

INSPECTION OF MEDWAY SECURE TRAINING CENTRE

April 2006

COMMISSION FOR SOCIAL CARE INSPECTION

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Commission for Social Care Inspection –
North West
11th Floor
West Point
501 Chester Road
Old Trafford
Manchester M16 0RU

Service Inspectors: Robert Lindsey,
Robin Hughes, Chris Sealey, Vlasta Novak

Ofsted Inspectors: W Massum P Geraghty

Telephone: 0161 876 2400

Business Support: Brenda Alexander

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National Lead Inspector: Robert Lindsey

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Enquiries about this report should be addressed to:

CSCI, 11th Floor West Point, 501 Chester Road, Manchester M16 9HU

Further copies may be obtained from:

Commission for Social Care Inspection –
North West
11th Floor
West Point
501 Chester Road
Old Trafford
Manchester M16 9RU

Telephone: 0161 876 2400

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Contents

Chapter	Page
1 Summary	1
2 Recommendations	3
3 Profile of Establishment	5
4 Statement of Purpose	7
5 Management and Staffing	11
6 Assessment, Planning and Review	17
7 Care of Young People	21
8 Education and Vocational Training (OFSTED)	31
9 Tackling Offending	39
10 Health Care	43
11 Premises, Security and Safety	49
 Appendices	
A Standards and Criteria	55

Summary

1

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- 1.1 This inspection was conducted in April 2006 by four Inspectors from the Commission for Social Care Inspection (CSCI) and two inspectors from Ofsted.

Overall assessment

- 1.2 The previous CSCI inspection report in October 2004 noted that the provision of tight management control, the child centred approach adopted by staff, and the drive to improve services had resulted in progress in all areas of work at the Centre. This inspection confirmed that this progress had been maintained, refined and further improved, with the Centre providing a consistent level of service to a difficult to manage, challenging group of young people.

Main Findings

- 1.3 The management of the Centre was purposeful, effective and importantly, child focused. The investment in skilled, experienced heads of service and care managers had evidently transformed the quality of service at Medway STC.
- 1.4 The recruitment and retention of a relatively young and committed workforce was further evidence of progress. The investment in training for newly appointed staff was showing positive results in terms of the quality of service for young people. Access to further training was a valued incentive and staff were encouraged to develop their professional skills.
- 1.5 Management information systems had been developed and were used to good effect. The routine analysis of data drawn from each aspect of service at the Centre was used to inform the development of policy and the detail of practice.
- 1.6 The use of physical control in care (PCC) with young people was closely supervised and monitored by senior managers. There was information to indicate that in the period since last inspection the use of physical intervention was reported to have gradually reduced.
- 1.7 It was evident that the progress and improvements to date had been achieved through the leadership and management skills of the director and

the senior management team. This report identifies areas for development and makes recommendations designed to enhance the positive work and progress in providing responsive and effective services to young people held in custody.

1.8 Building on some solid achievements the key areas requiring further development and improvements are:

- the quality of the environment on the house units
- defining more clearly the way the variations on single separation of young people is used in practice and recorded
- identifying and improving those aspects of routine at the Centre that affect the quality of life for young people.

Reading the remainder of this report

1.9 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 sets out the context in which the secure training centre is operating; and
- Chapter 4 and each subsequent chapter detail the evidence that led us to our conclusions and recommendations.
- Chapter 8 recommendations relating to education and vocational training have been provided by Ofsted.

Recommendations

2

Management and Staffing

- 2.1 None

Assessment, Planning and Review

- 2.2 The director should set quality standards for case recording, unit log books and other documentation related to the care of young people at the centre (6.11, 7.18, 9.11)

Care of Young People

- 2.3 The director should ensure that staff have access to facilities in which confidential work with young people can take place without interruption. (7.6, 7.7)

The director should develop explicit policy and guidance on the single separation of young people (7.19)

The director should ensure that the centres record systems describe accurately the circumstances where single separation is used. (7.18, 7.20)

Education and Vocational Training (Ofsted)

- 2.4 The director should develop a broader range of vocational options,

The director should increase the provision of learning support

The director should ensure that there is more effective use of ICT in classrooms

The director should discuss with the Connexions service ways of developing a careers information and resources area

The director should take positive action to recruit staff from black and minority ethnic backgrounds

Tackling Offending

2.5 None

Health Care

2.6 None

Premises, Safety and Security

2.7 The director should give priority to improving storage facilities in the house units and more generally across the centre (11.13)

The director should replace the sofas in the house units with furniture that is safer and less susceptible to damage. (11.16)

Profile of Establishment

3

- 3.1 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 young people, 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.
- 3.2 Since the last inspection Rebound ECD have appointed an additional experienced senior manager to the post of deputy director, who has assumed day to day responsibility for the operation of the Centre and reports to Rebound ECDs director of children's services. The director has retained overall responsibility.
- 3.3 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.
- 3.4 At the time of the inspection the centre was operating at capacity, 76 young people were resident.

Statement of Purpose

4

STANDARD 1: STATEMENT OF PURPOSE

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

This standard looks at:-

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

STANDARD 1: STATEMENT OF PURPOSE

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • The statement of purpose and function had been developed and was focused on the needs of children and young people held in custody. • Managers and staff were clearly committed to providing a good standard of care to young people at Medway. • There were policies in place for addressing equality issues at the Centre. • The centre was organised and resourced to provide a responsive service to meet the religious, cultural and faith needs of young people. • It was routine for staff to consult with young people, their parents and carers, about decisions that affected in their lives. • Records showed that staff engaged with young people, preparing them for reviews and explaining how decisions had been made that would affect their future care. 	<ul style="list-style-type: none"> • The statement of purpose and function should continue to be developed in a variety of accessible languages and formats. • Managers should consider establishing a forum concentrated on the development and promotion of diversity issues to benefit those who lived and worked at Medway. • There was scope for an evaluation of the work of the S.M.I.M.M. meeting in relation to the agenda item “diversity and human rights” to determine how far these responsibilities were integrated effectively in practice. • There was a need to progress from the stage of displaying posters of positive images to a more active, developmental programme of work with staff and young people on equality and diversity issues.
RECOMMENDATIONS	
<ul style="list-style-type: none"> • None 	

- 4.1 The statement of purpose for the centre had been revised in response to the recommendations of the October 2004 inspection report. The current comprehensive statement was based on the national development agenda for children's services; "Every Child Matters "and set out in detail the policies and procedures for delivering an effective service to young people.
- 4.2 An abbreviated version of the statement was displayed in communal areas across the centre alongside other information, artwork etc designed to inform young people and visitors.
- 4.3 The current senior management team had worked hard to move away from a regime of containment toward one of purposeful engagement with young people during their period in custody. There was evidence to indicate that the investment in training and development had resulted in an increased sense of coherence and common understanding among staff of the needs of young people in a secure setting.
- 4.4 The centre had arrangements in place to provide multi-faith religious services and support to young people. Christian services were held in the chapel twice a week, and young people of other faiths had ready access to ministries of their own religion. There was an officer with chaplaincy responsibilities who played a key pastoral role in the centre. This was a well-resourced, effective element of the service to young people at Medway.
- 4.5 The policies and procedures covering equality issues and diversity were given priority within the operation of the centre. Monitoring arrangements were in place to ensure that this area of work informed the overall provision of services to young people.
- 4.6 It was evident that the range of need and circumstance of children and young people accommodated at Medway, in terms of age, legal status, sentence, length of stay, vulnerability, risk and academic attainment, as well as the more obvious issues of gender and ethnicity, was not ideal and posed a considerable professional challenge. The managers at Medway were acutely aware of these demands and, within the constraints imposed by the inflexibilities of building design worked to ensure that the care and education provided through individual programmes went some way to meeting the diverse needs of young people.
- 4.7 The approach taken to promoting the equalities/diversity agenda at the Centre had to date, been through the display of positive graphic images and exhortations to high principles of thought and behaviour. There was scope for a more organised, formal approach to this important area of work to actively engage managers and other staff in a more effective developmental agenda to ensure that practice in all areas of the centre meets a consistent standard in relation to the equality and diversity issues facing young people during their time at Medway STC.

