment of trainees.

### Overall Assessment

- 1.3 The management team had remained stable throughout the last year, creating a base for a consistent and useful implementation of the action plan set at the time of the last inspection. Many of the goals of that action plan had been realised. We found a calm and positive attitude to the care and education of trainees at the centre. There was evidence to suggest that providing the tight management control, the child centred approach of all staff and the drive to improve services are all maintained this process could be improved upon.

### Main Findings

- 1.4 We have seen:
  - a stable senior management team;
  - clear roles within the management team that were reflected in good child care practice throughout the centre;
  - appropriate relationships between staff and trainees;
  - respect for trainees in the centre;
  - improved physical conditions;
  - improved safeguarding for trainees; and

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- a centre striving to improve in all aspects of its work.
- 1.5 There remains work to be undertaken however in order to ensure an acceptable service is maintained and improved upon across the centre. There are areas for development that, if addressed in the immediate future may create an instant improvement in the quality of care offered to trainees.
- 1.6 These areas for development include improvements in:
- the staffing levels at night and in the evening;
  - the quality of food, particularly at teatime;
  - the delivery of the crime avoidance programme;
  - improved communication with staff and trainees throughout the centre; and
  - a redrafting of the statement of purpose of the centre.

## **Management Resources**

- 1.7 There is a well structured, keen and dedicated management team at the centre. The team operates effectively as a group to the benefit of the centre and trainees.

## **Reading the remainder of this report**

- 1.8 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; and
  - Appendix A list the standards and criteria used as a basis for the inspection.



# Recommendations

## 2

- 2.1 The Director should, in conjunction with the Youth Justice Board revise the statement of purpose to ensure it reflects accurately the purpose of the Centre.
- 2.2 Senior managers should design a measurable strategy for the implementation and monitoring of diversity across the centre.
- 2.3 Policy in relation to the ‘welcome pack’ for trainees should be revised to ensure it more accurately reflects life in the Secure Training Centre and to ensure its availability in the common languages understood by trainees in the centre as well as understandable to those with literacy problems.
- 2.4 Senior managers must immediately address the shortage of staff on duty at night.
- 2.5 Senior managers should develop, in conjunction with the staff team, a means of effectively communicating management actions and plans as well as immediate news across all staff teams.
- 2.6 Senior managers must ensure that staff supervision, appraisal and team meetings take place consistently across the STC without delay.
- 2.7 Consideration should be given to incorporating the work already undertaken at assessment and review into a care planning process within the centre to supplement the work already being undertaken.
- 2.8 Further work needs to be carried out to evaluate the outcomes for young people of the work undertaken at the centre.
- 2.9 Practice and recording must ensure physical restraints conform to the Secure Training Rules 1998.
- 2.10 The provision of food after school for trainees needs an urgent review to ensure quality is improved.
- 2.11 The complaints procedure needs reviewing and a new procedure along the lines of that suggested in paragraph 8.15 should be considered.
- 2.12 Clothing for trainees, suitable for wet and cold weather, should be available on request.
- 2.13 Managers at the centre should provide training for training assistants focused on learning support.

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- 2.14 The centre should improve the range and quality of ICT facilities (hardware and software).
  - 2.15 Staff at the centre should co-ordinate the planning of education courses and offending behaviour programmes.
  - 2.16 Managers at the centre should take steps to improve the library
  - 2.17 Senior managers at the STC should, along with the Youth Justice Board review the methods used to tackle trainees offending behaviour.
  - 2.18 Work should be undertaken with Education and Healthcare staff to revise the methodology of teaching health care to trainees.
  - 2.19 Vacancies in the Health Care team need to be filled as soon as possible
  - 2.20 A review of the recording of the administration of medicines needs to be carried out. Individual charts which are also used for recording homely remedies should be used.
  - 2.21 The multiple use of tubes and pots of cream should cease and individual tubes and jars used and labelled.
  - 2.22 The supervision of security and safety on living units must be monitored more effectively.
  - 2.23 Consideration needs to be given to finding a way to ensure fresh, cool air can be supplied to the living units without it being uncomfortable for trainees, particularly in their bedrooms.
  - 2.24 Consideration needs to be given to purchasing more appropriate washing machines, suitable for heavy use.

# Introduction

## 3

- 3.1 This annual inspection of Medway Secure Training Centre (STC) took place between 25<sup>th</sup> October and 28<sup>th</sup> October 2004 in accordance with the provision of a service level agreement between the Home Office and the Commission for Social Care Inspection (CSCI). It was carried out by four members of CSCI and assisted by three HMI (OFSTED) inspectors.
- 3.2 This inspection used the standards and criteria devised by the Home Office in consultation with Social Services Inspectorate. They are reproduced as Appendix A to this report. They draw upon the Department of Health's secure accommodation standards and criteria, lessons from research and understandings of good practice, relevant legislation and guidance
- 3.3 The purpose of the inspection was to evaluate the effectiveness of the custodial element of the Detention Training Order (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 their safeguarding.
- 3.4 During the course of this inspection interviews took place with:
  - The Director;
  - Contract & Service Delivery Manager
  - Head of Care
  - Head of Youth Offending Services;
  - Senior Duty Operations Manager
  - Duty managers;
  - Head of Education;
  - Teachers and assistants;
  - Case managers;
  - Residential Managers;

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- Unit managers;
  - Training supervisors;
  - Training assistants;
  - Night supervisors;
  - Rebound's Health and Safety Manager
  - Security/health and safety co-ordinator;
  - Quality assurance officer;
  - Personnel and training officer;
  - The health care manager and;
  - A Voice for the Child in Care (VCC) representative;
  - The local Child Protection Co-ordinator;
  - A representative from Kent Police;
  - The Centre's G.P;
  - YJB Performance Monitor; and
  - GMB Union representative.

**3.5** Administrative records were examined and personal case files read.

**3.6** Trainees in all units were spoken to at different times of the day during the week

# Profile of Establishment

## 4

- 4.1 Medway Secure Training Centre (STC) was the first STC in the country and opened in 1998. It is a purpose built secure establishment near Rochester, Kent originally designed to house 40 young offenders. From late April 2002 Medway changed configuration to accommodate five remand beds. From November 2002 the centre expanded, increasing capacity to accommodate 76 trainees, eight beds being ring fenced for Section 91 placements. This expansion included a refurbishment of the existing living units and education centre and the creation of a purpose built 32 bedded unit broken down into living groups of eight with an additional and purpose built education centre which significantly increased opportunities for teaching and learning. From February 2003 Medway changed configuration to accommodate 13 remand places. From June 2003 the configuration changed again to accommodate 32 female places.
- 4.2 Following the resignation of the previous director the management was assumed by Rebound ECD's Director of Children's Services. This arrangement continues at the present time, plans were in place at the time of the inspection to appoint a deputy director.
- 4.3 Young people detained at the centre are subject to a Detention and Training order under the Crime and Disorder Act 1998, remand pending trial and/or sentence or serving Section 91 sentences. Detention Training Orders 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.
- 4.4 At the time of the inspection the centre was full, 76 trainees were resident.

**Table 1: Profile of the young people admitted in period October 2003 – August 2004**

Gender	Numbers
Male	157
Female	135

**Table 2: Table Details of Discharge Since 1 October 2003**

	Male	Female
Release Date Reached	75	41
Transferred	41	19
Early Release	7	8
Other (including sentenced)	91	

**Table 3: Age on Admission October 03 – August 04**

Age	Numbers
12 Years	4
13 Years	23
14 Years	110
15 Years	80
16 Years	67

**Table 4: Legal Status of Young People Admitted in Period October 2003 – August 2004**

	Sentenced	Remand
Total	212	80

**Table 5: Ethnicity of Young People Admitted in Period October 2003 - August 2004**

Ethnicity	Numbers
White British	190
Non-White British	102

**Table 6: Ethnicity of Trainees Admitted October 2003 – August 2004**

<b>Ethnicity</b>	<b>Numbers</b>
White British	190
White Other	8
Black British	1
Black African	14
Black Carib	22
Black Other	10
Mix W/Bcarib	24
Mix Other	5
Asian Pakistani	4
Asian Other	8
Chinese	2
Other Ethnic Group	4

