

Oakhill Secure Training Centre

Inspection report for Secure Training Centre

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About this inspection

This report has been produced in accordance with Statutory Rules for Secure Training Centre (STC) inspections made under Section 47 of the Criminal Justice and Public Order Act 1994, and in line with section 37(1) of the Crime and Disorder Act 1998 which states that: It shall be the principal aim of the youth justice system to prevent offending by children and young persons.

The purpose of inspection is to provide assurance to the Secretary of State that STCs provide an environment that promotes the safety and welfare of young people and that will help prevent children and young people offending in the future, and in particular that:

- The safeguarding of children and young people is effective.
- Programmes exist to tackle offending behaviour and meet the citizenship and resettlement needs of children and young people.
- The performance of the STC provider meets the quality of service expected in the inspections standards.
- There is a purposeful regime in which children and young people are encouraged to take part.
- There is effective security and control within the STC.
- High standards of social care, health care, education and training are provided for children and young people.
- The individual needs of children and young people are fully assessed and there are plans for meeting them as far as possible.

The key inspection judgements and what they mean

<i>Outstanding (1):</i>	this aspect of the provision is of exceptionally high quality
<i>Good (2):</i>	this aspect of the provision is strong
<i>Satisfactory (3):</i>	this aspect of the provision is sound
<i>Inadequate (4):</i>	this aspect of the provision is not good enough
<i>Not judged:</i>	this aspect of the provision was not judged

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Introduction by Children's Director

Ofsted inspect the four secure training centres in England on behalf of the Youth Justice Board. Inspections are carried out in line with the Every Child Matters outcomes for children and take the secure training centre rules into account. Responsibility for these inspections transferred to Ofsted from the Commission for Social Care Inspection in April 2007.

This inspection of Oakhill Secure Training Centre was carried out in October 2007 as part of the annual inspection programme. The inspection team evaluated welfare and education. The inspection team was joined by colleagues from HMI Prisons who focussed on specific areas of security and safety within the centre. A report of their findings is attached as an appendix to this report.

Oakhill Secure Training Centre opened in 2004 and was the last of four such centres to open. Oakhill has had a very difficult history. Each previous inspection highlighted significant weaknesses in the quality of care and education young people receive.

Inspectors judge that the provision continues to be inadequate. The setting is failing to deliver positive outcomes for young people in care and education. HMI Prisons judged security and safety to be inadequate.

There are signs of improvement in the centre and these are identified in detail in the report, but there is little evidence of the impact of these improvements. The new director has begun to address significant challenges in managing the behaviour of young people in Oakhill. The use of restraint remains unacceptably high.

Staff training is being managed in a more robust way, allowing opportunities for new staff to understand their role. Staff retention continues to be a major problem for the centre. A high level of staff turnover does not enable stable, positive relationships to be developed with young people, who need considerable support to manage offending behaviour and develop appropriate personal skills. .

The quality of education is inadequate. Inspectors were concerned about the ability of staff to provide good quality education to meet the needs of these young people. The centre does, however, provide good opportunities for young people to access education and training on release. The education provision requires radical improvement that can be sustained.

The developments at Oakhill are too new to enable inspectors to evaluate whether they are long-term and likely to contribute to better outcomes for young people. Inspectors have commented that there is capacity for change and it must be hoped that this can be sustained as the current situation cannot continue.

Michael Hart

Service Information

Brief description of the service

1. Oakhill Secure Training Centre (STC) is managed by Group 4 Securicor (G4S), which is a private company, responsible for other services, including adult prisons. Oakhill STC contracts with the Youth Justice Board to provide accommodation for children and young people serving sentences or remanded to a secure setting.
2. Oakhill is situated in Milton Keynes and is therefore in easy reach of the greater London areas. It is a purpose built secure establishment and is designed to accommodate up to 80 young people.

The Youth Justice Board has decided for the time being this STC will have the available places held at 56 until further notice.

At the time of the inspection 48 young people were placed at the centre

Summary

The overall quality rating is inadequate.

This is an overview of what the inspectors found during the inspection.

3. This was an announced inspection carried out by Ofsted inspectors at the invitation of the Youth Justice Board (YJB).
4. The last full inspection took place in June 2006 and two unannounced inspections were carried out in January and April 2007. The purpose of both unannounced inspections was to review progress in relation to the recommendations made in the report of the June 2006 inspection. The unannounced inspection reports are attached as an appendix to this report.
5. Four inspectors from the secure estates team and two Her Majesty's Inspectors (HMI) from the Education, Learning and Skills Directorate conducted the inspection. The HMI reviewed the education facilities against agreed standards and their findings and recommendations are included in this report.
6. Three Her Majesty's Inspectors for Prisons (HMIP) also inspected for three days, reviewing standards relating to security and control as set out in 'Expectations for juvenile Young Offender Institutes'. They have reported separately and their findings are attached as an appendix to this report.
7. All the standards established for secure training centres have been examined during this visit and these include areas related to health, catering, staying

safe, education and vocational training, enrichment, assessment, planning and review, resettlement, and management and organisational matters.

8. The STC has been operational since August 2004. During the three years since then there have been three permanent directors and an acting director who was in an acting capacity on two different occasions. The current director took up his post on 9 July 2007 and had therefore been responsible for the centre for three months at the time of the inspection.
9. The centre has been the subject of critical reports by inspectors during the past three years. In each case, the overall judgement has been that the provision made by the centre is inadequate.
10. G4S and the director were asked to provide the YJB with a 'recovery plan' on 13 July 2007. A recovery plan was produced and the centre has been reporting progress against the targets on a weekly basis to the YJB. Progress has also been reviewed through regular YJB performance monitoring and auditing visits.
11. The recovery plan includes some areas for improvement that will inevitably take some time to address.
12. The current director of the STC has set out a vision for the development of the centre which is underpinned by child centred values and principles. He has recruited a number of staff to senior posts who have considerable experience within children's secure settings. They have been appointed to provide direction and clinical supervision to operational managers and staff.
13. It is clear that staff are expected to set the boundaries for acceptable behaviour from young people and establish routines that are consistently applied by all adults involved in the work of the centre. The recent changes have set the foundations for this to be achieved. The current strategies are having an effect but progress is slow and there remains an unacceptable level of restraint.
14. The director acknowledges that to bring about change without chaos there needs to be an incremental process of improvement and development, reinforced by identified success and positive outcomes for young people. The findings relating to the education provision, which is described as failing a number of young people, are of particular concern.
15. This inspection found that there are some early signs of improvement in significant areas. However, there is considerable work still to be done for this centre to provide an acceptable service for young people.
16. A number of staff were more optimistic about the future and confirmed they are now encouraged to be more involved in developments. However, the

optimism and early improvements in staff morale are dependent upon continuing developments at the centre.