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- 4.8** It was noticeable that the systems, policies and procedures were concentrated on ensuring that young people were treated as individuals. Management information and case records evidenced the efforts of case managers and key workers in maintaining contact with relatives and carers as part of the assessment, planning and review process. This work was supported by material developed specifically to assist families and keep them informed about the role of the Centre and the rights and responsibilities placed on them as a result of the young person losing their liberty. In this respect practice at the Centre was responsive and well organised in the manner in which young people, parents and carers were routinely consulted and involved in planning decisions affecting their lives.
- 4.9** Young people were encouraged and assisted to contribute to a programme of regular reviews, to which parents and carers were invited. This gave centre staff and those from partner agencies, the opportunity to provide young people with up-to-date information that influenced decisions about their individual circumstances. It was noticeable that this process was reliant on the experience and understanding of the staff involved. It would be useful as part of the Centre's staff development programme to consider how to equip staff with the necessary skills for this area of work.
- 4.10** A positive feature of practice at Medway was of managers and staff consistently reinforcing positive behaviour and making clear the standards of conduct expected of young people. This process began at the point of admission and continued throughout the period of their stay.

Management and Staffing

5

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:-

- 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.

STANDARD 2: MANAGEMENT AND STAFFING

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • There had been commendable progress in achieving staffing above minimum levels that allowed for cover for training, annual leave and sickness absence. • The quality of HR services at the Centre was excellent; a framework for recruitment training, appraisal and retention of staff ensured that all employees were clear about their role and responsibilities within Medway. • Records showed that the processes for checking and vetting staff prior to recruitment were in place and efficiently managed. • The initial training course and the staff-training programme provided the opportunity for professional development. • The schedule of staff meetings, team development days, and the availability of regular six-month refresher programmes was a factor in maintaining good standards of service at the Centre. • The provision of a mentoring support for newly appointed staff, staff supervision and the appraisal process were illustrative of the positive support for staff in delivering a quality service to young people. • The work of the centre was routinely appraised by external managers of the company, Rebound ECD, who provided written reports of their findings. 	<ul style="list-style-type: none"> • Work should continue on achieving a better balance in the composition of the workforce in terms of and its gender and ethnicity. • A stronger more effective model of child development would benefit staff working directly with young people. • Records should seek to describe actual events, avoid jargon and shorthand terms that are difficult to understand. • Managers should reinforce the importance of all records, logs, case records etc being legible and accessible as documents of public access.
RECOMMENDATIONS	
<ul style="list-style-type: none"> • None 	

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- 5.1 In the period since the last inspection the management structure of the centre had been reviewed and revised. The current structure provided clear lines of responsibility and accountability for the delivery of services to young people at Medway.
 - 5.2 Priority had been given to the recruitment and retention of the Centre's workforce. This had been a successful initiative and at the time of the inspection staffing was above recommended minimum levels. This was said to allow cover for training, annual leave and sickness absence. It was reported that the turnover of staff had decreased by 10 percent and the Centre was on target in its aim to establish an experienced well-trained staff team.
 - 5.3 The ability of the Centre to fill vacancies in a competitive labour market was attributed to improvements in pay scales, the quality of job adverts, the introduction of assessment days with competency-based interviews, a vetting interview, job simulation exercises, psychometric testing including literacy, numeracy reasoning, and a written exercise. These recruitment events had been held on Saturday's in order to attract a wide group of potential employees.
 - 5.4 A Night Coordinator had been appointed to oversee the work of two dedicated staff teams, which ensured a reliable, consistent level of service to young people out of hours. The Night Coordinator was a member of the residential management team and routinely met with the Centre's Head of Care.
 - 5.5 The composition of the staff group showed a reasonable balance in terms of gender in the senior management team. However, staff on the house units were mainly women. The ethnicity of the staff group was overwhelmingly white British, despite attempts by the Centre to recruit from minority ethnic communities. The population statistics on young people collected by the Centre indicated a continuing need to achieve a better balance in the workforce particularly in terms of ethnicity.
 - 5.6 The Human Resources service at the Centre was able to demonstrate the effectiveness of the systems and processes underpinning the recruitment, vetting, training and appraisal of the Centre's workforce.
 - 5.7 Staff could access ICAS, an employee support service providing advice in areas of finance, law, health, family issues and this was available to the staff member or members of their family. Access to counselling was also available as part of this service.
 - 5.8 All staff with responsibility for contact and direct work with young people were required to complete a seven-week initial training course (ITC). The ITC was a comprehensive programme focused on working within the structure of the Centre. In addition to the sessions on safety and security, child development, diversity mental health, anti-bullying strategies, child

protection, bereavement separation and loss and substance misuse were covered. Staff interviewed were positive about the ITC that along with the mentoring support from experienced residential managers provided a sound value base from which their work with young people began. Within the ITC a complete week was given over to instruction on the PCC restraint technique. While this reflected the priorities and concerns of managers and staff at the Centre it contrasted with the one day sessions on child protection and child development.

- 5.9** There was scope for the Centre to build on the successful work of the ITC and introduce a stronger more effective model of child development to the Centre's training programme than currently exists.
- 5.10** The introduction of Employee Development Reviews as part of the staff appraisal and performance management process was beginning to show results in terms of more effective collaboration between operational managers, human resources and the training section leading to targeted training for individuals and groups of staff. An improved supervision structure was in place for managers and staff. Outcomes of the formal supervision arrangements were monitored and reported as part of the overall process of performance management at the Centre.
- 5.11** There had been a considerable investment in training and staff development. A training needs analysis had been completed which informed the training and development strategy for the Centre. There was considerable opportunity and support for managers and staff to gain managerial and professional qualifications in line with the Centre's needs and priorities for service development. An annual training needs review for all staff was being implemented.
- 5.12** There was a schedule of regular staff meetings, team training and development days and a weekly newsletter from the deputy director providing a weekly diary, up-to-date information about visitors to the Centre, progress on a range of policy initiatives, pay awards, and in the example seen, the outcome of a staff consultation exercise.
- 5.13** The parent company for Medway STC, Global Solutions UK Limited, conducted monthly inspections based on Regulation 33 of the Children Act. The visits were undertaken by a team of three external Operational Support Managers who interviewed young people, their relatives where possible, staff and managers, inspected documentation on the house units, checked security and looked at the cleanliness and repair of the premises. A report was sent to the Centre's director with findings and recommendations for action if required. This appeared to be a well-organised process that supported the delivery of a consistent service to young people. Future inspections should look closely at this aspect of quality assurance to determine its effect and influence on practice in the longer term.

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- 5.14** The YJB Performance Monitor for the Centre had wider responsibilities covering the performance of Youth Offending teams in the area. An assistant monitor based at the Centre also worked at two other secure establishments in the locality. Apart from the inherent tensions of the monitoring role which focused on contract compliance and hence the flaws and shortcomings in the detail of daily practice, there was said to be a good working relationship between the monitors and the managers at the Centre. There were routine meetings between the monitor and the senior management team at which concerns and disagreements were discussed and generally resolved.
- 5.15** An interview with the Operational Placements Manager for the Youth Justice Board confirmed the views of senior managers that there had been a significant increase in the number of young people placed at the Centre with suspected mental health conditions and difficult to manage behaviour. The managers at Medway STC were regarded as responsive to the demands for places while remaining sensitive to individual need and the necessity of providing an effective service to young people with complex needs.