# Statement of Purpose

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## **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"> <li>• The statement of purpose was prominently displayed.</li> <li>• There was evidence that the centre has a strong commitment to children's well being, with most staff adopting a child centred approach.</li> <li>• Young people and their carers were routinely involved in making significant decisions about their future.</li> <li>• Young people and their carers were provided with a range of useful information relating to the centre, their rights and the expectations placed upon them.</li> <li>• There was considerable evidence of the efforts made to respect, understand and meet the cultural and religious needs of the individual trainees.</li> </ul>	<ul style="list-style-type: none"> <li>• The statement of purpose needs to be reviewed to reflect more appropriately the role and purpose of the centre.</li> <li>• Written information provided for young people and carers was not immediately available in a range of different languages or in a format for those who are unable to read.</li> <li>• The information for young people given on admission needs to more accurately reflect the realities of daily life at the centre.</li> <li>• Senior managers have not yet developed a clear strategic approach for promoting diversity across all aspects of the work of the centre. A mechanism for monitoring outcomes is needed.</li> </ul>
RECOMMENDATIONS	
<ul style="list-style-type: none"> <li>• <b>The Director should, in conjunction with the Youth Justice Board revise the statement of purpose to ensure it reflects accurately the purpose of the Centre.</b></li> <li>• <b>Senior managers should design a measurable strategy for the implementation and monitoring of diversity across the centre.</b></li> <li>• <b>Policy in relation to the 'welcome pack' for trainees should be revised to ensure it more accurately reflects life in the Secure Training Centre and to ensure it is available in the common languages understood by trainees in the centre as well as understandable to those with literacy problems.</b></li> </ul>	

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- 5.1 The statement of purpose is a well-displayed document, highly visible across the centre and available for carers in their information packs. It is written in such a way as to be easily read. The statement meets the goals of the Home Office.
  - 5.2 The continued development of the centre will, however be hindered unless its function and purpose is clarified. The improved level of practice in the centre and an enhanced desire to assist trainees in managing their behaviour has generated a tension between the aspirations of staff and the statement of purpose. The centre is expected to provide much more than custody – and it does. But the extent to which developments in the quality of care should be taken forward is uncertain. Greater clarity and definition is needed in this respect to enable the statement of purpose to be achieved within the resources available to the centre.
  - 5.3 We found the values and beliefs expressed in the statement to be enshrined in practice across the Secure Training Centre (STC). There was respect for the views and wishes of the trainees on the part of the staff. We were aware of appropriate management action having been taken when staff had not adhered to these values. This reinforced the view that the centre took seriously the values to which it aspired and was prepared at a senior level to ensure those values were reinforced.
  - 5.4 The STC had an equal opportunities policy and we found that staff and trainees were aware of it. We saw several instances where the policy was being implemented. One young person was being assisted to follow his religious faith by observing Ramadan. We saw other equally valuable instances where staff were respecting the views and welcoming the diversity of the trainee population. Trainees were treated as individuals.
  - 5.5 Skin care and hair products were available at an acceptable level. Meals were on the whole culturally sensitive although choice was sometimes limited.
  - 5.6 Information for trainees on admission was only available in English; a few of the trainees at the centre at the time of the inspection did not have English as a first language and may well have valued these important documents to a greater degree if they were in a language other than English. We recognised the diversity of young people sent to the centre compounded the problem of the number of languages needed. However the leaflets produced for trainees on admission could perhaps be translated into the same languages used for the statement of purpose which was available in Punjabi, Hindi, Urdu, Bengali, Albanian and Welsh. Some trainees also suffered from literacy problems so consideration should be given to producing information in a medium that can be understood by all.
  - 5.7 Trainees speaking and reading English are provided with adequate information about the centre on admission, both in written form and by

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staff talking them through their rights, responsibilities and life at the centre.

- 5.8** The work of the centre in addressing diversity was not managed at a strategic level and outcomes not effectively and systematically monitored. For example, the subject was absent as a regular item on senior management meeting agendas. Where staff supervision sessions had been recorded there was a lack of comment under the heading Anti Discriminatory/Anti racist practice. The effective measures we saw were at the instigation of individuals who were aware of the issues involved and who were acting appropriately and sensitively. There did not appear to be a forum where issues of diversity could be routinely planned for, co-ordinated and addressed on a centre wide basis.
- 5.9** We noted that female care staff exceeded male staff by a ratio of nearly 2:1 as compared to a ratio of 1:1.4 in the population of trainees in the centre. However efforts were made, where at all possible to ensure there was a mixed gender staff group present on the living units. In the twelve months preceding the inspection 190 white children had been admitted to the centre whilst 102 non-white children had been admitted. The vast majority of staff were white and the imbalance with non white staff was striking. Clearly this is a problem that needs to be continually monitored and addressed.
- 5.10** We saw excellent work in progress to ensure that trainees were at the centre of the care planning process, the reviews of that plan and the care and education they receive.
- 5.11** Trainees were aware of the decisions that had been made about them and were knowledgeable about the reasons for that decision. They had preparation for, and input to, review meetings and were consulted about decisions made about them. The Voice for Children in Care (VCC) were at times asked to be advocates at such meetings and were able to attend.

# Management and Staffing

## 6

### **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"> <li>• Productive efforts had been made to recruit competent and skilled staff.</li> <li>• Plans were in place to develop and implement a clear and effective strategy for the retention of staff.</li> <li>• Active consideration was being given to succession planning for the centre.</li> <li>• The training and development opportunities for staff at the centre had improved considerably in the past year. Further developments were planned including the appointment of a training manager and training officer across the two Secure Training Centres (STC) managed by Rebound.</li> <li>• Senior managers from different departments regularly undertook monitoring visits to each of the living units and produced detailed written reports.</li> <li>• A range of new and revised policies and procedures had been developed in consultation with staff across the centre and were officially launched after appropriate training, for example the anti-bullying policy.</li> <li>• Roles and responsibilities for staff particularly those caring directly for young people were more clearly defined and understood.</li> <li>• The centre was restructuring the roles and responsibilities of the management team to ensure service delivery continued to improve.</li> </ul>	<ul style="list-style-type: none"> <li>• Active staff numbers continued to remain low placing significant pressures on the establishment. This is apparent at night, when in our judgement the staffing levels at times did not give a satisfactory level of care and safety.</li> <li>• The night duty team may benefit from its own dedicated management structure</li> <li>• Consideration needs to be given to improving staff communication across the centre.</li> <li>• Managers need to demonstrate that they are listening and responding to issues and concerns raised by front line staff.</li> <li>• The centre's stated objectives for the formal supervision of staff was not being met.</li> <li>• The centre's policy to appraise its staff annually was not being met. There was no evidence of a training needs analysis being undertaken with front line staff.</li> <li>• The centre's stated objectives relating to the frequency of staff meetings were not being met.</li> <li>• The foundation training provided for care staff was in place but not accredited.</li> <li>• The external manager for the centre was acting as the Director and therefore the centre did not have an external manager to monitor its performance.</li> <li>• A clear distinction needs to be made between the management responsibilities of the Duty Operational Managers (DOMs) and members of the unit management teams.</li> </ul>

**RECOMMENDATIONS**

- **Senior Managers must immediately address the shortage of staff on duty at night.**
- **Senior Managers should develop, in conjunction with the staff team, a means of effectively communicating management actions and plans as well as immediate news across all staff teams.**
- **Senior Managers must ensure that staff supervision, appraisal and team meetings take place consistently across the Secure Training Centre without delay.**

- 6.1 The centre has in the past suffered from staff shortages, due to difficulties in the recruitment and retention of competent staff. We saw examples of this still occurring despite attempts to solve the problem.
- 6.2 Staff numbers on the night shift had only met the minimum level set by the Youth Justice Board (YJB) for 30 out of 192 days prior to the inspection taking place. This is simply unacceptable. We saw the effects of this at bedtimes when many trainees are stressed. Trainees who are assessed to be in need of additional supervision due to potential to self-harm need to be seen every five minutes and others every 15 minutes. We had no evidence that this standard was not being met. This workload pressure on the under resourced night staff must be remedied immediately.
- 6.3 Senior managers at the Centre were aware of the problem of the shortage of staff on the night teams and had striven to overcome it. We were assured that additional staff were due to complete their training and start on the night team by the 11 November. The numbers of additional staff should enable the centre to again meet minimum standards, providing the existing staff can be retained. A recent pay award of 8 per cent for the night staff was aimed at assisting in the recruitment and retention of these valuable people.
- 6.4 The night duty team did not have a dedicated manager. Their manager also had a team to manage during the day. This did not enable the night team to feel they had sufficient representation at a senior level within the management team so that that issues particular to the night team could be considered appropriately. Night duty teams often have to face the distress of trainees who are feeling worried at night, who have fears of being locked in a room on their own and who suffer nightmares. The team at Medway had not had regular supervision for quite some time and none reported having received recent training.
- 6.5 The same shortages were not reported during the day although we noted times when the centre was only just meeting its minimum staffing requirements. One weekend five staff had called in sick and certified staff other than the usual care staff had to operate as care staff. There was no evidence that safety was compromised when such an event occurred, however the quality of care offered to trainees may suffer. During such times staff appeared to feel vulnerable due to the lack of back up available to them should an emergency occur.
- 6.6 We were encouraged to learn that 20 new staff who will work at the centre during the day were undertaking their induction training and were due to start in December 2004. Positive efforts had been made to consider how staff could be attracted to the centre. Rates of pay had recently increased. There were plans to look at succession planning and to look positively at other means of retaining staff. Increased pay, training and the development of career paths may well assist managers to retain staff. We noted that the

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staff turnover rate had decreased and during the month of October not one person had left the centre.