17. Some training has been provided for staff already working at the centre. This has helped to clarify some of the expectations of their role, such as use of single separation and de-escalation techniques. However, staff are not yet being provided with opportunities for regular ongoing training and development. There is a commendable package of training available to be delivered to staff across the centre, but difficulties with staffing have meant this training programme has not yet been implemented. This investment in staff training is a new development in Oakhill, as training has not been a high priority previously.
18. The recruitment and retention of staff has been very problematic. Insufficient attention has been paid to testing the attitudes of potential candidates and their resilience in performing their duties in what can at times be a difficult working environment.
19. Some of the difficulties young people and staff face at the centre are the result of building design problems. For example, the living areas have insufficient floor space for the numbers of young people and staff. Some initial steps have been taken to consider how some of the building deficits can be addressed.
20. Managers are aware that there is considerable work still to be done in a wide range of aspects of the centre's work. The plans they have for further improvements will cover the majority of areas for development in this report. They are also aware of the importance of ensuring consolidation of practices.
21. There is little in this report that the current director and his team have not already identified as areas for development.

These include:

- an education service that is described as failing a number of young people; some young people being failed because of inadequate practices in relation to assessment, planning and review;
- levels of restraint being used to control young people in the centre are still unacceptably high;
- inadequate crime avoidance programmes;
- underdeveloped practices in relation to the 'resettlement' of young people upon discharge from the centre;
- recruitment and selection practices that do not conform with Warner recommendations;
- the role of first line managers needing to be strengthened;
- continuing issues with the quality of communication across the site, particularly in relation to 'handover' periods;
- staff not able to attend training;

- the deployment of staff that does not appear to be linked to assessed risk on individual living units;
- further work needing to be done to ensure the bullying procedures are cross referenced with child protection procedures;
- continuing dissatisfaction among young people regarding preparation of meals at the centre;
- a performance management information system that is not yet providing managers with the details required to inform practice and development;
- living areas that are inadequate for the number of young people and staff;
- bedrooms that are not safe and that create problems for young people and staff in relation to privacy;
- a CCTV system that does not provide appropriate evidence for thorough investigation into child protection allegations;
- and inadequate arrangements in place for young people to make telephone calls in private.

What has been improved since the last inspection

22. The director and his senior management team have demonstrated a desire to create a learning organisation that is reflective and developing. It is evident that time is needed to embed all of the improvements highlighted in this report and the developments still to come to fruition. The focus for improvement is based on solid child centred values and principles.
23. Capacity to improve was described as uncertain in April 2007. If improvements continue and the senior management team are supported in their task, capacity for improvement is now promising.

The inspection team found:

- a strengthened senior management team that is confidently and systematically addressing the many areas of improvement required;
- a commitment to providing a child centred service;
- improved staff morale, although there is some anxiety about developments being maintained;
- a centre that is more safely contained than was found during previous inspections;
- efforts to ensure an inclusive process for involving staff from all departments in the developments across the centre;
- a recently established multi-disciplinary youth offending service (YOS) team;
- improved definition of roles and responsibilities;
- a significant investment in a training needs analysis;
- a considerably improved Initial Training Course for new care staff, which is being evaluated;

- a range of initiatives to establish positive behaviour management strategies;
- a well established advocacy service that is known and understood by staff and young people;
- an improved activities programme available to young people;
- a meaningful focus on consultation and participation with young people;
- improvement in the management of communal meals in the dining room;
- and continuing positive integration of the healthcare service into the work of the centre.

24. The young people are benefiting from these early developments, which place them and their welfare at the centre at the heart of everyone's thinking and planning.

The effectiveness of the service

Helping children to be healthy

The provision is satisfactory.

25. Consultation with young people regarding aspects of their care and the food provided is ongoing. They can air their views regarding the menu and have some influence over menu planning. Young people are provided with nutritious meals, in the main using fresh ingredients, although the food provided is not always to their taste. Young people have a choice for each meal, although alternative choices, particularly for vegetarians, are repetitive. The menu is planned on a four week cycle with each unit having an opportunity, once a week, to have a hot meal in the dining area at lunch times. This is rotated from a short list of meals reflecting different cultures for example, pizza and burritos. The menu planning generally does not reflect sufficiently the many and varied cultural backgrounds of the young people in the centre. Therefore, there is limited opportunity for young people to try a variety of food from different countries.
26. A second helping is provided after a meal only for those young people eating during the second sitting. Young people generally accept this, but stated they would on occasions like to have seconds if they are in the first sitting, especially second helpings of their favourite puddings. Special medical diets are known and catered for. The quality and quantity of fresh fruit and vegetables available are good.
27. The kitchen has a five star food hygiene rated certificate from the local environmental health division of Milton Keynes council. However, the young people do not have trust in the food preparation arrangements in the kitchen and have used the complaint system, representatives on consultation groups and survey responses to raise concerns. For example, they have complained about hair in the food on more than one occasion.
28. Cool drinking water is not available throughout the centre. Young people have been provided with water bottles, but they do not like the taste of the tap water and many of them fill the bottles with squash to disguise the taste.
29. Dining arrangements in the individual units are insufficient for all staff and young people to sit together to enable an all inclusive social occasion. Lunch time on the units is not always a social occasion. The tables are not set with condiments, cutlery or table covers. Young people help themselves to the food brought to the unit from plastic containers. The contents of the baguettes in some instances were falling out, with little thought to presentation evident. Young people have to wait in turn to gain access to the kitchen to get their food, as there is limited space, resulting in everyone sitting and eating at different times. Presentation of meals in the units does not reflect normal

family meal times and opportunity is lost for young people to discuss their morning with staff in a relaxed atmosphere.