Assessment, Planning and Review

6

STANDARD 3: ASSESSMENT, PLANNING AND REVIEW

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

This standard looks at:

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

STANDARD 3: ASSESSMENT, PLANNING AND REVIEW

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • The initial assessment of young people on their admission to the centre was completed within the required timescale. • The process of risk assessment was systematic and thorough for all young people admitted to Medway. • The introduction of a redesigned initial “Assessment Grid” and care plan for young people was illustrative of the programme of positive development at the Centre. • The post of Community Reviewing Officer ensured that support and assistance, including suitable accommodation, was in place for young people immediately following their discharge from Medway. • Individual care plans for young people were reviewed at the weekly multidisciplinary meetings. This was seen as a positive, productive child centred process. • There were reliable systems in place for supervising and supporting the staff responsible for delivering the care plans for young people. • The organisation of health provision, including, mental health services and substance misuse services were a key feature of the assessment and care planning processes. 	<ul style="list-style-type: none"> • Staff responsible for producing case records and completing essential documentation should be more closely supervised and supported through development and training in order to prevent the present formulaic recording becoming the accepted standard. • Managers should develop effective methods for evaluating the impact of the assessment and care planning processes on young people. • The role of the independent advocate service should continue to be explored to look at the ways young people could be more effectively supported in the care planning and review processes.
RECOMMENDATIONS	
<ul style="list-style-type: none"> • The director should set quality standards for case recording, unit log books and other documentation related to the care of young people at the centre (6.11, 7.18, 9.11) 	

- 6.1 The Centre had developed a structured approach for the assessment of young people at the point of admission. The admissions manager was responsible for completing an initial custodial reception assessment with the young person being admitted. This interview allowed the admissions manager to make a judgment on young persons vulnerability and the level of risk presented by self-harming behaviour.
- 6.2 A key element of the admissions process was the health assessment carried out by a nurse that provided information about the young persons health and mental state to determine the level of vulnerability. Information from the placing agency, if available, was used to establish if there was a history of substance misuse or self-harming behaviour. It was aimed to complete the initial custodial reception assessment and health screening within an hour of the young person's arrival at the Centre.
- 6.3 Following admission all young people were subject to enhanced supervision, which meant being observed by staff every five minutes throughout the night, a process that continued for the first 72 hours of their placement.
- 6.4 The Centre had an established process for the management of suicide and self harm (SASH) which provided a clear framework for ensuring the safety and protection of all young people admitted to Medway STC.
- 6.5 The youth offending service (YOS), a 16 strong multi-disciplinary team was responsible for initiating a detailed assessment of young people following their admission. Young people were subject to a vulnerability assessment, which included screening for mental health issues and substance misuse. Information from this process ensured that action plans were drawn up to protect those individuals identified as being at risk. Priority was given to this area of work and risk assessments were routinely reviewed and updated as part of the care planning process.
- 6.6 The safety and protection of all young people at risk from self-harming behaviour was a primary task for the managers and staff at the Centre. The investment in the YOS and the development of multidisciplinary screening processes was evidence of sound strategic planning and effective management.
- 6.7 Initial assessments and care plans for young people were produced by the YOS within the required timescale. It was clear from the records that staff involved in producing the initial assessments and care plans worked hard to gain essential information from the placing authority and wherever possible parents and carers were involved in the planning process.
- 6.8 Individual care plans were reviewed weekly at a multidisciplinary meeting (MDM) chaired by a member of the YOS team. The meetings were seen to be organised and thorough. The team considered in detail the needs of the individual under discussion, concentrating on collecting and

exchanging information, considering the inter-relationship of information and assessing behaviour within the context of the group with whom they lived in the house units. The programme of intervention, for each young person including their “Offender Behaviour Programme”, was analysed and amended as necessary. Adjustments were made to care plans and the staff responsible for taking forward new areas of work with the young person were identified and agreed. Records showed that the outcome of the MDM was communicated effectively to managers and key workers and noted on young persons file.

- 6.9** A key element of the initial assessment and care planning process was the inclusion of the accommodation and resettlement needs of the young person newly admitted. This was a commendably active process, initiated by the of Medway STC, which ensured that these critical needs were brought to the attention of senior managers and decision makers in placing authorities well ahead of the young persons date of discharge.
- 6.10** The Centre had committed significant resources to the development and integration of the assessment and care planning processes, with good results. The YOS team were trained and equipped to deliver and maintain a consistent standard of service to young people. As a means of building on the acknowledged achievements so far inspectors felt there was scope for developing methods to evaluate the impact on young people of the assessment and care planning processes in which they were currently engaged. It was felt that work in this area would complement the YJB Key Elements of Effective Practice (KEEPS) project currently underway.
- 6.11** It was clear that in the period since the last inspection that there had been sustained progress in this area of work. However, case records showed that not all staff were completing documentation to a consistent standard. Managers should ensure that those staff that require it are closely supervised and assisted to understand the importance of the task and so improve the quality of their recording. This would prevent the current formulaic approach seen in a number of records becoming firmly established in practice. The Residential Services Managers have an important role in overseeing improvements in this important aspect of assessment care planning and review.

Care of Young People

7

STANDARD 4: CARE OF YOUNG PEOPLE

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

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

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

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

This standard looks at:

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

STANDARD 4: CARE OF YOUNG PEOPLE

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • Within the design limitations of the house units staff worked hard to retain privacy and confidentiality for young people. • Staff consistently reinforced the need for young people to comply with the rules on conduct and were clear about the consequences should they fail to do so. • Managers and staff provided a consistent model of positive adult behaviour as a means of maintaining good order and discipline at the Centre. • The use of physical control was closely monitored and reviewed weekly by senior and operational managers. • The complaints procedure was well understood and used by young people who were informed of their right to complain or seek representation on any issue of concern to them. • There had been a marked effort by senior managers to improve the quality of safeguarding arrangements for young people at Medway through increased contact with the local authority child protection services and liaison with the police service. • The pastoral service provided positive support to young people through a range of initiatives, including the development of information designed for young people on their admission to the centre. 	<ul style="list-style-type: none"> • The design of the residential units placed severe restrictions on the space in which work can take place with individual young people. • It was possible at meal times for young people to choose a high fat, low protein meal consisting entirely of processed ingredients. • Records showed that complaints forms from young people were not always completed by staff to the required standard. • Managers should ensure that the circumstances in which "single separation" takes place is accurately described in the Centres records.

RECOMMENDATIONS

- **The director should ensure that staff have access to facilities in which confidential work with young people can take place without interruption. (7.6, 7.7)**
- **The director should develop explicit policy and guidance on the single separation of young people. (7.19)**
- **Managers should ensure that the centres record systems describe accurately the circumstances where single separation is used. (7.18, 7.20)**
- **The director should give priority to the provision of a balanced and healthy diet that takes into account the religious and cultural needs of the young people**

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- 7.1 Managers and staff of the Centre had adopted an informal but firm approach in their relationship with young people marked by its considered thoughtfulness and good humour. Staff who spent the majority of their working day in direct contact with young people were seen to provide a relaxed model of adult behaviour in the face of unrelenting demand for attention. There was evidence of young people being admitted to the Centre with attachment disorders, post-traumatic stress disorder, suicidal and self harming behaviour and in increasing numbers, a history of multiple unsuccessful placements in mainstream local authority care and, importantly within secure provision.
 - 7.2 As noted earlier the complexity of need within the resident group of young people presented a constant professional challenge to the work of the Centre. Despite these difficulties, staff set clear boundaries for young people and consistently reinforced the importance of positive behaviour and compliance with the rules and expectations governing conduct, with some success.
 - 7.3 There was an established schedule of meetings designed to provide young people with the opportunity to comment on and influence the pattern of life for them the Centre. Records showed the attempts of staff to engage young people in a constructive dialogue about their contribution to the decision-making processes, particularly on the house units.
 - 7.4 A Trainee Council had been successfully introduced. A meeting was held fortnightly during a Citizenship lesson as part of the education curriculum. Twelve young people elected by their peers represented the individual house units. It was reported that membership of this group was valued by young people. The meeting was seen as important aspect of work in the Centre and was attended by the head of education, a residential services manager, a youth worker and the duty operations manager. The meeting was chaired and minuted by young people and operated within a set of expectations and rules. The trainee council was a concrete example of the Centre's inclusive approach to involving young people in decision-making and problem solving during their period in custody. A trainee magazine, now in its third edition, was a further example of how young people were encouraged to engage in positive educative experiences and in doing so contribute to improving the quality of service to their peers.
 - 7.5 The policies and procedures of the Centre emphasised the importance of maintaining privacy and confidentiality for young people. The poor design and limitations of the house units required staff to be alert to the needs and sensitivities of young people living in what was by any measure a cramped environment. An example was that Unit logbooks constantly referred to the need for young people to maintain "personal space" as a result of deliberate and accidental bodily contact with staff and with other residents.