- 6.7** Attempts were being made to recruit more staff from an ethnic minority background. At present white British female staff make up the majority of training assistants and supervisors although approximately 54 per cent of the trainees are from a non 'White British' background. Advertisements for staff are placed in newspapers in areas where it is more likely that non 'White British' applicants may be attracted to posts. The recent pay rise may also start to attract men into front line posts.
- 6.8** All posts at the centre have written job descriptions; staff spoken to during the inspection seemed clear about their responsibilities and duties. We saw evidence of interviews taking place for staff with candidates being tested against competencies. There is a clear vetting procedure for all staff and none are allowed to work with trainees until clearance has been approved.
- 6.9** Only certified custody officers are allowed to perform custodial duties in relation to trainees.
- 6.10** Each team of care staff apart from the night duty team now attended a team-training day every six weeks. It was intended that this would be modified shortly to enable staff to receive a training day every three weeks. It is notable that this aim to train had not been communicated to those on the night shift. In the interests of developing a consistent approach to the care of young people and promoting better team work, some consideration might usefully be given to arranging joint training for day and night staff. Duty operational managers (DOMs) and unit managers have had opportunities for training which they found valuable.
- 6.11** Team training days held since March have included training in child protection, Physical Control In Care, training on incentives and unit routines, security awareness, health and safety, equal opportunities/anti discrimination, mental health and suicide and self harm. The Youth Offending Service (YOS) workers have attended eight professional practice study days and managers attended a two-day course on restorative justice which has been put to good use with groups of young people.
- 6.12** We were concerned to learn that, due to staff shortages, staff on the units did not have 1:1 meetings with their line managers on a monthly basis. The aspiration to hold such meetings is set at a senior management level, staff therefore felt disappointed that they did not occur as frequently as they might. An outcome of this failure was that the centre's policy to appraise staff on an annual basis was not being met.
- 6.13** Staff commented that they did not feel listened to at times and that sometimes their very basic requests were not being heard and acted upon. This feeling devalued their opinion of the senior management team and had implications for staff retention.



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- 6.14** Communication across the centre was not functioning, as it perhaps should. There were instances where opportunities for a clear message to assist staff had not been seized upon. An example was when the centre was short of care staff and had boosted its numbers by asking DOMs and YOS staff as well as managers to assist in the care of trainees. The information staff had received via, (it appeared) rumour, was that the centre was running short of staff. We heard rumour about whether or not pay was deducted if an injury at work occurred. Another example of poor communication was the lack of any formal message to front line staff about the impending management change. Advice had been received that individual one to one consultation should take place before the new structures were announced; this had however led to rumour and concern for jobs. **The GMB Trade Union representative informed the inspectors that regular meetings took place with the Director and senior members of staff to discuss issues raised by the staff group. The GMB representative took forward issues raised by staff both to the GMB representatives and by an agenda available for staff in the entrance airlock.**
- 6.15** It was the intention of the senior management team to hold staff meetings on a regular basis. This was not happening. Staff meetings would be a valuable tool in assisting top down and bottom up communication to take place.
- 6.16** Four staff were being supported by the organisation to undertake and obtain a Dipsw through the Open University.
- 6.17** All new staff undertook a seven week induction course before undertaking work on the living units. Staff told us that this had been useful in preparing them for the duties they would be undertaking at the centre.
- 6.18** We saw a training plan for 2004-05 that had been approved by senior management. An aim of the centre is that 10 per cent of appropriate staff will commence NVQ level 3 in youth justice before the end of the year. Six staff are also to commence the 'effective practice' training provided by the YJB.
- 6.19** A 'foundation pack' for training supervisors had been introduced. This pack is accredited at Rainsbrook but not yet at Medway. The lack of accreditation did not give staff the necessary incentive to undertake this training although they commented that they found it a very useful programme. Plans were underway to ensure the same accreditation applies to this programme across the two centres.
- 6.20** Inspectors were told about changes to the management of training at the Medway STC. A manager has been appointed at a senior level to manage training programmes across both the STCs managed by Rebound ECD. Training officers in each of the centres will support that person. This should ensure consistency of approach to the training needs of staff across
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both sites and should give training a higher profile at a senior level across the board.

- 6.21** A new training room was being built for all staff training to take place at the centre. This is seen as a positive move forward; it enables new staff undertaking their induction to go to the centre for that training as well as making access to training easier for existing staff. The training room is outside the secure area so does not compromise the safety of trainees.
- 6.22** We noticed new policies and procedures at the centre were now introduced in a systematic way. Staff were being consulted about the policies, and they were officially launched after staff were appropriately trained. An example of this process was the centre-wide introduction of the new anti-bullying policy that had been successfully piloted in a couple of units, following staff training.
- 6.23** We noticed greater clarity regarding the roles of various staff groups. Moving the YOS workers onto the living units had proven to be an excellent move, creating useful teams on the frontline and enabling trainees to benefit from a multidisciplinary approach to their care and work at significant times of the day. We did notice the need to differentiate the management responsibilities of the duty operational managers and members of the unit management teams.
- 6.24** The STC is at present being managed on a day-to-day basis by the Director of Children's Services. Whilst we are clear that Rebound ECD is continuing to offer a strong commitment to the centre the fact that the Director is 'hands on' means that there is no external manager to oversee and monitor the performance of the centre. We do commend the senior managers undertaking visits to each part of the centre and auditing the quality of care being offered to trainees. This was a formal process, reporting was in written form back to the senior management of the centre. This work provided a welcome audit trail and quality assurance loop to ensure there was effective management of the centre and that those in the most senior positions were aware of the issues affecting the safeguarding of trainees.
- 6.25** There was a YJB Performance Monitor who is on site for approximately 2 days every week. He was supported by a full time on site assistant. The role of the compliance monitor is wider than the role of the previous post holder. The compliance monitor is also responsible for monitoring the work of the Youth Offending Teams in the south east region. This new arrangement had only been operating for two months; it was too early to fully assess its effectiveness. However we were informed of measures due to be undertaken by the monitor to case track some of the trainees who leave the centre, to also assist the centre in following up YOT work that may have gone astray at the time of the trainees departure.

# Assessment, Planning and Review

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## **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"> <li>• A detailed initial assessment of the needs and challenges of young people was carried out. This was the basis for care planning and was regularly updated.</li> <li>• The individual needs of the young people were reviewed in detail during multi-disciplinary meetings held on a weekly basis.</li> <li>• Statutory reviews were being held with all relevant parties involved. These were well managed and child centred in their focus.</li> <li>• YOS workers have continued to develop their links with care staff through their presence on the individual units.</li> <li>• There was evidence of Youth Offending Teams being held to account by staff at the centre.</li> <li>• Managers had a clear oversight of trainees' progress whilst at the centre.</li> </ul>	<ul style="list-style-type: none"> <li>• The development of care plans for individual young people would further enhance the focus and quality of the total care package available.</li> <li>• Some efforts were being made to evaluate outcomes for young people on leaving the centre. This could be further developed.</li> </ul>
RECOMMENDATIONS	
<ul style="list-style-type: none"> <li>• <b>Consideration should be given to incorporating the work already undertaken at assessment and review into a care planning process within the centre to supplement the work already being undertaken.</b></li> <li>• <b>Further work needs to be carried out to evaluate the outcomes for young people of the work undertaken at the centre.</b></li> </ul>	