30. Light snacks are prepared in the medical centre for young people if their arrival is outside of normal mealtimes, for example, late in the evening after the admission process is complete.
31. Young people speak, with pride, of their achievements in a recent cooking competition they were involved in when they had to cook one course of a three course meal. Young people do not have regular planned opportunities to cook on the units, but only as part of an activity. There are limited opportunities for them to plan and learn how to prepare meals.
32. The centre has a well managed and efficient healthcare department which is further integrated into the care practice at the centre. Suitably trained and qualified medical and nursing staff, including on-call facilities for 24 hours a day are available.
33. An assessment of need is undertaken on all young people on arrival, for risk and vulnerability, as part of the reception process.
34. All young people stay in the health centre for their first night. The nurses are available throughout the night with a dedicated member of the care staff team to help assist the young person in what can be a very anxious time for them. Young people spoken with were complimentary of the manner in which staff managed the admission process and the nursing staff deal sensitively with the concerns of young people during the admission process.
35. The GP sees all young people within 24 hours of admission. Ongoing monitoring of those young people identified as at risk of suicide and self harm is undertaken daily by a multi disciplinary team which includes members of the medical team. Staff take account of the particular issues in the life of the young people at that time. A strategy to manage each individual's case is agreed, written up and taken to the care staff to implement.
36. The quality monitoring process in the health centre is robust. The local Primary Care Trust (PCT) pharmacist visits each week and monitors practice, looks at the individual files and requests medication reviews when needed. External health care professionals are complimentary about staff in the health centre. Senior staff take appropriate action when expected practice and guidance is not followed.
37. Satisfactory strategies are in place to monitor and offer appropriate support to young people identified as being at risk of suicide or self-harm (SASH). This is followed by a more in depth assessment, including an assessment of mental health needs as well as an assessment for substance abuse. Where withdrawal treatment is needed, the young person is referred to a doctor.

38. All young people are given the name of their link nurse and the name of their specialist nurse during the initial assessment meeting, along with an information leaflet on medical service at the centre and this is to be commended.
39. Staff are aware of the SASH policies. There is on-site Child and Adolescent Mental Health Service (CAMHS) support. This is provided via the PCT with some new appointments to key posts recently made, and one vacancy yet to be filled. The centre has contracted services with a range of medical practitioners including a General Practitioner, a dentist, podiatrist, consultant psychiatrist, forensic and consultant psychologists and specialist mental health nurses.
40. A positive working relationship between therapists and nursing staff exists. The mental health specialists provide consultation for staff as necessary to assist them in their work with and care of the young people.
41. There is a commendable system in place to assess the risk to the young people for self-administering of 'in possession medication'. However, the risk assessment tool on the individual's file does not identify which medication this relates to nor does it take into account any risk posed to or by other young people in the unit.
42. Medication administration, storage and recording systems at the centre are robust. However, the controlled drugs administration recording system in place does not comply with best practice guidance. Milton Keynes PCT recognises the difficulties of working a two signature system at Oakhill. A risk assessment has been carried out and policy and guidance has been developed for staff to work with. Adequate arrangements are made for the storage, recording and administration of medication to meet the needs of young people.
43. Medication administration rounds are conducted in a manner that maintains privacy and confidentiality for the young people. Infection control measures are in place. However, due to inappropriate use by young people, the alcohol based gel for infection control is not currently used. There has been a recent health and hygiene report and infection prevention and control audit undertaken. This highlighted areas for Oakhill and the health centre to address.
44. Young people's health needs are met and their welfare is safeguarded by the centre's policies and procedures for assessing health care needs. The health care plan for young people is in two parts. The initial critical health information obtained at admission is placed on the unit files. Young people have given their permission for this to be shared. Part two is the assessment and health care plan, which is held in the medical centre files and is signed and agreed by young people. Although the quality of health care assessments has improved, there are insufficient details on young people's case files to

enable more understanding of young people's needs and provide more effective interventions for young people by the whole staff team working together.

45. Nursing staff have electronic access to a medicines compendium and patients' leaflets for 'stock' medication. This information is not presently offered or provided to young people or staff on the units to enhance their understanding of the medicines being taken and the potential side effects.
46. All care staff are first-aid trained along with two nursing staff, with more training planned for the nursing staff. Young people receive immediate attention by a qualified first-aider.
47. Reporting of injuries to staff is made as required under Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR). This promotes staff and therefore children's wellbeing. Nursing staff attend incidents of restraint if at all possible. They see all young people as soon as possible after a restraint and maintain records of any injuries.

Protecting children from harm or neglect and helping them stay safe

The provision is satisfactory.

48. Security measures at the centre are robust and appropriate. There are experienced duty operational managers on duty at all times to ensure that procedures to move young people around the centre safely are followed and applied routinely. Security checks are carried out several times each day to ensure the premises remain secure. All staff are trained in security during their initial training course.
49. The centre has clear emergency and contingency plans in place to address any significant incidents. Managers complete desk top exercises routinely to ensure that appropriate staff are familiar with the plans and procedures to be followed. A recent bomb scare required the managers to implement agreed emergency procedures. Police were called but did not arrive until about one and a half hours later. Whilst this is unsatisfactory to ensure that young people are safe in the event of an emergency, this cannot be attributed to the centre's procedures but rather to the slow police response.
50. The centre has clear procedures in the event of a fire, agreed with the local fire brigade. Fire officers attend the centre at regular intervals, but a fire engine has not attended the centre as part of a rehearsed fire drill in the last two years. The frequency of the fire evacuation drills for the site is insufficient given the turnover of staff and young people at the centre. Night staff have not had recent opportunities to test the procedures during night time periods.

51. Staff routinely promote and respect the privacy and dignity of the young people. However, the design of the observation hatches to young people's bedroom doors allow the shower area in the room to be viewed from outside. Young people report that sometimes staff will knock and then walk in without invitation whilst they are in the shower. Similarly, living arrangements in the unit lounges fail to protect the privacy of young people. There are no curtains to the lounge windows and people in the grounds can look into the units.
52. Young people are not routinely inappropriately locked in their rooms. Time spent in bedrooms is carefully monitored and reported to the monitor from the Youth Justice Board (YJB).
53. The form of restraint approved by the YJB for use in STCs is 'physical control in care' (PCC). All staff are trained in the appropriate use of PCC during their initial induction training prior to being allowed to work with the young people.
54. Staff at the centre are expected to use good professional and interpersonal skills and de-escalation techniques to address challenging behaviour and maintain good order and discipline. During the inspection, inspectors witnessed use of these skills and techniques on a number of occasions. However, there is little evidence of these skills and techniques being used in the recording of PCC incidents.
55. Statistical data provided by the centre indicates that the use of PCC has fallen each month since reaching its highest point for 12 months in June 2007. Despite this, results from a survey carried out in September 2007 with young people from the centre by the advocacy service 'Voice' suggest that they felt staff often fail to de-escalate threatening situations properly and then use PCC 'straight away'.
56. Quality assurance procedures monitor the use of PCC across the centre and the findings are shared with the YJB and managers.
57. PCC training given to staff now includes a greater emphasis on de-escalation. Residential service managers are monitoring the use of PCC and single separation on the units. They promote the use of positive professional relationships and individual work with young people as alternatives.
58. Staff have recently received clarification and further training in the use of single separation. This is reflected in training and monitoring records. These show that some of the team recently attended a training day to address behaviour management, and more are planned to take place.
59. However, some staff remain uncertain about the meaning of single separation of young people. For example, some staff mistakenly regarded a recent planned initiative to place a vulnerable child on their own with staff in a separate unit from other children as single separation. The young person lived

apart from their peers for much of each day, but was allowed controlled recreational and educational association. This is not single separation.