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- 7.6 None of the units had an appropriate facility to hold a private conversation, other than the young people's personal bedrooms. Key worker sessions were observed to take place on the bedroom corridors and in communal areas with everything else going on around. It was only with the greatest difficulty that confidentiality and an individual approach was maintained
- 7.7 It was noted that with everyone else able to listen, the likelihood of key workers striking an effective professional rapport with young people, exploring feelings and emotions, while making best use of the work programme was inevitably inhibited. There was some evidence that key worker sessions were curtailed or diminished as a result of these circumstances
- 7.8 It was reported that sessions with specialists e.g. the psychologist or psychiatrist were held elsewhere on the campus, either in the chapel or the room in the administration block used for reviews.
- 7.9 A programme of recreational and sporting activities had been developed which could be accessed as an additional award by those young people who had achieved platinum and gold status under the rewards and incentive scheme. These activities referred to as “clubs” were held on weekday evenings and included weights training fitness, music, cookery, art and craft, woodwork, and model making. For the majority of young people seen at the time of the inspection, when they were not involved in clubs, the evening activity on the units consisted of TV viewing, pool or computer games. There was evidence from posters, ingredients and materials in the kitchen, that staff did engage young people in other activities on the house units. But it seemed to depend on the interest and inclination of individual staff. Books, magazines and newspapers were not immediately apparent, staff referred to board games, chess etc but none were observed in use.
- 7.10 Ideas and proposals for building on the success of the existing programme of weekend activities were being developed and considered. Staff had been creative in developing contacts in the community, sports and leisure activities etc as a means of broadening the experience of young people during their time in custody. The young people were encouraged and assisted to maintain contact with their family and where appropriate their friends. Staff ensured that young people were afforded access to their YOT workers, legal advisers and representatives of other agencies with an interest in their welfare.
- 7.11 The importance of maintaining a level of good conduct and personal control was explained to the young person at the point of admission to the Centre and consistently reinforced throughout their stay. It was a positive feature as noted earlier, that staff approach this task in a consistent and, depending on the circumstances, a generally relaxed manner.

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- 7.12** The maintenance of good order, a central concern of the staff team, and a contractual obligation, centred on the application of rewards and sanctions. The system was based on challenging negative behaviour and rewarding positive behaviour. Young people were informed about the expectations of conduct at the point of admission and through the provision of an admissions pack the incentives of the rewards and sanctions scheme were made clear.
- 7.13** Young people spoken to were generally positive about the scheme and the manner in which it was implemented. It was evident that the system had been fully explained to young people who understood clearly its subtleties and complexity. The incentive to move to the higher levels of platinum and gold, with their attendant rewards, clearly motivated a significant number of the young people resident during the time of the inspection.
- 7.14** This was a well thought out, effectively managed process which, as noted in the previous inspection report” created a calm atmosphere, enabling staff on the units to progress other activities”. Managers were not complacent about the progress made using this approach. The scheme was reviewed annually and young people were consulted as part of this process. It was reported that in response to the last review the majority of young people experienced the incentive levels scheme as “helpful in encouraging positive behaviour”. Performance data from the scheme was monitored, particularly where sanctions were applied, and reported to the monthly managers meeting.
- 7.15** The Centre's policy and guidance on the use of physical restraint was compliant with the contract requirements of the Youth Justice Board. Staff who fulfilled a custodial role were trained in the use of the PCC technique and certified by the Home Office.
- 7.16** The YJB carried out a review of PCC. The outcome of the review was to amend the PCC system, including the withdrawal of one hold. All staff had been retrained in early 2006 to reflect these changes to the PCC restraint system. This aspect of the work continued to consume a great deal of management time and staff resources. Priority was given to equipping staff with negotiations skills along with the sequence of PCC techniques for physically restraining young people. Data on the use sanctions and restraint was routinely collected and analysed monthly by managers.
- 7.17** The behaviour management observed during the inspection appeared to be effective. Staff were consistently firm and did not overreact to incidents or provocation by young people, but relied on diversion techniques to avoid the routine use of physical control. It was reported that whilst some difficult to manage individual young people, had required a relatively high level of control, the incidence where restraint was used at the Centre had gradually reduced. For most residents physical restraint was a rare event, a fact that speaks well of the behaviour management skills of staff. It was
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evidenced that in the 12 months period between March 2005/2006 the number of incidents where restraint was used fell from a high of 248 in one particular month to 46 in March 2006. Data collected showed that in March 2006 6 young people were involved in 32 of the 46 incidents where restraint was used.

- 7.18** Managers were not complacent about these figures and continued to seek better information about the circumstances leading to the restraint of young people at the Centre. The monthly managers meeting which considered all of the performance data presented in graph form was a commendably thorough process which attempted to use the figures to look at ways of further reducing the necessity to use restraint in order to maintain order and control. It was the policy of the centres director not to sanction the use of handcuffs as part of the restraint procedures. Inspectors consider this a commendable decision, which the managers felt reflected their child centred approach to the needs of the vulnerable young people in custody. It was noted that there had been no reported increase in disorder among the resident population as a result of this policy decision.
- 7.19** Permissible forms of control were routinely recorded. Inspectors saw examples that were difficult to evaluate due to the use of shorthand phrases such as “threatening behaviour”, “violent and aggressive outburst”, or “assault” to describe behaviour. Managers need to ensure that staff record what actually happened. This applied to the majority of records on the house units. Greater accuracy in this area of recording would be invaluable in assisting managers and other staff to understand more clearly the circumstances, which lead to the imposition of sanctions, or the use of restraint, or other logged events.
- 7.20** The position statement provided to inspectors prior to the visit noted, “the understanding of some staff regarding directed, elective and single separation has needed clarification and enforcement”. It was evident that practice in this area was not as well understood and implemented as other supporting elements of the procedures covering the management and control of behaviour at the Centre. It was not clear from the records and from interviews that staff distinguish single separation sufficiently from other forms of behaviour management as a means of maintaining safety or when elective separation can be used as a privilege and when used as a measure of control. As with other documents, a marked improvement in the quality of recording would be of great benefit to managers who needed to understand how policy and guidance was routinely delivered in practice, and would serve to protect the interests of young people.
- 7.21** As noted earlier, managers were alert to these difficulties and had redrafted the Centres policy on directed and elective single separation and what was described as “bedroom monitoring”. The amended policy had not received the approval of the YJB.

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- 7.22** There was established complaints system that inspectors found was well understood by young people. It was noted that copies of complaint resolution forms filed on the units were not always complete and were not routinely signed off by the young person at the end of the process and did not advise young people that they may seek help from “Voice” (advocacy service) in making a complaint.
- 7.23** Free telephone access to an advocacy service was available at all times, as was access to Child Line, the Samaritans, the Citizens Advice bureau and the Howard League.
- 7.24** The management of complaints from young people was said to be a priority and the details of individual complaints were discussed at the weekly directors briefing meeting and the multidisciplinary management meetings. Since September 2005 the responsibility for complaints had rested with the head of residential services. Monitoring data, including trend analysis related to complaints, was reported to the monthly SMIMM.
- 7.25** Senior managers met monthly with a manager of the “Voice” advocacy service to review individual complaints, the overall handling process, and other issues affecting the rights and representation of young people at the Centre. Record showed that in the 12 months preceding the inspection 30 child protection complaints were referred to Medway Children's Services. No complaint was upheld although in a number of cases “practice issues” were identified requiring the attention of managers at the Centre. The overall number of complaints had fallen in recent months and this was said to be in part attributable to the timetabling of the Trainee Council meeting into the school day.
- 7.26** There was evidence that in a number of cases senior managers at the Centre failed to respond promptly to requests for clarification and further information on individual complaints.
- 7.27** Interviews with the child protection social worker, and the manager of the Voice Advocates Team, who visited the Centre, confirmed that obtaining information from managers quickly to assist in the handling of particular complaints was a continuing problem. Correspondence and other records supported these concerns.
- 7.28** Although senior managers took issue with these views and could produce data to challenge these assumptions, there were unresolved difficulties in this aspect of the Centres service to young people, which appeared to be at odds with the degree of progress noted in other areas of practice.
- 7.29** The Centre was in the process of developing a programme of restorative justice designed to tackle bullying and provide a conflict resolution service. The restorative justice model was used principally to settle disputes between young people and between staff and young people. Where possible and appropriate, parents and carers would be involved.
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The Kent Mediation Service provided training and the Centre had eight trained facilitators. This was an interesting and commendable initiative on the part of the Centre. It will be interesting to note in future inspections the impact of this innovative approach to conflict resolution on the lives of young people during their period in custody at Medway STC.