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- 7.1 The Youth Offending Service team were pleased to report that 76 per cent of initial planning meetings were held within two weeks and 87 per cent within fifteen days. On any occasion where an initial planning meeting was not held in accordance with National Standards the YJB Performance Monitor is informed
  - 7.2 Every effort was made to engage carers and involve them and trainees in planning meetings. There was an expectation that key workers made phone contact with carers or parents at least once a week to inform them of progress. Parents and carers were provided with an information pack that clearly stated what was expected of them and what they should expect. The pack gave names and addresses and important information about the Secure Training Centre (STC), visits to the centre and the assisted visits scheme.
  - 7.3 Despite the hard work that went into encouraging the involvement of parents and carers only 39 percent had attended reviews in the last six months. As trainees are from throughout the country it is sometimes difficult for their parents and carers to attend reviews, especially if their Youth Offending Team worker is unable to provide transport. Whilst parents and carers can obtain travel costs if they are visiting their child, they cannot claim to attend a review. Attempts were being made to arrange a visit after the review meeting to assist parents and carers; however this is not always practical or desirable.
  - 7.4 Young people were encouraged to make their views known at their review meeting and the meetings were child focussed. When parents and carers attended meetings they were actively encouraged to contribute to and participate in their child's meeting. One young person was expecting his carer and she was not present, a fact he had not been prepared for. However the STC had attempted to create a culture of involvement of trainees, parents and carers at review meetings which has assisted trainees to be generally informed, clear and understanding of their plan of care whilst at the centre.
  - 7.5 The assessment of need was thorough and high quality. The assessment team was lead by a YOS worker; sometimes trainees were observed to be completing some of the assessment forms, assisted by their key worker.
  - 7.6 Planning and review allowed for the trainee to be removed from the incentive scheme when it was decided that the scheme was not beneficial. In a large institution such as this it was refreshing to see such initiatives, designed not for the smooth running of the centre but to meet the needs of trainees.
  - 7.7 The well managed multi-disciplinary team meetings produced a written record of the care needs of trainees. This was placed in the trainee files on the unit. It would be beneficial for trainees and staff if this was converted into a care plan to sit alongside the YJB T form planning documents.

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- 7.8** Relevant senior managers oversaw the review and planning process; they were knowledgeable about plans for trainees and were involved if there were problems in their implementation.
- 7.9** The centre's policies and procedures ensured that trainees' plans were regularly updated and reviewed and the individual needs of trainees were reviewed at well structured, focussed multi-disciplinary meetings held on a weekly basis.
- 7.10** We saw evidence of the YOT teams being held to account by staff at the STC when the YOT teams had failed to invite STC staff to planning meetings following release. This had been a recommendation of the last inspection and it was pleasing to see a real desire by staff at the STC to remain involved post release and to assist trainees following their stay at the centre.
- 7.11** We saw, as a result of this work, some efforts to evaluate the outcome of placements at the STC; there were efforts being made to evaluate outcomes. This work was invaluable, both for the trainees but also for the dynamic growth of the centre in examining its methods and overall effectiveness. It also provided front line staff with valuable feedback on the work they are doing on a daily basis with young people in their care.
- 7.12** There was seen to be a positive working relationship between the care staff on the living units and the Youth Offending Service workers. This had in part occurred following the decision in the preceding year to place YOS workers on the units rather than in the central administration block. This initiative is to be commended and demonstrated the willingness of staff at the Centre to work as one team, each celebrating individual skills and knowledge.

# Care of Young People

## 8

### **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"> <li>• A positive and helpful relationship existed between care staff and trainees.</li> <li>• Good order and discipline was maintained and promoted by staff at the centre.</li> <li>• A range of activities for trainees was available.</li> <li>• Admissions to the centre were handled sensitively and appropriately; trainees were informed of their rights and responsibilities whilst at the Secure Training Centre (STC).</li> <li>• Incentives and sanctions were published, displayed and understood by trainees.</li> <li>• The revised bullying policy was seen to be effective and understood by staff.</li> <li>• Appropriate links had been made with the local police and Social Services Department to ensure the investigation of child protection concerns were carried out speedily and appropriately.</li> <li>• The centre was represented at a senior level on the Area Child Protection Committee (ACPC) and followed ACPC procedures.</li> <li>• External groups visited the centre and mobility programmes existed, assisting trainees to link positively to the local community when appropriate.</li> <li>• Trainees were enabled to make phone calls and were assisted to have access to their legal advisor, post release supervisor and family and friends when appropriate.</li> <li>• Restraints and single separations were regularly monitored at a senior level at a specific meeting. This meeting also in part was attended by trainees and allowed senior staff to examine trends and take appropriate action.</li> </ul>	<ul style="list-style-type: none"> <li>• Trainees did not have constructive regular meetings on their living units or at a trainees' council. Meetings that had taken place appeared disjointed, without clear purpose and were not inclusive.</li> <li>• Trainees on lower incentive levels did not have access to some basic activities</li> <li>• The opportunities for trainees to undertake exercise was limited by staff resources.</li> <li>• Restraint, when used, was not always adequately recorded. The reasons given for the restraint were sometimes not in accordance with the Secure Training Rules 1998.</li> <li>• Instances of single separation were not always recorded appropriately or accurately resulting in confusion as to their use and frequency.</li> <li>• Greater use could be made of the data on complaints by senior management in systematically monitoring the performance of individual staff and units.</li> <li>• Instances of bullying did not appear to be collated or systematically monitored in any meaningful way although they are reviewed at the weekly multi-disciplinary management meetings.</li> <li>• Food, particularly that provided after school during the week, was inadequate and unsatisfying for trainees.</li> <li>• Consideration should be given to the ensuring coats are made available to those trainees who do not have one in their possession on arrival and that trainees are aware of this policy.</li> </ul>



**RECOMMENDATIONS**

- **Practice and recording must ensure physical restraints conform to the Secure Training Rules 1998.**
- **The provision of food for trainees after school needs an urgent review to ensure quality is improved.**
- **The complaints procedure needs reviewing and a new procedure along the lines of that suggested in paragraph 8.15 should be considered.**

- 8.1 Generally speaking staff were seen to be relating to trainees with good humour, respect and courtesy. All staff spoke of the needs of the trainees in their care and all staff attempted to understand their behaviour, showing a strong desire to assist trainees to learn and modify their actions
- 8.2 The centre had clear policies and procedures in relation to respecting the need of trainees for privacy and confidentiality. Trainees could make phone calls in private and other than a discreet security check, the mail was passed to trainees without being read by staff. We saw a trainee at a review challenging the practice of blinds being opened to a bedroom whilst it was still dark, the result being that the trainee might be seen dressing. This comment was taken seriously by the chair of the review who asked staff on the unit to address the problem.
- 8.3 Good order and discipline was maintained and promoted by staff at the centre at all times. Trainees were challenged when it was appropriate to do so and reminded of their responsibilities to other trainees and to staff.
- 8.4 The rewards and sanctions scheme at the Secure Training Centre was clearly understood by the trainees we met. The incentive scheme was clearly displayed and given to each trainee on admission. Young people commented that they enjoyed the rewards they obtained by being on a higher incentive level. At this inspection we noted that many of the boys were striving hard to be on high awards. This had created an atmosphere of stability and a desire within units to strive for improvement. This meant staff on the units could progress other activities such as key work sessions work with trainees.
- 8.5 This was not however mirrored in the girls units where girls were struggling with the incentive system. Many did not seem to be able to gain the rewards enjoyed by some of the boys. STC staff were aware of this and were making efforts to assist the girls to develop ways that would enable them to perform to their full potential.
- 8.6 There appeared to be a clear relationship between the capacity to enjoy activities and staffing levels. Inspectors noted that young people on at least two units were advised that they would have to join the group on the green or be locked in their room due, it was said by trainees, to lack of available staff. Senior managers of the centre explained that if trainees chose not to participate in activities on offer outside of their unit the Centre risk assessed each activity to ensure there was sufficient staff to supervise activities outside of the unit and ensure that risk assessments enabled the appropriate ratio of staff to remain with young people on the unit. The increase in activities available needs to be matched to staff ratios and this should be monitored by Centre management.
- 8.7 Trainee meetings on the units appeared to have stopped and if they were occurring appeared to have a limited value to the running of the centre. The trainee council had succumbed to a similar fate. We noted that the

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dates were changed for this meeting whilst we were at the centre and some of the trainee participants were not informed, with the result that they missed the meeting altogether.