60. This practice referred to as 'independent living', effectively removes young people from living with their peers. However, the practice is not clearly defined, controlled and monitored to ensure that it does not constitute inappropriate removal of a young person from association with other young people.
61. The use of single separation has increased each month since May this year, and is now at its highest level since February. The director says that this is because recording has improved, and staff are being told to record every occasion when young people are told to go to their rooms, even if staff are with them. Behaviour management records support this view and reveal that single separation is being more consistently monitored, and more detailed records kept. Young people are consistently monitored when in their bedrooms.
62. The centre has an incentive bonus scheme as part of its behaviour management strategy. Young people are not satisfied that the rewards and sanctions scheme is fair, nor that it rewards and encourages positive behaviour appropriately. They cite examples of young people being rewarded without making progress, and insufficient reward for young people on the higher platinum level. They also object strongly to losing all their privileges and being placed on a bronze level sometimes for up to 72 hours as a single sanction if they behave badly. This is seen as a multiple punishment for a single misdemeanour.
63. This view is shared by managers and some staff, and a review of the reward and sanction system used across the centre is scheduled to take place. Commendably, young people are being consulted and their views obtained as part of this review. This expectation is included in the operational policy standard and procedures 'Rewards and sanctions guidance' produced by the centre in August 2007.
64. Workers from a Barnardo's project are working alongside staff from the centre to meet with young people in groups and individually and learn their views about the care they receive and changes they would like. Several meetings have taken place already. The project is currently working with young people at the centre to produce a 'children's charter'.
65. A revised complaints procedure is in use. All the recommendations made during previous inspections are addressed. Young people are now able to make a complaint without the need to involve staff members. A new more user friendly complaints form is being used which allows a young person to comment on the complaint investigation and outcome, and state whether they are satisfied or not. The complaints procedures are linked to the centre's

safeguarding procedures. Complaints records are cross referenced with any resulting child protection files to enable an easier audit trail.

66. Staff involved in handling complaints are receiving specialist training to assist them in their role. Data related to the complaints is collated and recorded and used by the directors to review the effectiveness of the complaints procedures and centre practice.
67. The centre's safeguarding procedures have recently been rewritten and reviewed by the local safeguarding board. The centre now has a nominated manager to lead on safeguarding issues who links directly with the local social care team in the community.
68. A manager from the community social care team liaises routinely with the centre on safeguarding issues. She reports that child protection procedures at the centre are improving, although the community team have not yet received any referrals related to peer group bullying. There is an agreement in place between the local safeguarding team and Oakhill as to how these issues will be managed. The draft protocol between Oakhill and the safeguarding team includes management of bullying.
69. The centre has a newly introduced anti bullying policy. Whilst this does not include specific reference or guidance to appropriate referrals of serious bullying to the local safeguarding team as a child protection issue, the centre management team recognise this.
70. The centre hosts a 'safeguarding children' panel meeting at regular intervals to review safeguarding issues. This includes child protection social workers, police, health care staff, staff from Oakhill and an advocacy manager from 'Voice', who advocates for young people at the centre. However, there is no existing mechanism as yet for external professionals working alongside staff at the centre to see and review closed circuit television (CCTV) footage of PCC incidents to evaluate the use of PCC and advise managers accordingly.
71. Child protection referrals are investigated appropriately. There is appropriate notification and cooperation with other agencies. However, several child protection investigation files inspected state that the CCTV footage of the incidents was inconclusive due to the time frame between the pictures obtained. The system is contract compliant, but does not afford conclusive detailed evidence to satisfy investigators of the actions taken by staff.
72. New procedures have been introduced earlier this year for managing the risk of suicide or self harm (SASH) amongst vulnerable young people. A social worker from the youth offending service (YOS) team is involved and carries out a vulnerability assessment during any admission of young people to the centre. The new SASH procedures include the introduction of a revised SASH book to monitor and guide the strategies used by staff to address the risks. Any member of staff at the centre involved with the young person can open a

SASH book if they have concerns that a young person is placing themselves at risk. Young people presenting current SASH risks are discussed every day at the daily review meeting. Daily review of young people presenting SASH risks ensures that their care is constantly monitored, reviewed and changed if circumstances require.

73. There is a monthly meeting that takes place to review all practice developments to incidents of SASH, behaviour management, anti-bullying and the management of complex cases. This included the use of restraints, single separations and sanctions. This is an internal multi-disciplinary meeting referred to as the Quality in Practice Group which is chaired by the director.
74. There are well established advocacy systems in place. Advocates visit each of the units each week to see the young people. The advocates describe good relationships with managers and staff, with no restrictions placed upon them when talking to young people. The regional manager of the advocacy service contracted to work at the centre felt the situation in Oakhill is improving.
75. The centre has a first response team of staff who respond to alarm calls from staff across the centre. Managers are reviewing the use of the first response team. They describe the role of this team as to take care of the young people at the scene whilst duty staff address the incident. Current first responses may include a large group of staff attending an incident.
76. There is clear evidence that they do not always get involved with the young person presenting challenging behaviour, and allow some serious incidents to be de-escalated without the need for restraint. However, some young people and managers express concern that a large number of staff arriving at the scene when young people may be angry or frightened may escalate rather than de-escalate a situation.
77. Young people refusing school are not always being given appropriate work to do on the residential units, and may spend long periods of time bored and inactive. This is not supporting their education and may result in their misbehaving and getting into trouble.
78. Batteries in the radios carried by staff on duty are unreliable. This can result in duty staff losing radio contact with the control room, which places them and young people at risk in the event of an incident.
79. Staff are not always deployed on the residential units in sufficient numbers to address the potential risks and challenges presented by young people. There are occasions when staff are working alone for long periods with four or more young people whilst colleagues are deployed on other duties. This can place both them and young people at risk. Risk assessments have not been carried out to address staffing levels on each residential unit for each shift.