- 7.30** The improvements in the management and handling of child protection noted by the previous inspection had been sustained. The director and deputy director of Medway STC were members of the ACPC, now the Local Safeguarding Children Board, and had successfully negotiated a joint policy and procedure for the safeguarding of young people at the Centre. This required for allegations made by young people to be referred to Medway Child Protection Services within one working day. The protocol allowed for the young person making allegation to be interviewed by a nominated manager at the Centre as a means of ascertaining their wishes and feelings and in order to complete the required documentation and supporting information to assist the decision-making process. The senior practitioner at Medway Child Protection Services responsible for investigating referrals from the Centre confirmed his satisfaction with this process. He commented on the volume and detail of information provided by the Centre in support of individual referrals.
- 7.31** There had been some recent amendments to the referral process involving the Youth Justice Board monitors. This ensured that while the monitors were kept informed on the detail of child protection allegations, there was no impediment to meeting the requirements and timescales of the referral process.
- 7.32** It was clear from interviews with managers and staff that the safeguarding of young people was to the forefront of thinking and practice at the Centre. Concerns about delays in responding to requests for information were on the agenda in the monthly meetings with the Youth Justice Board and “Voice”, and it was anticipated by those involved that these matters would be swiftly resolved.
- 7.33** The Centre had appointed a full-time chaplain; a lay minister licensed by the Archdioceses of Canterbury who undertook general duties alongside other management staff. Within the management structure the chaplain was responsible to the Head of Care and provided information on the religious and cultural needs of young people to the senior management team. These arrangements, which included access to Anglican, Catholic, Islamic and other faiths, were a commendable feature of the service to young people.
- 7.34** Whilst pastoral matters were the chaplain's primary concern, he was also responsible for the production of high-quality information for young people. This included a deceptively simple pack of postcards that served as an introduction to the Centre and was provided to young people on their

admission. A DVD had been produced and shown to young people as part of the admission process.

- 7.35** The production of such informative material designed specifically for the target audience of young people in custody at the Centre had been commendable achievement. Inspectors felt that building on the achievements to date, there remained scope for further development in this area of work to ensure that the available media was used to best effect for individual young people whose comprehension may be limited.

Education and Vocational Training (OFSTED)

8

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.

This standard looks at:

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

STANDARD 5: EDUCATION AND VOCATIONAL TRAINING

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • Very good and effective leadership and management • The assessment of learners' needs is very good • Good and improving levels of accreditation • The quality of teaching is very effective • Very good tracking of learner progress both within the centre and in the community • Good facilities and resources to support learning • Impressive displays of thought provoking art work greatly enhance the learning environment 	<ul style="list-style-type: none"> • The range of vocational options and subjects on offer are insufficient • The provision of learning support is unsatisfactory • Staffing is not sufficiently representative of the learning community • The use of ICT in classrooms • Access to appropriate up to date careers information and materials is inadequate • Insufficient opportunities exist for learners at level 2 and above
RECOMMENDATIONS	
<p>The Centre needs to:</p> <ul style="list-style-type: none"> • Develop a broader range of vocational options • Increase the provision of learning support • Ensure that there is more effective use of ICT in classrooms • Discuss with the Connexions service ways of developing a careers information and resources area • Extend the provision of learning support • Take positive action to recruit staff from black and minority ethnic backgrounds 	

CONTEXT

8.1 Medway Secure Training Centre is situated in Rochester, Kent. The centre is run by Rebound, a subsidiary of Global Solutions Limited. They, in turn sub-contract work out in respect of education, healthcare and catering. Education is provided by City College, Manchester, which is required to deliver the services, specified by the management of the centre. This specification conforms to the agreement that Rebound has within its contract with the Home Office. The centre has 76 residential places for young people aged 12–17 years. At the time of the inspection there were no young people aged 12 years on site. Sixty eight per cent of the population were aged between 15 and 17 years with the majority from London and South East England. The average length of stay is 3 months and 15% of the population are serving sentences in excess of 2 years. Reading ages of the young people are, in most cases, below chronological ages: 28% of the population had a reading age below 9 years. Teachers are expected to teach an average of 22.5 hours each week. In order that the centre is contract compliant there must be 18 teachers on site (Monday to Friday).

8.2 RECORD OF EVIDENCE

8.3 Inspectors observed and graded 15 teaching sessions covering the range of curriculum delivered at the time of the inspection. Teachers, learning support assistants, guidance staff and young people were interviewed. Records, documents, resources and curriculum/lesson materials were reviewed, accommodation and equipment inspected and self-assessment reports and development plans reviewed and discussed.

Performance Indicators

Achievement over the last 12 months

1. Number of listed unit awards per trainee per month	6
2. % of sessions where learners' responses were at least satisfactory	93%
3. % of sessions where attainment was at least satisfactory or better	93%
4. % of trainees who left without any accreditation in last 12 months	0%
5. % of trainees who left for to a community education/training placement	50%

Participation

6. Capacity of education/training as % of maximum number of trainees	100%
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7.	Average turnover per month on class registers in month prior to the inspection	33%
8.	% student-hours lost through poor punctuality in month prior to the inspection	0%
9.	% attendance in month prior to the inspection (during inspection)	97.2%
10.	% student-hours lost through cancellations in month prior to the inspection	0%

Reviews

11.	% of initial review meetings attended by education staff over last %twelve months-	99.4%
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Staffing and Resources

12.	% FTE education staff complement currently in post	98.4%
13.	% of all teaching, training and support staff with appropriate qualifications	100%

Quality

14.	% of sessions where teaching is at least satisfactory	93%
15.	% of sessions where teaching is good or better	74%

OVERALL EFFECTIVENESS

- 8.4 This is a very good establishment. The Head of Education, who is a member of the senior management team of the centre, provides very strong and effective leadership. There is a developing culture of self-evaluation. Realistic self-evaluation is linked appropriately to a three year development plan. The quality of teaching is good. However, there is scope for developing the use of information and communications technology (ICT) to support teaching and learning. Accreditation rates are increasing and there has been a significant increase in the number of GCSE entries over the last 3 years. Arrangements for initial assessment are good and there is very careful monitoring of learner progress both within the centre and in the transition of young people to the community. The curriculum offer is good. There is a need to develop a broader range of vocational options particularly for the increasing number of 16 and 17 year olds being referred to the centre. Most learners enjoy learning and behave well. There is an experienced team of dedicated teachers. The proportion of teachers from black and minority ethnic backgrounds is low.

ACHIEVEMENT AND STANDARDS

How well do learners achieve?

- 8.5 Overall, achievement and standards are very good.
- 8.6 All learners achieve some accreditation and for many this is their first certification in education. On average each learner gained 6 accreditations per month mainly through the AQA award units. GCSEs and ASDAN awards are also on offer. There has been a significant increase in the number of GCSE entries from none in 2003 to 66 in 2006. Of the 30 GCSE entries in 2005, 100% passed at A* - G with 18% of these gaining A* - C grades.
- 8.7 The assessment of learners' educational needs is very good. There is an immediate assessment within 24 hours of a young person's arrival followed some 10 days later by a basic skills assessment. In a recent sample of new entrants 50% were assessed at entry level 3 or below. The majority of learners make good progress in developing their basic skills during their period at the centre. However, there is limited one-to-one support on offer in lessons. The two learning support assistants are only able to provide for a small percentage of student need. Teachers use different approaches to meet the wide range of ability in the teaching groups but there is insufficient challenge for learners at level 2 or above.
- 8.8 The standard of scrutinised work ranged from satisfactory to very good. Standards in art were outstanding exhibiting creativity and good

composition with strong reference to the work of key artists. The centre was festooned with impressive displays of thought provoking artwork that greatly enhanced the learning environment. There are very good standards in science, mathematics, physical education and English.

THE QUALITY OF EDUCATION AND TRAINING

How effective are teaching, training and learning?