- 8.8** Managers were aware of the lack of structured, meaningful, trainee meetings and were discussing ways of re-launching meetings for trainees across the STC. This may present a good opportunity to consider the idea that the unit house meetings feed into the trainee council and that attendance at the council is not seen as a privilege for those on the higher levels. Instead trainees on house units could elect a representative to attend the trainee council on their behalf and mandate them through the meeting to engage on their behalf. Such a system may lead to more of a feeling of inclusion in the running of the centre than that existing at the time of the inspection.
- 8.9** Trainees were admitted sensitively and appropriately. We observed one such admission when the trainee was looked after in a very relaxed and suitable manner. The STC and trainee were protected through appropriate searching. The introduction to a secure unit is never enjoyable however this was tempered by the manner in which it was carried out. Time was spent with the trainee when his rights and responsibilities were clearly explained to him and he was given time to ask questions.
- 8.10** Trainees had access to legal advisors, post release supervisors, the Youth Justice Board (YJB) monitor, independent persons through the Voice for the Child in Care (VCC) and where necessary, other external agencies. The centre encourages such contacts and welcomes them as part of everyday life.
- 8.11** VCC staff were informed of admissions and were able to see all new trainees, making themselves known without problems. VCC staff were also allowed to see trainees in private when appropriate.
- 8.12** Five mobility programmes were in operation at the time of the inspection. These were of great value to the limited number of trainees on them. One trainee went to the local supermarket when we were at the centre as part of his release programme. He is training to become a chef. Trainees informed us that that it is their understanding that mobility sometimes has to be restricted due to a lack of staff at the centre. We were informed by senior managers that the amount of mobilities undertaken to support pre-planned medical visits limits the numbers of mobilities in relation to the sentence plan to one per day due to the intensity of staff resources.
- 8.13** There was a complaints process at the centre. However it did involve the trainee having to obtain a form from a member of staff. This might well inhibit a trainee from requesting a form. We were also informed of an instance where the member of staff had forgotten to provide the complaint form. The trainee had decided not to follow it up and the complaint was not made. There was obvious discontent amongst trainees about the

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quality of food at the centre. (paragraph 8.40) We spoke to trainees who felt there was ‘little point in complaining’. This may be an indication of their dissatisfaction with the robustness and effectiveness of the complaints process.

**8.14** We suggest a way is found whereby complaints can be made directly to senior managers without necessarily having to obtain a form from a member of staff; where a manager from another living unit undertakes the investigation and where feedback is available from the investigating manager.

**8.15** We consider:

- Whilst complaints are followed up and discussed at multi-disciplinary meetings and strategic management meetings, more systematic use could be made of the data in monitoring the performance of individual staff and units. The data could be subject to a similar level of analysis and scrutiny as the data on Physical Control in Care (PCC) and single separation.
- Only one unit manager appeared to have accessed the data to check how staff were dealing with complaints. Whilst unit managers can access the data base centrally a copy of the completed complaint resolution form should be kept on each unit. Unit managers should routinely use the data to check on progression of practice issues arising from complaints.

**8.16** We saw evidence of consideration and respect for the faith of trainees at the centre. One trainee was observing Ramadan at the time of the inspection; staff were assisting him in his religious observance and respected his belief. There is an on site chaplaincy at the STC which provided links with ministers and clerics of other faiths and denominations. The chaplaincy provided pastoral services including counselling.

**8.17** Last time inspectors were at the STC in Medway concern was expressed about the lack of a positive and cohesive approach to child protection matters at the centre and in particular the relationship the centre had with the Social Services Department and the Area Child Protection Committee. There were many outstanding concerns of a child protection nature that needed to be followed. We were delighted to see a radical improvement to this situation at this inspection.

**8.18** A seminar had been held with the police, senior staff at the centre, Social Services Child protection staff, the YJB and the VCC. This seminar had been a great success; it had helped to launch a useful platform creating a positive relationship between the agencies involved in safeguarding children at the centre.

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- 8.19** There was a useful protocol agreed by the Medway ACPC for handling child protection allegations against staff and volunteers at the STCs and for ensuring that processes agreed by the ACPC took place in a timely fashion. It is important that Medway Council inform the trainee of the outcome of any investigation prior to any member of staff against whom an allegation has been made returning to work.
- 8.20** Since the last inspection the Director of the centre had become a full member of the Medway ACPC; this had also enabled communication to improve and for useful links to be made between the centre and statutory agencies in the area.
- 8.21** The numbers of Child Protection referrals to the local authority over the previous six months was seventeen. Sixteen of these were for advice and consultation and one was a case that required an immediate strategy meeting. In a total of thirteen cases the police and the Social Services Department saw the child. Referrals now appear to be assessed within appropriate timescales and evidence was seen of agencies co-operating to ensure that trainee's concerns were taken seriously and listened to.
- 8.22** Medway Social Services Department have appointed a worker to link with the STC, He is known to the senior management team and they now approach him directly when a referral needs to be made.
- 8.23** Instances of single separation were recorded and reported on at a monthly monitoring meeting along with PCCs. This provided a method whereby the whereabouts and numbers of single separations were analysed by the senior management team.
- 8.24** The above reporting mechanism on single separations described where the incident that necessitated the separation took place, which living unit the trainee was from and the numbers of separations.
- 8.25** Whilst this method of analysis is of some use it did not capture some information that could be of further benefit. It might have been useful to see how many trainees in each unit were separated as well as the total numbers of separations for the unit. It might have been useful for the management team to be better able to analyse the reasons and times for those separations. Were they for instance caused by a particular instruction not being obeyed on a regular basis?
- 8.26** Front line staff appeared unclear as to the definition of single separation. We observed trainees being locked in their rooms as they had elected to go to their room rather than the green. This did not appear to be recorded as single separation. Similarly when trainees went to the 'time out' room at the school due to their disruptive behaviour in school, there did not seem to be a recording of this as a single separation.

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- 8.27** Therefore we did not see all instances of single separation being recorded although all appeared to be monitored and the monitoring was being recorded. The total numbers of single separations therefore may well be higher than that given to the management group.
- 8.28** We also saw evidence of poor quality recording of single separations with no evidence that crossings out and entries past the date of the event were being picked up and commented upon by managers
- 8.29** The managers at the STC were aware of this problem and were designing new definitions of single separation. If the clarity intended by managers is achieved, understood by staff, implemented and used for analysis, the centre will improve its monitoring of single separation and will set a model for others to work on.
- 8.30** The methods used during permitted PCC were being monitored at a very successful monthly monitoring meeting, part of which was attended by young people. The meeting was attended by senior managers from across the centre and was a serious and useful attempt to ensure regular monitoring of the use of PCC.
- 8.31** Staff recorded the use of PCC, and the method of restraint used appeared to comply with guidance issued recently by the YJB.
- 8.32** The reasons for the restraints however given in the recording were outside the Secure Training Centre Rules 1998. Reasons given in a log included 'non compliance, refused to go to room', 'throwing monopoly piece at member of staff', 'non compliance, refusal to go to room, verbal and aggressive'. Recording did not define what 'aggressive' was, it was not possible to discern whether it was physical or verbal aggression.
- 8.33** The excellent PCC monitoring meeting would be greatly assisted by the inclusion of more detail for the reason for the restraint and the type of restraint, i.e. was it a phase 1, 2 or 3 restraint? This would have enabled inspectors and managers to differentiate between some fairly minor 'steers away from trouble' and some serious restraints involving three or more staff.
- 8.34** Trainees at risk of self-harm were monitored adequately and reviewed appropriately by senior staff. It was easy for staff at any level to raise a self-harm alert. Trainees were aware that they were on a self-harm programme, the reason why and the monitoring methods.
- 8.35** A range of activities was available for trainees at the STC; some on lower incentive levels had limited access to those activities. Whilst this was understandable, as the incentive level would not work without this reward, trainees on lower levels did complain of boredom and this may have led to unwelcome behaviour problems for them and for staff.
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- 8.36** A youth worker present at the STC is working in conjunction with trainees to develop activities asked for by trainees. There is a sports club and a hobbies room where such activities as model-making, art and craft, sewing, cushion and toy-making and electronics take place. Members of Charlton Athletic football club are due to visit the centre and in the summer circus skills and street dance workshops were held. The August Bank holiday was celebrated by a BBQ and we saw most living units decorated for Halloween during the inspection.
- 8.37** Some trainees commented to inspectors that they did not consider there were sufficient activities on offer. We did observe however that there is an opportunity on each unit for young people who are on the higher incentive levels to enjoy television, some computer games and time out on the 'Green'. There were pool tables on the units and several of the units had been imaginatively decorated. All this contributed to a homely atmosphere on most of the units.
- 8.38** A revised bullying policy was being introduced across the centre, having been piloted in two of the living units. The policy involved reparation and looking at the problem as a group, staff having been trained in restorative justice to undertake this work. This appeared to be an excellent change for the better with young people and staff reporting on positive results for all.
- 8.39** Bullying was monitored through the multi disciplinary meetings and effectively addressed at those meetings for the individual concerned. However the centre as a whole was not actively monitoring bullying trends across the centre. It might be useful if these trends were included at the monthly PCC/Single Separation monitoring meeting or at a Child Protection monitoring meeting.
- 8.40** We heard more complaints about food than any other from trainees at the centre. Lunchtime meals provided in the canteen are on the whole nutritious and filling. The 'teatime' meal however is brought to and cooked on the living units. This food was described as inadequate and of poor quality by trainees. Various attempts by staff at the STC to improve the food in the evenings have been tried and have failed. A proposal by managers to have the evening meal in the canteen should be followed up as soon as is practical. This problem had been noted at the last inspection. It cannot be acceptable that young people have to suffer poor quality food and we advise that the problem is resolved as soon as possible.
- 8.41** Some trainees also told inspectors there were no coats available for cold weather. We were informed by senior managers that appropriate clothing was available for all trainees, sometimes they chose not to wear it.