80. The centre has clear procedures to advise staff how to manage the searching of young people, staff and visitors to the centre. These procedures allow for the use of force to strip search young people who do not consent to this form of search. The centre's search policy says staff need first to have considered alternative means to strip searching, and deemed them to be inappropriate, or they have failed, before the use of force may be considered. The staff must have reasonable cause to suspect that a forbidden item or substance is concealed on the young person, and the item presents a risk of harm to them or others and obtained authorisation to use force from the director or duty director.

81. The procedure does not identify what evidence would be appropriate to give a member of staff reason to believe that an item or substance is concealed on the young person that would present a risk of harm to them or others. It is clear that force will not be sanctioned where no evidence of immediate risk is apparent.

Helping children achieve well and enjoy what they do

Education

The provision is inadequate.

82. Although Oakhill is managed by Group 4 Securicor (G4S), the education service, which includes a major contribution to the enrichment programme, is subcontracted to CfBT Education Trust (CfBT). In July 2007, a recovery plan was put in place by the Youth Justice Board following the appointment of the new director and the imposition of a cap on the number of young people the centre could accommodate. Full-time education is currently provided for up to 56 young people between the ages of 14 and 17 and the average length of stay is 2.6 months. At the time of the inspection, there were 48 young people, of whom 26 were young women: 8 young people were on secure remand, 36 were completing Detention and Training Orders (DTO) and 4 were serving longer sentences. Approximately one third of young people were of black and minority ethnic heritage. All the young people were vulnerable with histories of behavioural problems and few had positive experiences of education. In most cases, levels of literacy and numeracy were lower than chronological ages.

Part A: Summary

Main findings of the education inspection

83. Overall effectiveness

Oakhill provides an inadequate standard of education and training which does not meet the needs of the young people. Insufficient progress has been made in tackling areas for improvement identified at the time of the last inspection and the majority of weaknesses remain. In addition, while standards and achievement have been maintained at a satisfactory level and aspects of support and guidance are good, many fundamental elements of the provision, including the quality of teaching, the suitability and breadth of the curriculum, and the effectiveness of behaviour management have deteriorated. Leadership and management, which were satisfactory at time of the last inspection, are now inadequate. Following very recent changes in strategic management positions across the entire STC, there is now a revitalised commitment between CfBT and G4S to work in partnership to bring about much needed improvement in all areas of provision. An acting head teacher was appointed for three months until the arrival of the new head teacher in January 2008. Education is benefiting from additional support from specialist external advisors. However much more work remains to be done to build capacity and staff confidence. At present, the capacity for further improvement is weak.

84. Strengths

There are some strengths:

- most young people gain appropriate accreditation in a number of subject areas;
- almost all young people make a successful transition into education, training or employment when they return to the community;
- young people with special education needs and those on individual education programmes receive good support;
- young people enjoy the developing range of enrichment activities and centre-wide events.

85. Areas for development

A number of areas for development have been identified:

- agree a clear strategic plan for education and provide stable, strong and effective leadership and management which focus on raising standards and improving outcomes for all young people;
- take effective and sustained action to address the recommendations of the last inspection;
- continue to build the partnership, mutual respect and collaboration between education and residential services;

- provide support and training to teachers to ensure that all lessons are of a consistently high standard;
- provide a relevant, stimulating and high quality curriculum which meets the needs of all young people, has clear progression routes and offers an appropriate range of vocational programmes;
- involve young people actively in setting targets for learning and in reviewing their progress on a regular basis;
- ensure that all management information systems are fit for purpose and that data on progress and achievement are used to inform service development.

86. Education Inspection Grades:

Overall effectiveness	4
Capacity to improve	4
Achievements and standards	3
The quality of teaching and training	3
Leadership and management	4

Part B: The contribution by education to Every Child Matters outcomes

87. Education at Oakhill makes a satisfactory contribution in a few areas of the Every Child Matters agenda. A number of positive initiatives and programmes are in place; however the ethos of Every Child Matters is not embedded in day-to-day work and does not underpin the rationale and delivery of the curriculum. A good range of sport, exercise and fitness activities helps to promote physical health and self-esteem. Young people learn about healthy life-styles, diet and nutrition in popular food technology lessons and after-school cookery clubs. Young people are supported well in their transition into education, training and employment, but more could be done to prepare them for independent living and to support their future economic wellbeing. Participation in the enrichment programme, centre-wide events and consultation groups enables young people to make a positive contribution to life at Oakhill.

Part C: Commentary on the key questions

Key Question 1: how well do learners achieve?

88. Achievement and standards are satisfactory. On average, each young person gains 6.5 units of accreditation per month and this reflects the position at the time of the last inspection. Accreditation is primarily through the Assessment and Qualifications Alliance scheme offered in the majority of subjects. Young people also achieve the Award Scheme Development and Accreditation Network award and undertake elements of the Duke of Edinburgh's award. Two young people are following a BTEC in public services and a number have been supported well as GCSE candidates: 43 passes were gained in 2006/07.
89. Young people with special educational needs (SEN) are helped effectively to improve their literacy and numeracy skills. Young people displaying challenging behaviour receive individualised education programmes which provide a carefully tailored mix of activities. More able young people are selected to join the Independent Study Group where they progress at a rate and level more closely suited to their ability and prior attainment.
90. Attendance, at 97% over the previous year, is good overall. However during the inspection and the preceding few weeks, attendance was low. A significant number of young people refused to attend education and others were sent back to the residential units, primarily for poor behaviour. Education packs are provided for these young people, but the quality of the material is variable and often matched poorly to their needs.
91. Progress made during lessons is variable. Some young people make good progress from a low starting point. However, data on progress are incomplete and no clear overview is available. With the exception of those who receive targeted support, progress is not discussed or recorded on a subject specific basis. Although all young people have an individual learning plan, they are reviewed infrequently and do not inform teaching plans beyond the initial assessment. New systems to review and monitor progress have been developed very recently, but only implemented for those young people with special educational needs or those receiving targeted support. Weekly tutorials are not used consistently or systematically to monitor achievement and update targets. The database for recording progress towards and achievement of examinations, awards and accreditations is not fit for purpose. A software upgrade has been purchased but implementation is not yet complete.
92. Young people receive good support from the new youth offending service and from local Connexions personal advisors to achieve successful transitions during the community phase of their Detention and Training Orders. In 2006/07, the vast majority progressed to education, training or employment during their period on licence.

Key Question 2: how effective are teaching, training and learning?