- 8.9** Teaching and learning is good overall.
- 8.10** Of the lessons observed 72% were judged to be good or better and 21% satisfactory. There was much good teaching. The good or better lessons were well planned with a lively pace and a good use of a variety of materials and approaches to learning. Positive relationships were established with learners that promoted motivation and confidence. Behaviour was good; young people worked well together and actively participated in class discussions. Students enjoyed learning. Inappropriate behaviour was dealt with quickly and effectively. Learners receive regular encouragement and praise from staff and are aware of their targets and achievements. Assessment records are used well to plan lessons. Extensive checks are made on progress and lesson objectives were well summarised at the conclusion of lessons. For example, in an art lesson students worked with confidence on their ideas referencing the influence of great artists with their own creative vision. In mathematics, topical materials were used to promote learning and interest. In food technology, students were delighted with their achievement in making a pizza and the opportunity to evaluate the culinary work of other class members. In humanities, students worked with a sense of achievement in identifying continents, oceans, deserts and mountain ranges through grid referencing and locating and marking these features on a world map. In music, an outstanding lesson was observed with a mixed group in terms of age and gender enthusiastically developing their skills playing a professional set of steel drums
- 8.11** In a small number of lessons the work was less well planned and there was a lack of variety and pace, which resulted in students losing concentration and direction. Inappropriate behaviour was dealt with less effectively and occasionally diverted teachers from focusing on the students who needed help.
- 8.12** Class materials are generally good but there is insufficient use of ICT to promote learning. The involvement of training assistants in lessons has improved since the previous inspection but is variable. In the better examples, training assistants were actively engaged with students to support teachers and promote learning. Particularly good practice was observed in art, drama, mathematics and science. In a minority of lessons

the training assistants were detached from the learning process and made little contribution.

More able students are insufficiently challenged and provision to address individual learning needs within lessons remains an area for development. Attendance and punctuality in all observed lessons was very good.

How well do the programmes and activities meet the needs and interests of learners?

8.13 Overall the curriculum is good.

8.14 There is a good range of subjects on offer closely aligned to the national curriculum. All students follow a programme including the core subjects, art, design technology, music and home economics. Students have access to a limited range of vocational options. The well-resourced hairdressing salon is not being used on a regular basis due to problems in attracting suitably qualified specialist tutors. Students have good access to a developing programme of evening enrichment activities including art, woodwork, music, model making, weights and fitness and cookery. The Centre has taken effective action, since the previous inspection, to review the content and co-ordination of the Offending Behaviour and personal and social education programmes. A revised Contentious Issues programme is being developed by residential staff and taught at weekends. The Centre is meeting Youth Justice Board targets in terms of teaching hours. The morning teaching session lasting three hours, without a break, is too long.

How well are learners guided and supported?

8.15 The quality of guidance and support is very good.

8.16 An initial assessment relating to reading, spelling, numeracy and learning style is made within 24 hours of a young person's arrival at the centre, in order to comply with Youth Justice Board requirements. Information gathered at this time is circulated to all teaching staff prior to a young person's commencement of lessons. A second numeracy and literacy assessment is made 10 days after a young person has settled into classes. Students are asked to complete a literacy and numeracy assessment before their departure in an attempt to measure the progress and distance travelled in terms of basic skills. There is a comprehensive database, which records accreditations. Daily staff meetings enable effective sharing of information and monitoring of student behaviour and progress.

8.17 The Centre has established an effective set of procedures to ensure that information relating to a young person's achievements, behaviour and progress are gathered in a systematic way and presented, by education staff, at the Detention and Training Order (DTO) meetings. Careful

attention is given to the setting and monitoring of realistic education targets for young people at these meetings. The Education Welfare Officer ensures that information relating to a young person's prior educational experience and attainment is gathered, wherever possible, from schools, local education authorities and other secure establishments. The post holder is also active in assisting young people to find meaningful placements in education, training and employment, on release. Effective steps are taken to monitor the progress of young people in the community through a questionnaire survey and a member of the youth offending service team attends the first DTO review in the community, regardless of location.

- 8.18** The guidance and support service offered to young people by the local Connexions partnership has improved since the previous inspection. Two Personal Advisers offer a combination of guidance and group work activities. There is, however, a limited range of careers materials and information to assist young people in their planning and decision-making.

LEADERSHIP AND MANAGEMENT

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

- 8.19** Leadership and management are very good. There is a developing culture of self-evaluation in the education department. There is a detailed and well-organised system of lesson observations. The self-assessment report is realistic and linked to a three year development plan. The education Manager has a very good understanding of the strengths and weaknesses of the department and has been appointed to be a member of the Centre's senior management team with overall responsibility for behaviour management and substance misuse. An impressive computerised system has been established to record students' progress and their achievements. Insufficient attention is given to the analysis of this data to inform planning and external bodies including the Youth Justice Board. There is a team of dedicated, trained and experienced teachers who have access to a good range of staff development opportunities. The proportion of teachers from black and minority ethnic backgrounds is low
- 8.20** The quality of the learning environment is good. Rooms are well cared for and wall displays are excellent. The range and quality of IT resources has improved since the previous inspection and there are plans, at an advanced stage, to recruit an IT technician. Accommodation and facilities for staff are cramped. Young people have regular access to the much improved library.

Tackling Offending

9

STANDARD 6: TACKLING OFFENDING

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

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

This standard looks at:

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

STANDARD 6: TACKLING OFFENDING

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • The investment in the youth offending service at the Centre had ensured the continuing development of methods of intervention with young people. • Reviewing young peoples individual care programmes through the weekly multi-disciplinary meeting was evidence of the centre's commitment to improving performance in this area. • The current piloting of the Active Citizenship programme at weekends to replace the former generic programme of crime avoidance allows individual needs to be targeted to a much greater degree than was previously possible. • A developing range of materials such as the recently introduced Jigsaw programme in which staff had been well trained was further evidence of an individualized approach to work with young people. • There were mechanisms in place to evaluate the delivery of the programme for tackling offending behaviour. • There was evidence of good planning in the programmes of work and recreation at weekends for young people. Staff were seen to handle this aspect of their duties with energy, commitment and good humour. • The organisation of the tackling offending programme was businesslike while remaining sensitive to the needs and complexities of individual young people at the Centre. 	<ul style="list-style-type: none"> • There was scope for unit staff to have a greater contribution to the case management process. • Standards should be set and monitored for the recording of work with individual young people. • Managers should give priority to ensuring that all staff are equipped with the skills necessary for the production of case records and other documentation relating to the care of young people.
RECOMMENDATIONS	
<ul style="list-style-type: none"> • None 	

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- 9.1 There had been significant investment at the Centre in services designed to address the causes of young people's offending behaviour which in the case of sentenced young people, had led to their loss of liberty. A senior manager, headed up the youth offending services, a multidisciplinary team that worked with individuals and groups of young people. The head of education was responsible for the Substance Misuse Service Youth Work and Enrichment, and the Education Welfare Officer, although in practice they were key members of the team.
 - 9.2 In response to recommendations in the previous inspection report of 2004, there had been major development in the delivery timing and content of programmes of crime avoidance, away from standardised "one fits all" programmes to a more individualised and targeted group approach. This new approach was being piloted and has required negotiation with Youth Justice Board in order to vary the contractual obligations. In effect this replaced the contractual provision of each young person having to receive seven hours per week of work on crime avoidance.
 - 9.3 The new programme entitled "Active Citizenship" consisted of three hours at weekends based around sessions in which contentious issues are presented to young people for exploration and discussion. Additionally young people have two targeted individual sessions during the week with a member of their key work team.
 - 9.4 The offending behaviour programme was delivered by house unit staff, supported by the YOS team. There appeared to be a good level of support for this work at weekends. There was a wide range of other individual and group programmes, e.g. substance misuse, and specific work with the Centres psychology and psychiatry services. At the time of the inspection there was a weekly group for young people whom misused drugs, an alcohol misuse group was held every three weeks.
 - 9.5 A recent introduction had been the Jigsaw Programme, which focused on offending behaviour although components could be selectively applied for young people on remand. It was primarily a tool for assessment but could also be used for work on a young person's problems. While it was too early to assess the effectiveness of the Jigsaw Programme it was reported by the YOS team that staff on the house unit found it a useful tool in their crime avoidance work with young people.
 - 9.6 The appointment of a Programmes Manager in 2004 evidenced the Centre's commitment to developing more effective methods of intervention with young people with histories of poor behaviour and complex patterns of offending. Work was under way on a "Smart Thinking" group work programme designed to assist young people in the development of social and interpersonal skills. Other work in planning included specific interventions with young people convicted of fire related offences, and training for staff to assess and work with young people whom sexually abuse.