# Education and Vocational Training

## 9

### **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"> <li>• The work of the school is taken seriously by trainees and is an important part of the general care given to them whilst they are at the centre.</li> <li>• The relationship between the care staff and teaching staff at the centre promotes support for trainees in gaining accredited qualifications.</li> <li>• Good quality teaching conducted in an attractive learning environment</li> <li>• A broad range of subjects on offer with some good specialist facilities</li> <li>• A developing range of accreditation opportunities which meet the needs of most students</li> <li>• Good student tracking and effective monitoring of student progress</li> <li>• Strong and effective leadership and management of the education department</li> <li>• Good range of staff development opportunities available to teaching staff</li> <li>• Good support from the local Connexions partnership.</li> </ul>	<ul style="list-style-type: none"> <li>• Staff at the school may wish to consider the guidance on safeguarding issued by the Department for Education and Skills in its document 'Safeguarding Children in Education'.</li> <li>• The quality of support offered by Training Assistants in class</li> <li>• The use of individual learning plans and targets by classroom teachers</li> <li>• The use of learning resources, particularly Information and Communication Technology , in class</li> <li>• The quality of IT resources (i.e. hardware and software)</li> <li>• The library (book stocks, the range of provision etc)</li> <li>• Programme planning (links between education and residential staff offering offender behaviour programmes)</li> <li>• The up-keep and maintenance of equipment (e.g. PE and computers in Design and Technology).</li> </ul>
RECOMMENDATIONS	
<ul style="list-style-type: none"> <li>• <b>Managers at the centre should provide training for Training Assistants focused on learning support</b></li> <li>• <b>The Centre should improve the range and quality of Information and Communications Technology facilities (hardware and software)</b></li> <li>• <b>Staff at the centre should co-ordinate the planning of education courses and offending behaviour programmes</b></li> <li>• <b>Managers at the centre should take steps to improve the library.</b></li> </ul>	

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## ACHIEVEMENT AND STANDARDS

### 1. How well do learners achieve?

- 9.1 Overall, achievement and standards were good.
- 9.2 The work observed in most classes was purposeful and well paced so that students achieved well. Targets were not clearly in use but most work was linked to relevant and often challenging accreditation. Whilst there was some differentiation of work in many classes, ability levels were so diverse that although many students were able to work at an appropriate level, there were exceptions.
- 9.3 Overall achievement was adequate or better in 95 per cent of the of the classes observed, and good or better in 55 per cent. Students had been gaining about 5.4 units of worthwhile accreditation per month over the last year, including some higher level qualifications such as GCSE and NVQ. The rate had been increasing in the later part of the year as more courses became accredited.
- 9.4 Students were behaving well as learners in the contexts of the varied classes observed and behaviour was graded as adequate or better in 95 per cent of these. Most students were on task most of the time, relationships were and there were few instances of challenge or conflict. Many students were able to work independently for at least short periods of time, a very significant achievement in the context of their previous backgrounds of exclusion, non-attendance or special schools and units. However, they had little opportunity to learn to behave appropriately in the size of group they were likely to encounter on school or college courses.
- 9.5 Existing information indicated that 85 per cent of those leaving were going to education or training placements and less than one per cent were leaving without having gained at least some nationally recognised accreditation. Better follow-up systems were being developed which would ultimately provide feedback on how well the young people fared on these placements.

## THE QUALITY OF EDUCATION AND TRAINING

### 2. How effective are teaching, training and learning?

- 9.6 Overall the quality of teaching, training and learning was good.

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- 9.7 95 per cent of both teaching and learning was adequate or better and a significant proportion of both-50 per cent was good or very good.
- 9.8 Teachers knew their students well and much of the teaching was tailored to meet the learning needs of individual students. However most teachers had little knowledge of and hence made limited use of initial student assessments, individual learning plans and specific weekly individual student targets set for literacy, numeracy, behaviour and achievement.
- 9.9 Most students were focussed, attentive and engaged in their learning tasks for the majority of class time, even when working independently. Only in the minority of very good lessons however were students challenged sufficiently and stretched to reach for and achieve at the highest of levels.
- 9.10 Most lessons were well structured and appropriately paced. Lessons generally began with clear introductions and occasionally with valuable specific reminders to each student about their individual subject or session goals. Students were generally helped effectively both to practice further their existing, knowledge, skills and attitudes or to develop new ones. Lessons ended with adequate if brief summaries of student progress, broader judgements about their overall behaviour and the allocation of points, which contributed toward the gain or loss of privileges. Teachers discussed student behaviour openly in class, normally negotiated and agreed their judgements with students, gave them very clear, mostly fair feedback and generally awarded them the appropriate number of points. In a minority of cases teachers were too generous in their allocation of points which led to challenge and disputes among class members.
- 9.11 The range of lesson resources, including the stimulus material and teaching/learning methods used by teachers was adequate if rather narrow. However in a very well managed science lesson students were challenged effectively to think and work in a group and responded positively to this learning opportunity. In a very good design technology lesson students enjoyed and were motivated further by the responsible roles assigned to them in solving problems. They learnt quickly and effectively the new knowledge they needed to perform these roles and developed a number of useful skills through practicing the assembly and disassembly of electrical plugs and assessing whether other students had wired their plugs correctly.
- 9.12 General classroom management was good. Staff related to students as individuals within a framework of mutual respect where boundaries were clear and only occasionally crossed by students. Occasionally there was some low level disruptive behaviour by individual students which whilst not requiring their removal from class did distract teachers and diverted their attention from other needy students. Teachers generally responded effectively and in a non- threatening manner to both a small number of incidents of challenging student behaviour and unpredictable circumstances that arose in class. Students received, where appropriate, regular encouragement and praise from staff. In general students related
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well to each other and in a minority of cases students where students were given the opportunity to collaborate with others they did so effectively.

### **3. How are achievement and learning affected by resources?**

- 9.13** Overall the quality of resources and their impact on learning and achievement was good.
- 9.14** Most full-time teaching staff had appropriate subject and teaching qualifications. There was a very low turnover of staff which gave students a valuable continuity of teaching and learning experience. Teachers benefited from an institutional staff development programme and management encouragement to participate in relevant external professional development activities. Attendance by staff at these events was high. Too many training assistants provided insufficient support both to individual students and to teachers with teaching and general classroom activities. Where exceptionally they did offer such support it was however often of a high standard. Two training assistants in the fitness suite were fully and actively engaged in supporting all students very effectively and provided valued support to the teacher. In another lesson a training assistant gave one student who had specific identified needs with consistent, patient and high quality attention, care and learning support.
- 9.15** The quality of teaching accommodation was good. Rooms were of a good size, clean, tidy and welcoming. Most classrooms had relevant and attractive wall displays. Classroom displays included statements about the rights and responsibilities of students, institutional rules regarding the behaviour management policy, examples of students work and stimulus materials relevant to each subject taught in the rooms. There was a wide range of good quality specialist teaching accommodation including design technology, physical education and hairdressing. The maintenance of some equipment in the fitness suite and computers in a design technology workshop was poor with machines in both areas not available for student use for four and three months respectively. Appropriately designated areas were provided for individual learning support. The new science curriculum was well developed but the physical facilities for storage and disposal of materials were inappropriate and the laboratory not of the required standard to support the planned development of the science curriculum especially for topics such as light.
- 9.16** Some rooms, notably the library and the Information and Communications Technology room, were too warm to allow students to retain their concentration for the whole session and contributed to some students becoming agitated and disrupting the sessions. Staff had no facility to either adjust the temperature of the central heating in these classrooms or in the case of the library to open a window. In one lesson the mid morning water refreshment break inadvertently led to petty squabbling among

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students and by students with staff. This disrupted significantly the previously quiet, focussed learning environment and lowered substantially the quality of student learning and achievement.