93. Teaching and learning are satisfactory overall. However, the quality of teaching is inconsistent and ranges from good to inadequate. In a few cases, young people respond positively despite weak teaching. The best lessons are carefully planned to meet the diverse needs and provide a stimulating mix of activities. The most effective teachers are enthusiastic about their subjects, have high expectations of young people and give praise readily. Young people's behaviour in these lessons is almost always good. In a fitness session, the teacher made helpful links between theory and practical activity. Young people learned about the respiratory system whilst testing their fitness levels and lung capacity. Young people with additional learning needs and those with English as a second language make generally good progress in one-to-one sessions.
94. In most lessons, teachers provided satisfactory support and coaching alongside young people who worked on their own. Opportunities for group discussion and whole class teaching were under-used and too many lessons lacked stimulation and pace. Young people have few opportunities to develop their speaking and listening skills. Unsatisfactory lessons were characterised by dull teaching and mundane tasks set without reference to young people's interests, needs or learning styles. When young people lost focus, teachers did not always have the skills, strategies and confidence to challenge or re-engage them.
95. The role of residential care staff is underdeveloped and this contributes to weak behaviour management in some lessons. In the best examples, care staff worked in partnership with teachers to support learning and to promote good behaviour. More typically, care staff did not get involved and occasionally undermined the lesson by distracting young people from their work or colluding with low level disruption or dissent.
96. With a few notable exceptions, lesson planning and evaluation are weak. Some lessons bore little resemblance to what was planned on paper. Lesson objectives are not always well conceived, clearly stated or shared with the young people. Few lessons ended with a useful summary of key learning points or a meaningful review of behaviour and progress linked to the rewards and sanctions scheme.

Key Question 3: how well do programmes and activities meet the national targets and needs and interests of learners?

97. The range and quality of the curriculum are inadequate. Curriculum leadership is weak and there are long-standing vacancies in two of the four curriculum coordinator posts. A long overdue review of the curriculum has only recently begun. Although the number of hours and core subjects meet national requirements and reflect largely the national curriculum, the quality of provision is variable and some is poor. There is no strategic approach to the

development of key skills or the use of ICT across the curriculum. The preparation for work programme is constructed poorly and the crime avoidance course, delivered in partnership with G4S, is disorganised and disconnected from other relevant strands of the curriculum such as personal, social and health education.

98. A number of new and popular vocational programmes have been introduced over the last year. However, further developments are constrained by limitations in the accommodation and facilities. The needs of older young people, and in particular young women, are not well catered for. For example, there are no vocational programmes in care or health. Education for general health and safety is satisfactory. Provision for young people with special educational needs has improved and is now good.
99. The organisation of the timetable, with mostly single sex, and mixed ability and age groups continues to present significant challenges in meeting the wide range and often complex needs of young people in a creative and flexible way. A recent short pilot project, which organised teaching groups by ability, was well received by staff and young people alike and showed early signs of a positive impact on teaching, learning and behaviour. However, this arrangement created difficulties for timely and coordinated movement around the STC which have not been resolved. Current groupings do little to prepare young people for the different environments they will experience when they leave.
100. Opportunities for enrichment have recently improved. Young people have access to a satisfactory range of enjoyable activities and clubs after school and at weekends. They value highly the opportunity to take part in special events, such as a recent fashion show and an art exhibition which celebrated their work in the local community.

Key Question 4: how well are learners guided and supported?

101. The quality of guidance and support is satisfactory overall with some good features. The new induction programme is well constructed, but not yet fully operational following a period of review. Initial assessments are completed judiciously by the special education needs coordinator and individual learning plans are developed.
102. Young people requiring additional learning support are involved in setting targets at an early stage. However, this is not the case for the majority of young people. Most young people complete a preferred learning styles inventory, but this does not inform teaching plans. The absence of a qualified educational psychologist has halted diagnostic testing and currently there are no dyslexia assessments. The day-to-day tracking of young people's progress is weak.

103. Behaviour management across education is inconsistent and in some cases ineffective. Boundaries for what is acceptable or appropriate behaviour are unclear. In some lessons, for example, young people were allowed to sprawl along bench tops to complete their work, wander around the room, display constant disruptive behaviour and use offensive language which went unchallenged. Elsewhere, strict rules were applied and adhered to and mutual respect and tolerance observed. Clear boundaries are established effectively in more practical sessions, such as art and cookery, where young people use equipment, such as sharp knives and scissors, safely.
104. The acting head, or another representative of education, contributed regularly to training planning meetings and other reviews in close liaison with the new youth offending service. Links with the local Connexions partnership are also effective and support for transition is good. Young people have access to good individual guidance and support services two days a week. The careers information in the library is outdated, insufficient and used rarely.

Key Question 5: how effective are leadership and management in raising achievement and supporting all learners?

105. Leadership and management are inadequate. Insufficient progress had been made since the last inspection and key aspects of provision have deteriorated. Although achievement and standards have remained satisfactory, the curriculum now fails to meet the needs of many young people. The variation in the quality of teaching and the inconsistent approach to behaviour management impact adversely on young people's day-to-day experience of education and their motivation to attend, participate and achieve. Quality assurance is weak. Self assessment and lesson observations are in place, but not well embedded.
106. Long standing vacancies and turnover of key personnel within the education management team have resulted in a lack of continuity, capacity and momentum to bring about change. This is compounded by an over-reliance on agency staff. Despite the good efforts of the acting head teacher, the morale and confidence of many staff are low. Supervision and support for teachers are inadequate. Recent training and individual coaching, for example in behaviour management, are long overdue and a welcome development, but it is too early to discern any impact. Training for education and residential staff in areas of joint interest, such as the implementation of the new rewards and sanctions policy, are not sufficiently well coordinated.
107. Accommodation is adequate overall with some specific improvements since the last inspection. Where rooms have been redecorated and refurbished, they provide a welcoming and appropriate learning environment for young people. The inclusion room is used effectively. The range of PE and outdoor activity areas is good. The library, managed by G4S, is shabby and under-used. Other classrooms are bleak and poorly furnished and some are not fully

accessible. Access to relevant and topical resource materials and equipment is insufficient. At the time of the inspection, the food technology room was dirty, despite teachers' requests for more cleaning time. Accommodation for vocational activities is limited. There are a few high quality displays of young people's work and achievement.

108. Senior managers across the STC have a realistic understanding of the significant challenges that lie ahead. With recent changes in Oakhill's strategic management team, there is now a strong commitment to rebuild the partnership between CfBT and G4S and to bring about much needed improvement in both the education and residential services. Collaboration, communication and mutual respect are improving, but from a low base. The establishment of a dedicated security team, who manage movement to, from and within education, has brought stability and consistency. A number of external education consultants are providing specialist advice and expertise to support the education management team until the arrival of the new head teacher. A clear and appropriate action plan is in place for the interim period. Taken together, these actions represent a positive and pragmatic response to the current challenging situation. However, there is much still to do and, at present, the capacity for further and sustained improvement is weak.