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- 9.7** There were review processes in place to ensure that the interventions with young people were tailored to their individual needs. The weekly multidisciplinary meetings, MDM's, were key to this process. Work was under way to improve the transfer of information at the point of discharge to the YOT supervisor in the home authority about the work undertaken with a young person during their time at Medway STC.
- 9.8** Proposals were submitted to the Youth Justice Board's contract team to agree a contract change to pilot the revised offending behaviour programme. Rebound has a quarterly strategic planning meeting which focuses on the development of offending behaviour programmes.
- 9.9** There was a clear commitment at the Centre to reviewing and learning from the crime avoidance work undertaken so far. There were plans in hand to develop a database which would enable managers to analyse trends, identify need, tailor interventions more specifically and monitor outcomes for young people more effectively. This aspect of the Centres work was impressively resourced, well organised and businesslike. Importantly the structure of the offending behaviour programme actively engaged staff on the house unit, enabling them to work directly with young people on the causes and influences which had led to them being in custody.
- 9.10** The youth offending service was a commendable aspect of the Centres work with young people, providing skilled professionals and a sound framework for developing effective offending behaviour programme. While staff were self evidently accorded equal value, in practice a distinct gap was observed in the professional hierarchy between the YOS team case managers who designed and supervise the crime avoidance work and the house unit staff who delivered the programmes to individual young people. There was clearly scope for the house unit staff to be drawn more closely to the case management process. This would serve to disseminate experience and skills more widely among the workforce, raise the status of the residential care element of the service and increase the impact of the work with young people.
- 9.11** Case records and other documentation focused on individual work with young people indicated the need for managers to set quality standards. Priority should be given to ensuring that all staff have the skills necessary for the production of case records and other documentation on the care of young people. This aspect of staff training could usefully be introduced to the initial induction course and if necessary continue as part of the supervision and staff development process.

Health Care

10

STANDARD 7: HEALTH CARE

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

This standard looks at:

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

STANDARD 7: HEALTH CARE

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • The availability of health care at the centre ensured that young people had access to medical and nursing staff at all times. • All new admissions to the centre were attended by a nurse who undertook an initial health check that included an assessment of risk for self-harm, and subsequently a screening for substance misuse and a mental health. • Young people had routine access to the GP service and were allowed to self refer. • Nurses were responsible for the delivery of health education and health promotion programme for young people within the academic timetable. • The SASH and FOCUS procedures alerted staff and put in place protective monitoring and supervisory arrangements for young people with a history of self-harming behaviour. • There were arrangements in place to ensure that young people who were unable to attend education or leisure pursuits through ill health were afforded access to activities that met their needs. 	<ul style="list-style-type: none"> • Managers should look for the most effective way to support the proposal to introduce a "health care passport" which would go with each young person on their discharge from the Centre. • Priority should be given to the discussions about a more systematic approach to ensuring the immunisation of young people is brought up to date. • Monitoring should usefully include the number and proportion young people seeing the dentist so as to ensure maximum use is made of the opportunity for remedial work.
RECOMMENDATIONS	
<ul style="list-style-type: none"> • 	

Health Care Service

- 10.1** The Centre had an established clinical team of 8 (fte); with a further two with experience of learning disability and substance misuse were available via a nursing bank. A Healthcare Manager, supported by a senior nurse, oversaw the work of the team. A healthcare administrator had been appointed since the last inspection to assist the team; this post was welcomed by nursing staff as it enabled them to concentrate their time on clinical issues.
- 10.2** The development of the skills and knowledge base of the team was a priority for the Centre. In last year women's health, genito-urinary medicine, school nursing and mental health were added to the clinical repertoire of the team. Young people were registered with the GP on admission, allowing them access to the weekly surgery held on Monday evenings. The GPs referred young people for external hospital appointments, outpatient clinics and specialist services where necessary. Nursing staff in consultation with the duty GP could make emergency referrals. Records showed that in 2005, 15 young people attended the local A&E Department.
- 10.3** A dental surgery was held weekly. The service was described as excellent and responsive to the needs of young people providing 24-hour emergency cover to the Centre. Ophthalmology services were provided through regular visits by an optician who had established links with the GPs service which ensured that effective treatment and care was available to young people during their time in custody.
- 10.4** The annual report of the Healthcare Centre noted that in line with national trends the admission of young people with sexually transmitted diseases had increased. A genito-urinary medicine (GUM) clinic was set up at the Centre in May 2005. Young people who were informed about the service on admission, information that was repeated and reinforced throughout their period of residence, self referred to the monthly clinic. This development had been successful in providing a much-needed efficient treatment to young people while removing the need for escorts and additional security during visits to external clinics.
- 10.5** Nurses were required to attend and participate in all admissions to the Centre whatever the time of day or night. The nursing staff made twice-daily visits to every house unit to administer medication and treatment and to ensure that good standards of health were being maintained. Staff relied on the nurses identifying illness, and treating minor injuries. The storage and administration of medication at the Centre was managed by nursing staff and supervised by a local pharmacist. Young people could also request a personal interview with the nurse in which their individual health needs could be discussed. Information about healthcare at the centre was

provided to young people following admission at their initial planning meeting.

- 10.6** Operational links had been developed with the local school nursing service. A vaccination clinic was held at the Centre. This enabled young people, once consent and their vaccination history had been obtained, to receive the immunisation they required.
- 10.7** The healthcare team was also responsible for delivery of a comprehensive health education and health promotion programme. This was provided in a 52 week rolling programme, which ensured that all young people during their stay access the key elements of health education. The heads of education reviewed the programme regularly and healthcare to ensure that the teaching material was suitable to meet the needs and understanding of the young people for whom it was intended. Arrangements are in place for young people with health problems to have access to education, training programmes and, dependent on their clinical circumstances, the wider activities of the Centre
- 10.8** The management of suicide and self-harm was a priority for the healthcare team who routinely attended the regular multidisciplinary reviews of young people identified as particularly vulnerable.
- 10.9** The Healthcare Departments Mental Health Service led by a link nurse supported by a mental health nurse, had established effective working arrangements with the visiting psychiatrist and clinical psychologist who supervised the centre psychology staff. An increase was reported in the number of young people admitted to the Centre with mental health problems that were manifested as difficult and challenging behaviour. There had been a decrease in the incidence of self-harm and a reduction in the number of SASH watches and FOCUS, a lower degree of supervision, activated in comparison to the previous year. The establishment of a skilled, responsive mental health service was seen as a positive contributory factor in reducing the number of suicide and self-harming incidents.
- 10.10** Monthly statistical reports were produced by the healthcare department that contributed to the Centres Quality Protects dataset. Information arising from the attendance of nurses at incidents where PCC restraint techniques we used were also produced as part of the Centres audit process and as required by the Youth Justice Board. These statistics identified the number of incidents of restraint attended, specific details of injuries sustained by young people, and the number requiring treatment. A strategy for the clinical governance of the Healthcare Department was being developed and productive links had been made with the local PCT and healthcare colleagues in the immediate community.
- 10.11** It was evident that the Healthcare Department was an integral part of the Centre providing responsive, high-quality diagnosis, treatment and support

to young people. The development of mental health services had been successful in ensuring that the most vulnerable young people received the help and treatment they required during their stay at the Centre.