- 9.17** Most classrooms lacked sufficient and suitable furniture for students and staff. Chairs were fixed to the floor which resulted in most rooms, not having the capacity to accommodate any more students than those attending the lessons and not enabling staff either to sit next to and support students or to rearrange furniture to match the most appropriate teaching methods and learning styles. In these sessions staff were often uncomfortably and inappropriately trying to support individual students whilst crouched or kneeling on the floor. The fixed positioning and height of chairs used for computing work did not enable students to adjust their height and distance from screen, causing some discomfort and a health and safety risk.
- 9.18** The resources and facilities for information and communication technology teaching both in ICT classes and across the whole curriculum were inadequate and contributed to the narrow range of teaching and learning methods and resources observed during inspection. The ICT equipment, systems and software were poorly matched to the educational requirements and substantially restricted the further development of the curriculum. Where however posters, displays and artefacts such as three dimensional models of a heart were used and students were able to look, touch and work with them, the quality of learning was good.
- 9.19** The library was inadequate. There was limited book stock and no magazines or computers in the main library. Many books were filed in the wrong places which caused frustration among both students and staff. The book lending policy, did not allow students to borrow books at times when teachers had helped them to develop a particular enthusiasm and interest in reading.
- 9.20** Overall the scale of provision was well matched to students and curriculum.

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

- 9.21** The quality of initial assessment was good. Young people completed on initial education assessment on or shortly after arrival which focused primarily on literacy and numeracy skills. Student progress was closely monitored by individual subject teachers and detailed information was forwarded for consideration at Detention Training Order planning and review meetings. Education reports completed prior to a young persons' release provided an example of good practice. The reports were detailed and included an assessment of a young persons progress across all subjects and in respect of literacy and numeracy.

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

- 9.22** Overall, the curriculum was good although there were some limitations.
- 9.23** The weekly 25-hour programme included a morning water break and a two hour lunch period during which some offending behaviour work was delivered by residential staff on the living units. The 45 or 40 minute sessions were generally suitable and double periods were provided for practical sessions in art, design technology and food technology, and for PE. There was a soundly balanced curriculum with a core of English and maths and a broad range of National Curriculum subjects including science. Art, drama and music provided opportunities for creative and expressive work. Additional support was given to those with low literacy levels through 1:1 tutoring on a planned withdrawal programme. There were specific groups programmed for GCSE and NVQs in hairdressing. Individual programmes showed a good daily mix of subjects and activities.
- 9.24** Groups were based on living units and there was no streaming so that a 12-year old could be in the same group as a 16 year old. That made group-work difficult and when groups were as large as eight, placed unrealistic demands on teachers and made control more difficult.
- 9.25** In general, suitable accreditation was available although work in ICT was severely restricted through the poor facilities and opportunities for level 2 students limited. Whilst some accreditation was based on very short courses, they were effective in building self-esteem amongst students who had never previously achieved anything. Most awards were based on more substantial courses and were available across the curriculum at Entry level, including in PE. Further developments through ASDAN were being developed.
- 9.26** There were some unfortunate overlaps in the work covered in education in Physical Health and Social Education and Citizenship, and that delivered on the units as part of the offending behaviour work so that some students complained about doing the same things over again.

## **6. How well are learners guided and supported?**

- 9.27** Staff-student relationships were good. Communication between education and residential staff were effective. Teachers reviewed student behaviour and progress on a daily basis and this information was forwarded to residential staff through regular briefing meetings. Further work was required, however, to improve the quality of support provided by Training Assistants for young people in class.

- 9.28 Links with the local Connexions partnership were good. A Personal Adviser (PA) visited the college on a regular basis to provide a guidance and support service for young people. There was effective collaboration between the PA, the on-site Education and Welfare Officer (EWO) and the Special Educational Needs Co-ordinator (SENCO) in developing a system for tracking student progress on release. Students had access to a very limited range of interaction and resources related to career and training opportunities.

## **LEADERSHIP AND MANAGEMENT**

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

- 9.29 There was strong leadership and management of the education department. Significant progress had been made over the last year improving performance management system, increasing rates of accreditation and in developing and establishing a broader range of courses for young people. The duties and responsibilities of the Deputy Education Managers had been revised and were being closely monitored. There was good record keeping. Detailed information was kept in relation to student progress. Communications between education staff, residential staff and those responsible for organising and conducting DTO planning and review meetings were good. The daily review meeting involving all teaching staff at the end of the school day was particularly effective in gathering information relating to emerging issues and student progress. There was, however, some duplication in the programmes on offer to students in the personal, social and health education classes and in the topics covered by residential staff responsible for organising behaviour management courses. Steps were being taken to improve the arrangements for quality assurance with the support of the education contractor. Senior staff responsible for conducting lesson observations had not been trained for the task. Supervision arrangements were working satisfactorily except in the case of the Head of Education where there was a degree of confusion. The post-holder was working both to the education contractor and Rebound.
- 9.30 Limited progress had been made, since the previous inspection, in ensuring that Training Assistants (TAs) provided appropriate support to students in class. The work of the TAs in the classroom varied considerably. Guidelines and appropriate training focusing on learning support were necessary to ensure that maximum benefit was obtained from this valuable resource.

# Tackling Offending

**10**

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## **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"> <li>• Attempts have been made to provide training for care staff to assist in the delivery of crime avoidance programmes.</li> <li>• We saw evidence of some excellent individual work with trainees on a range of criminogenic behaviours.</li> <li>• We were informed of some excellent examples of specialist group work sessions held with young people, e.g. work on substance misuse.</li> <li>• There have been positive developments relating to the substance misuse service available at the centre.</li> </ul>	<ul style="list-style-type: none"> <li>• A major review is needed of the way in which the centre implements its contractual obligations to deliver ‘tackling offending programmes’.</li> </ul>
RECOMMENDATIONS	
<ul style="list-style-type: none"> <li>• <b>Senior managers at the Secure Training Centre should, along with the Youth Justice Board (YJB) review the methods used to tackle trainees offending behaviour..</b></li> </ul>	

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- 10.1** The Youth Offending Team (YOT) had progressed and expanded since the last inspection, as well as becoming effectively and fully integrated into the work of the STC. Two drugs workers and an Education Welfare Officer had been appointed and a Registered Mental Health Nurse was due to start shortly. Work on tackling offending had developed across the STC and was fully integrated into the everyday work with trainees.
  - 10.2** We saw some excellent work being undertaken with trainees on a range of criminogenic behaviours. Some staff trained to undertake this work were designing and implementing programmes for trainees based on individual assessment of need. These were being carried out to a high standard.
  - 10.3** We were also informed of some excellent examples of specialist group work sessions being held. These included some work with trainees on substance misuse. Staff at the centre recognised the need for this work as so many of the trainees were being admitted with drug related offending behaviour. Two specialist posts, one provided by the STC and another funded by the Youth Justice Board (YJB) were attached to the Youth Offending Service (YOS) team. They used the Drug Use Screening Tool (DUST) with all young people to ascertain drug use and frequency. This then informed the plan to assist that trainee
  - 10.4** The sentence plan targets and objectives were agreed at each review. Caseworkers, key workers and other multi-disciplinary staff were expected to contribute to this review. We saw some considerable efforts made to assist young people address the issues they brought with them to the centre. We saw evidence of this crime avoidance work on files.
  - 10.5** Each trainee had a total of one hour a day on the ‘formal’ crime avoidance programme. This appeared to be a ‘one size fits all’ approach. The sessions were run by care staff; training was provided by those staff and YOS workers were expected to observe two of these sessions a week.
  - 10.6** The effectiveness of this programme has to be questioned in terms of addressing each trainees individual needs related to their offending behaviour. Senior managers wish to tackle this issue and find more imaginative ways of delivering the programme. They proposed an individual needs analysis for each trainee and then a crime avoidance package could be designed, either individually or in a group for that trainee. Senior managers of the STC are wanting to take this approach in discussion with the YJB to more effectively and efficiently manage the crime avoidance programme.