Welfare

The provision is satisfactory.

109. There is a structure built into the admission procedure which enables the legality of an order allowing a young person to be detained in a secure centre to be confirmed. A young person's initial health and primary care needs are assessed at the point of admission to the centre and a detailed induction process commences. Young people are given an opportunity to make contact with relevant people who may be concerned about them.
110. Young people are given information relating to their responsibilities and rights and privileges whilst at the centre. This is made available in a written guide and a short DVD. Some of the information made available, particularly in regard to the incentive scheme, is inconsistent and misleading for young people.
111. The contact arrangements for young people with families, friends and external agencies work effectively and are well structured. For instance young people received visits from family members and legal representatives during the inspection. Young people are able to write letters which can be posted from the centre.
112. The use of a telephone is available and is only restricted in terms of whom a young person may call in the case of an identified and recorded restriction. Young people say that they can make telephone calls in the evenings and

reported no problems doing so. External helpline numbers are readily available to young people should they be required. Good practice was observed relating to a young person contacting their parents even though this caused particular difficulties.

113. Telephone calls can be made by young people from either a small meeting room adjacent to the lounges on units or a payphone type hood in one of the bedroom corridors. Both of these provisions raise issues of privacy and access. The telephones in the corridors do not provide privacy for a young person making a call.
114. The provision of activities has shown some improvement since the last inspection. A plan of how activities are to run is available. This is in its infancy and requires time for it to develop and be fully operational.
115. An activity coordinator has recently been appointed who works evenings and weekends and is responsible for planning and ensuring the smooth running of activities. Funding has been put in place to enable the purchase of appropriate and sufficient equipment to provide a range of activities.

Some staff and young people have undertaken a fitness instructor course with staff members completing further sessions enabling them to become trainers themselves. A number of staff are also undergoing training to enable them to take groups of young people onto the climbing wall which is now available in the centre.

116. Staff members are well supported to devise plans for the operation of structured clubs for young people if they express an interest. Funding is then made available for them to provide this activity outside of their normal working hours. Whilst the interests and skills of some staff members have been identified, a full audit of staff members abilities has not been carried out to aid the development of the activities programme.
117. A mixture of structured and unstructured activities is now available, with some weekend activities comprising of inter unit challenges and tournaments. Young people say that the activities are 'getting better' and that they are able to make choices. A 'trainee activity committee' has been set up recently to enable young people to have a say in how activities provision is developed.
118. Some links have been built with the local community, with a craft instructor, graffiti art workshop and millennium volunteers all having involvement with the centre. A photography project enabled some young people to attend a workshop in the local community.
119. Activities recently undertaken in the centre include: a fashion type show, when a young person assisted in the organisation; football coaching; dance clubs; jewellery making; guitar clubs and cookery.

120. There are outdoor play areas available, varying in size and providing some all weather turf to enable young people to play ball games and other activities. Young people take up the opportunities to go outside, even if they merely wish to take some fresh air or spend time with other young people.
121. No record is held of those young people who attend activities or clubs. It is impossible for managers to ascertain which young people regularly participate in activities and those that do not. This means that unit managers and case managers cannot easily identify young people who are opting for solitary activities on a regular basis and who may be deliberately avoiding any group undertakings.
122. Some young people opt to stay on the unit during an activity period so that they are able to have some less structured time to themselves. The provision of books, magazines and games on the units is minimal. However, the activities coordinator has begun to set up a DVD library.
123. The occurrences of activities and training with a vocational content are presently minimal. Young people, therefore, do not experience enough practical pursuits to enhance their opportunities for preparation for independence and life skills work.
124. The centre has a comprehensive written equal opportunities policy. However, this is not routinely made available to young people in a format that is accessible to them. A poster is displayed in various locations around the centre which sets out what would be seen as unacceptable behaviour or comments to others.

Helping children make a positive contribution

The provision is inadequate.

125. The recent creation of a Youth Offending Service as a multi-disciplinary case management team is an overdue development. Managers are aware of the importance of a thorough and integrated assessment process for young people and improvements to current practices are being discussed.
126. Young people do not consistently have their individual needs identified and addressed. This includes limited attention being given to addressing the specific targets set out in young people's training or sentence plans. This is the result of a decision by previous managers at the centre and G4S not to have specialist staff managing the assessment, planning, interventions and review processes.
127. Young people and their parents or carers have not been consistently involved in assessment, planning and review. The management of reviews and planning meetings particularly is not currently robust. Young people are not

consistently involved with their Detention and Training Order review meetings, which can be changed and delayed if staff are not available to take them across to the meeting room. Although this has been a relatively rare occurrence, any circumstances when a young person is not provided with an opportunity to attend their review meetings is unacceptable.

128. The daily care review meetings are continuing to improve. They provide a multi-disciplinary approach to monitoring young people and influence planning. The views and advice of staff in the healthcare centre are sought in the daily care review meetings forums.
129. A 'complex case review' meeting has also been established each week, at which young people who are presenting particularly complex or challenging needs or behaviours are discussed. This is also a multi-disciplinary forum involving health and mental health practitioners.
130. There is little evidence of efforts being made by the centre to obtain Looked After Children assessment and planning documents for young people, including those remanded to the centre. The head of the Youth Offending Service says that her staff do chase local Children's Services Authorities for documentation and remind them about the need to hold Looked After Children reviews, but this is not reflected in case files examined.
131. Young people at the centre can have their religious needs addressed should they wish to do so. A chaplain has recently commenced employment at the centre and sees all new admissions on their second day. She works at the centre on five days a week, but can attend at any other time if requested by a young person. A service is held every Sunday morning and satisfactory arrangements are made for young people of other faiths to follow their preferred spiritual faiths. Links have been made with the prison fellowship, Salvation Army and a local Imam and Rabbi. The chaplain has also formed links with staff from the catering facilities at the centre with a view to assisting in the case of a need for dietary needs linked to religion being met.
132. The chaplain attends the daily care review meetings forums and this is seen as an important part of her role. She is clear that she is encouraged to offer a different perspective and believes that she is able on occasions to act as an advocate for young people in relation to planning their future.
133. The chaplain provides support and individual counselling to young people who have suffered a bereavement. Although only recently in post, the chaplain has already commenced work with some young people.
134. The head of the Youth Offending Service team is the senior manager specifically tasked with addressing equality and diversity issues. She is supported by another member of the senior management team. The chaplain intends to become involved in equality and diversity work which she said

would probably occur on an individual basis. It is important that equality and diversity issues are considered more strategically across the centre.