Premises, Security and Safety

11

STANDARD 8: PREMISES, SECURITY AND SAFETY

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

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

This standard looks at:

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

STANDARD 8: PREMISES, SECURITY AND SAFETY

STRENGTHS	AREAS FOR DEVELOPMENT
<ul style="list-style-type: none"> • The management of security was systematic, well resourced and effective. • The procedures for searching young people and visitors to the centre were systematic. • Information about the conduct of personal searches was provided to young people on their admission. • The Centres buildings and facilities were maintained to a good standard. • Priority was given to repairing minor damage or equipment failures that could compromise security. • Bedrooms were acceptably designed and adequately maintained. • There were procedures in place to ensure that, within the design limits of the bedrooms, young people were afforded privacy and dignity. • Priority was given to the maintenance of high standards for health and safety at the centre. • Fire alarms, and evacuation procedures were routinely tested across the working day and “out of hours”. • There were established working relationships with local authority and emergency services to support the development of contingency arrangements and emergency evacuation procedures at the Centre. 	<ul style="list-style-type: none"> • The design flaws in the house units were a contributory factor which seriously affected the quality of life for young people. • The quality of the environment on the house units was utilitarian and lacking any real sense of material comfort. • There was scope for the development of a housekeeping function, which would if properly resourced, go some way to addressing the areas in need of improvement. • There should be a short life review of the circumstances and settings in which personal searches are carried out during the course of the daily routine in the Centre. • Priority should be given to seeking an immediate solution to the chronic problem of storage on the house units • Managers should plan to improve access to storage facilities on the site for the long-term. • Managers should consult with young people and staff in developing plans for making better use of the open area in the Centre known as “The Green”.
RECOMMENDATIONS	
<ul style="list-style-type: none"> • The director should give priority to improving storage facilities in the house units and more generally across the centre (11.13) • The director should replace the sofas in the house units with furniture that is safer and less susceptible to damage (11.6) 	

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- 11.1** The buildings and open areas within the secure perimeter were maintained to a good standard. The landscaped grounds were well ordered and clean and the sports facilities were safe and well organised environments. The area immediately outside the secure perimeter was equally well-maintained and subject to routine checks and searches.
- 11.2** There was considerable scope for improving the quality of the environment on house units that were generally uninspiring in terms of their design and decoration. The bedrooms were generally clean and adequate, and the kitchens well equipped. The common areas, in which young people spent a great deal of their free time, were rather cramped, poorly furnished and rather bleak. The institutional ambience was heightened by the number of notices on walls and the pervading smell of cleaning fluid. The development of a housekeeping function with clear responsibility for the quality of the living environment, could go some way in reducing the impact of the poor design, and help create a more homely environment.
- 11.3** It was practice to encourage and assist young people to decorate the walls of the living areas with murals and themes linked to educational projects, or, seasonal celebrations, as at the time of inspection, the preparations for Easter.
- 11.4** These initiatives, said to be popular with young people and staff, were not entirely successful in ameliorating the generally institutional environment of the house units. Staff should consider reducing and organising the paper on the walls in order to define a specific area for the display of achievement certificates and schoolwork.
- 11.5** If the Centre has a strong commitment or tradition of using murals as learning experiences, the involvement of experienced design artists drawn from the local education community may achieve better results and provide young people with a different perspective.
- 11.6** The furniture in the house units, specifically the sofas were not fit for purpose in a secure setting. The sofas were light and of flimsy construction and were reported to be in need of regular repair; the material covering the sofas was secured to the frame using wire staples. Staff had removed the fabric on the base of one sofa because items were said to have been concealed there, however many staples remained in the frame which presented a risk. Managers should look again at the quality of the furniture in the house units and consider introducing stronger, more durable items that afford greater comfort and present fewer risks to young people and staff.
- 11.7** The management of health and safety was a corporate priority for Rebound that informed the organisation of security at the Centre. There was an established programme of awareness training for managers and staff designed to achieve a reliable level of competence across the staff

team. Policies and procedures and safety and security were supported by information displayed on notice boards and by a regular newsletter. All the buildings and common areas within the secure perimeter were subject to a schedule of searches and safety checks.

- 11.8** Managers and staff were aware of their responsibilities and practice was tested, audited and the findings from these processes were reported to a bi-monthly Operations Group Meeting and used to inform and improve practice. A Safety Committee at the Centre reported to a corporate health and safety policy steering group and the lessons learnt across the company were widely circulated.
- 11.9** Security at the point of admission to the Centre was thorough and although generally discreet, ensured that contraband did not routinely breach the secure perimeter. Young people were made aware of the rules governing searches and generally accepted the checks with good grace. As noted earlier, searching practice appeared to have become affected by routine. Staff would benefit from review and reinforcement of what constitutes effective security through personal searches.
- 11.10** Contracts were in place for the maintenance of all personal security systems, including keys, pinpoint alarms, pagers and radios. Electronic perimeter security systems and alternative emergency power supplies were routinely tested and properly maintained.
- 11.11** The Facilities Team at the Centre were a skilled group of tradesmen who ensured that minor repairs and equipment failures, which could compromise security, were dealt with quickly and efficiently.
- 11.12** As noted earlier in the report bedrooms met the standard required, were clean, free from graffiti and damage and reflected the level of reward achieved by the young person resident.
- 11.13** The valuables and restricted items which young people brought to the Centre on their admission were securely stored. The storage facilities on the house units were inadequate. This resulted in clothes, personal effects, TVs, games etc, to be stored in the cramped, and in some instances, in disorganised, untidy space. The lack of storage space in the house units and across the secure site as a whole had led to incidents of poor practice e.g. storing materials in stairwells, creating a safety and security risk. This problem was well known to managers.
- 11.14** There should be action taken to resolve the immediate problems of limited storage on the house units that affect the ability of staff to deliver a quality of service to young people. Managers should as a priority identify a long-term solution to the problems of storage within the secure perimeter.
- 11.15** There was an established schedule for testing all equipment and emergency procedures. The health and safety manager routinely tested fire evacuation procedures across the 24-hour day. These procedures and

the response of staff were audited reported to the monthly operations group meeting. Importantly this information was used to improve practice and reinforce with staff the importance of maintaining a heightened level of awareness in relation to fire safety at the Centre.

- 11.16** There was a schedule of desktop exercises designed to test the responses of managers and staff when faced with unforeseen serious circumstances. Records showed that in the last year these exercises were carried out monthly. Topics covered included escapes, concerted indiscipline, hostage taking, fire, key compromise and death in custody.
- 11.17** There were established working arrangements with local agencies, including the prison and fire services, which contributed to the review and development of the Centre's emergency plans. The partner agencies were active participants in the contingency exercises when tested out in practice.
- 11.18** There were routine thematic audits of security and safety in the Centre, which concentrated on staff compliance, the identification of good practice and areas in need of improvement.
- 11.19** The commendable organisation of this aspect of the Centre's work evidenced the commitment of the senior management team to providing a safe and secure environment for young people in their care.

Standards and Criteria

A

STANDARD 1: PURPOSE AND FUNCTION

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

Criteria

- 1.1** The STC has a written Statement of Purpose 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 young person 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 trainees, staff and visitors, and is routinely monitored. (A.17)
- 1.5** Young people are assessed and treated as individuals. Each trainee and his/her family/carer are 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 are delivered to the specified standards.
- 2.2 The composition of the staff teams should take account of the gender and ethnicity of trainees. (A.4, 0.6, 0.9)
- 2.3 All posts at the STC have written job descriptions, setting out the lines of accountability, responsibilities and authority of the jobholder, and a summary of the personal qualities, competencies and skills required. (SAS 2.5, 0.11)
- 2.4 All applicants for jobs at the STC are vetted and all offers of employment are made subject to satisfying the relevant vetting requirements. No employee is allowed to work with a trainee until full employment vetting has been completed. (0.16)
- 2.5 Certified custody officers are the only staff at the STC who perform custodial duties in relation to trainees. (0.7, Section 9 CJPO 1994)
- 2.6 The staff team corporately possess the skills and knowledge required to meet the goals of the STC and each individual member of staff possesses the necessary qualifications, skills and experience for the work (SAS 2.13)
- 2.7 There is a continuing training and development programme for all staff consistent with the objectives of the STC and the individual members of staff personal development needs. (SAS 2.14, 0.24, 0.25)
- 2.8 Custody officers will receive annual refresher training by accredited instructors in physical restraint and initial and regular refresher training in the use of short duration breathing apparatus. (N5 and L3)
- 2.9 All work groups and individual members of staff have clear objectives and performance measures.

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- 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 would also be subject to a systematic risk assessment that 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 that 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 that 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 that 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)

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

STANDARD 5: EDUCATIONAL AND VOCATIONAL TRAINING

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

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

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

Criteria

- 5.1** The training plan of each trainee will set out his/her educational goals that 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)

STANDARD 7: HEALTH CARE

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

Criteria

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

STANDARD 8: SECURITY AND SAFETY

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

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

Criteria

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

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