# Health Care

**11**

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## **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"> <li>• A new protocol had recently been devised between the centre and Primecare which clarified the expectations for sharing information and confidentiality.</li> <li>• Revised and more detailed policy guidance and procedure related to Suicide and Self Harm (SASH) was to be launched after appropriate training for staff.</li> <li>• A specialist ‘mental health team’ had been established.</li> <li>• The health care team continued to make a positive contribution to the day-to-day care of young people. A comprehensive health care service was available to all young people.</li> <li>• The health care team made a valuable contribution to the admission process for young people.</li> <li>• The Health Care centre had policies and procedures for handling medicine</li> <li>• All medicine was administered by nurses</li> <li>• The arrangements for the safe storage and security of medicines met British standards.</li> </ul>	<ul style="list-style-type: none"> <li>• More imaginative ways of providing health education to trainees need to be considered.</li> <li>• Managers need to ensure that all medical information obtained from external medical visits is made available to health care staff.</li> <li>• Vacancies in the health care team were placing unhelpful pressures on health care services.</li> <li>• Consideration could be given to a further review of the system and procedure for the recording of the administration of medicines.</li> <li>• The procedure for the storage of medication for staff was a little confusing and there were unclear lines of accountability.</li> </ul>
RECOMMENDATIONS	
<ul style="list-style-type: none"> <li>• <b>Work should be undertaken with Education and Healthcare staff to revise the methodology of teaching healthcare to trainees.</b></li> <li>• <b>Vacancies in the Health Care team need to be filled as soon as possible</b></li> <li>• <b>A review of the recording of the administration of medicines needs to be carried out.. Individual charts which are also used for recording homely remedies should be used.</b></li> <li>• <b>The multi use of tubes and pots of cream should cease and individual tubes and jars used and labelled.</b></li> </ul>	

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- 11.1** The health care services continued to be sub-contracted to Primecare, which provided professional supervision and management to the team at the Secure Training Centre. The health care team at the centre comprised a health care manager, a senior nurse and six fulltime equivalent nurses. One post was vacant during the period of the inspection, although a replacement had been appointed and was expected to commence employment in December. One of the nurses currently within the team was shortly to move to another post within the centre, leaving another vacancy within the health care team.
- 11.2** The health care staff were suitably qualified for their role. The manager and one of the nurses had dual qualifications. They were both Registered General Nurses (RGN) and Registered Mental Health Nurses (RMN). Two of the nurses were also trained paediatric specialists.
- 11.3** The health care staff continued to make a significant contribution to the day-to-day life of the centre and were valued by staff and young people. However, the continued difficulties of staff vacancies placed additional pressures upon the staff. The team provided a range of services including; administering medicines, arranging medical appointments, meeting with all young people after an incident of physical restraint, approving young people as fit to travel before they left the building, attendance at multi-disciplinary team meetings, attending reviews and teaching sex and health education classes.
- 11.4** Nursing staff were also involved with the admission procedure for all young people admitted to the centre. They carried out a health assessment and established the health (including mental health) and medical needs of each young person.
- 11.5** Rebound and Primecare had recently produced a protocol to clarify expectations related to the sharing of medical information and confidentiality. This was translated into policy guidance and a clear procedure for recording, reporting and holding medical information about young people. One of the aims of the protocol was to ensure trainees were encouraged to provide informed consent to health care and treatment. Another aim was to ensure a clear procedure for the disclosing of personal medical information, also involving consent from the young person concerned.
- 11.6** The young people continued to have access to a visiting GP, dentist and optician and were able to access other National Health Service 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 a senior practice nurse would meet with the young person initially and if necessary arrangements would be made for a female GP to attend the centre.

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- 11.7** Nursing staff were concerned that they did not always receive copies of the medical notes and instructions provided after external medical appointments attended by young people. This lack of communication appeared to be a problem with those escorts not employed by Rebound, who attended the appointments with young people. We suggested that managers review the procedures with escort services to ensure that significant and potentially confidential information about young people is not mislaid.
- 11.8** The trainees did not always respond positively to the health and sex education sessions provided by nursing staff as part of the school curriculum. Health care staff told us they would like to explore different ways of providing advice on health and lifestyle matters to the young people, perhaps through the use of monthly themes and visual displays in the living units.
- 11.9** The nursing staff continued to play a key role in the review and oversight of practice and procedures relating to Suicide and Self Harm (SASH). A representative attended the weekly meetings where all young people 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.
- 11.10** The policy guidance and recording procedures for young people subject to SASH monitoring had recently been reviewed and revised. The guidance document provided clear advice to staff on the expectations related to assessing risk, developing management plans, minimising the potential for self-injury through the awareness of risks and signs of distress and appropriate monitoring and recording. One of the recording tools was a detailed self-harm assessment checklist, which provided a scoring matrix that highlighted the potential for self-injury and if necessary triggered a detailed level of observation and tracking.
- 11.11** Managers decided to review the risk assessment, planning and monitoring procedures for young people at risk of self harm after the recent tragedy in another secure training centre. They are to be commended for the efforts to ensure detailed guidance and clear procedures were in place. The new procedure was in the process of being launched with training being provided for all staff.
- 11.12** A specialist mental health team had been established, as recommended in the report of the last inspection. The head of YOS, the health care manager, a registered mental health nurse and the assistant psychologist formed the team and they met every two weeks. The team discussed all young people where concerns had been raised about their mental health. They initiated a range of strategies for advising and assisting staff in the management of the young person and made referrals as appropriate to the consultant psychiatrist.

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- 11.13** A consultant psychologist was also available to provide professional guidance and supervision for the assistant psychologists and to other staff, as necessary.
- 11.14** Adequate arrangements were in place for the safe and secure storage of medicines both within the healthcare centre and the individual units. However, the procedures for recording medicines dispensed by nurses was inadequate to ensure thorough accountability. There was room for improvement and although much thought had gone into the present procedure it could now be reviewed and improved.
- 11.15** We observed that there was no clear protocol to allow staff to store and administer their own medicines. We were informed that until recently storage of staff's medicines was undertaken by nursing staff but that this practice was ceasing.

# Premises, Security and Safety

**12**

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## **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"> <li>• Living conditions provided a homely atmosphere; the building was in good decorative order and the grounds well maintained.</li> <li>• There was a systematic programme of searches in place to ensure security was maintained.</li> <li>• The appointment of a health and safety advisor had improved the status of the health and safety agenda throughout the centre.</li> <li>• There were clear and effective procedures for the searching of trainees on admission.</li> <li>• Regular visits from the fire brigade ensured fire procedures were up to date.</li> </ul>	<ul style="list-style-type: none"> <li>• Security and safety on the living units within the centre was at times poorly supervised.</li> <li>• The kitchen areas on the living units were inadequate for the numbers of children being fed on the units at teatime during the week.</li> <li>• Cold air being pumped into the living units at times made trainees uncomfortable.</li> <li>• Washing machines on the living units were inadequate for the task for which they were used.</li> </ul>
RECOMMENDATIONS	
<ul style="list-style-type: none"> <li>• <b>The supervision of security and safety on living units must be monitored more effectively.</b></li> <li>• <b>Consideration needs to be given to finding a way to ensure fresh, cool air can be supplied to the living units without it being uncomfortable for trainees, particularly in their bedrooms.</b></li> <li>• <b>Consideration needs to be given to purchasing more appropriate washing machines, suitable for heavy use.</b></li> </ul>	

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- 12.1** The buildings appeared to be in good condition, well repaired and decorated, providing trainees with a homely environment within design restrictions of the units. The grounds and sports areas were looked after and tidy presenting a well ordered and well maintained appearance. Bedrooms were personalised when the appropriate incentive level allowed. Some of the living units had been imaginatively decorated for Halloween and there were appropriate and sensitive posters on the walls.
  - 12.2** Trainees in one of the units did complain that air was blown in their room at a level that was uncomfortable to them. This particularly is a problem when they are sleeping and they cover the vents with foam seating cubes.
  - 12.3** The centre was searched by the Duty Operational Managers (DOMs) on a regular basis to ensure security is maintained and this search was recorded. There had been no serious breaches of security reported to the Youth Justice Board monitor since the last inspection. However we did notice some poor supervision of security on the living units by care staff leaving young people at possible risk of harm or of breaching security. This was brought to the attention of the centre management team.
  - 12.4** There were clear and effective means of searching trainees on admission to the centre. This was undertaken sensitively at this difficult time but was rigorous in its approach. There were also clear rules for the vetting of visitors and clear guidance to relatives and visitors on what is permitted when meeting trainees. Personal possessions were stored on entry to the STC for collection on release.
  - 12.5** Regular visits from the fire brigade ensured that the centre and fire brigade would be prepared in the event of a fire. A full incident simulation was planned with the neighbouring prisons involved to test the effectiveness of the procedures.
  - 12.6** The recent appointment of a health and safety advisor had improved the status of the health and safety agenda within the STC. An action plan had been drawn up to address outstanding health and safety requirements. Its implementation will be carried out locally but overseen by the advisor. We found health and safety to be taken seriously by all staff at all levels and to be embedded into the culture of the centre. Guidance on safe-working practice had been drawn up and accidents were recorded and monitored regularly.
  - 12.7** An effective audit trail existed within the centre to ensure that staff were carrying out necessary checks on trainees and we saw evidence of action having been taken where this had not occurred to the standard expected by the centre. Trainees in their rooms were regularly observed by staff and these observations were recorded. An unobtrusive light was switched on at night to enable staff to observe trainees without disturbing them or having to enter their rooms.



# 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 Secure Training Centre has a written Statement of Purpose that 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. (Secure Accommodation Standards (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 that 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 Area Child Protection Committee 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.

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## **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 that 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 key worker in consultation with other staff and the post release supervisor. (E1, E6 + E7)
- 6.3** The post release supervisor monitors and keeps the key worker 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)

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## **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 Secure Training Centre's 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)