135. Young people are encouraged to maintain close contact with their parents and others of significance to them. They say that they are encouraged to make phone calls, write letters and invite visitors. The main concern raised by the young people is the length of time it can take for the Youth Offending Team worker to approve the list of people they can contact. The head of the Youth Offending Service team is aware of the young people's concerns in this respect and has recently reviewed the admission procedures to address the delay in approval being given by Youth Offending Team workers.
136. The focus on dealing with offending behaviours and anti-social attitudes in young people has been particularly ineffective. This is partly because the responsibility to promote and provide these programmes is split between teachers in the education centre and residential care staff.
137. There is a planned and prepared programme available within the education provision and some of the unit staff also deliver sessions independently with young people which they have prepared themselves. On some of the units there is no offending behaviour work taking place. Young people are told that one of the primary aims of the STC is to address their offending behaviours. The young people are critical of the programmes provided in the education centre and of the individual and group sessions with staff, they feel these are not meaningful to them and will not particularly help them address their offending patterns.
138. The training and programmes manager has a number of packages of training and resources available to be delivered to all staff involved in this work with young people. Staff say they think priority should be given to providing them with training in the delivery of 'crime avoidance' programmes.
139. The Youth Offending Service team has recently improved the format of young people's individual case files. Although there is some information relating to resettlement held in case files, this is not easily accessible and is not highlighted as an important area of planning with young people.
140. Young people are encouraged to have a routine of doing chores in the living units, including taking care of bedrooms. Some of the residential units achieve a good level of involvement in this respect.

Helping children achieve economic wellbeing

The provision is inadequate.

141. The newly formed Youth Offending Service team has only been in place for a few weeks prior to this visit. This team has responsibility for the resettlement

plans for all newly admitted young people, but not for those already placed when the team was established. Responsibility for ensuring that these young people are trained in appropriate life skills, and for making appropriate arrangements for discharge and resettlement remains with the managers and staff on the residential units until the YOS team assumes this responsibility. As yet the new procedures are not in place, and the existing procedures do not meet young people's needs.

142. Other than the head of the Youth Offending Service team, there is no named person with lead responsibility for the management of developments in relation to 'resettlement' or preparing young people for independence. There is no consistent lead on resettlement, which means that the work done with young people is likely to be inconsistent.
143. Neither the residential staff nor members of the Youth Offending Service team have received specific training in preparing young people for independence or the realities of living alone in the community. Work is going on with young people, but it is led by individual key workers and managers. The extent and quality of this work varies across the centre. Those involved in planning for and delivery of resettlement strategies are not trained in this complex area of work with young people.
144. There are some isolated areas of good practice in relation to the resettlement of young people into the community, and HMI report that a significant number of young people have placements available upon discharge into education, training or employment. However, there is only limited use of mobility to help prepare young people for discharge.
145. Not all young people at the centre have or are working towards clear discharge and transition plans. A number of young people are not receiving any life skills or vocational training. Some young people close to their discharge date do not know what if any arrangements are in place for them when they are discharged.

Premises

146. A building development review of facilities at Oakhill is underway, including an architectural review of arrangements at the time of this inspection. Senior managers have asked the architect to produce some ideas and options for dealing with the inadequate space in the living areas in particular.
147. Some recent attempts have been made to improve and maintain homely living environments in the residential units. Staff and young people try to create a domestic and homely atmosphere within the units for the comfort of the young people. However, with up to eight young people and three staff on a residential unit, there is insufficient living space. For example, it is impossible to provide enough chairs for everyone to sit down.

148. The design of the bedrooms is also cause for concern. There are two areas in the bedroom where it is impossible to view the young person. One 'blind spot' is between the edge of the en-suite and the other is a corner area that has shelving built in for storage. Staff report difficulties in monitoring young people when they hide in these areas. However, of concern to young people is the fact that staff can see straight in to the shower area of the en-suite. This unusual design does not provide young people with sufficient privacy to preserve their dignity when taking a shower.
149. The availability of storage on the living units is a constant problem for staff and young people.
150. There are some areas of the living units, such as the extractor vents and the home economics room in the learning centre, that are not cleaned thoroughly enough. It is unclear who is responsible for arranging the more thorough cleaning and how this is monitored. This may impact on the quality of air exchange to these rooms.

Management

The provision is inadequate.

151. The director and his senior management team have a clear vision about the quality of service they wish to provide at the centre. The director has set out a vision for the development of the centre which is underpinned by child centred values and principles. He describes an incremental process of improvement that rightly builds upon the improvements already made. He is clear that for the outcomes for young people to improve and to be sustained he needs to ensure all staff at the centre are 'signed up' to the improvement plan and contribute to the developments.
152. The director has recruited a number of staff to senior posts who have considerable experience within children's secure settings. This has very recently started to have an impact on the care and service the young people are receiving. The senior staff are providing support, guidance and clinical supervision to operational managers, who in turn support care supervisors. This strategy to provide support and direction to operational managers is commendable. However, there is insufficient clarity in division of roles between senior managers, operational managers and the consultants brought in to support change.
153. The roles and responsibilities of the senior and operational management teams have been reviewed and this is seen as an ongoing process for the time being. The director is aware that the role of the residential service managers is crucial and the recent strategies in place to support them are essential to continuing improvements in the care provided to the young people. The allocation of residential service managers to the five individual house blocks

has provided managers with an opportunity to focus on their individual teams of staff and groups of young people. A decision has recently been made to provide each living unit with two 'team leaders'. The aim of these newly created posts is to provide an additional 'tier' of managers in the house blocks, to support the residential service managers and provide direction to staff, and ensure young people's needs are consistently met.

154. The external manager and parent company are supportive of the improvements and committed to providing resources for further development. There is a commitment from external managers to provide continued support and appropriate resources to ensure the senior management team are able to implement the improvement and development plan.
155. The centre's policies and procedures have not yet been reviewed and revised, except for some crucial ones, such as the child protection policy. The current staff procedure manual holds documents written in 2004, written prior to the centre becoming operational. They are all based on a model of guidance for prisons and are not child focused.
156. Staff are generally more positive about the support they are receiving from their managers, feeling that this has improved. However, some staff remain sceptical and say they have 'heard this all before' when told by senior managers that change will improve things at Oakhill for them and the young people. Despite this, they are all positive about the allocation of residential service managers to specific house blocks. The allocation of staff teams to specific house units is also a positive development as they are more able to provide a continuity of care to the young people.
157. Young people describe staff as inconsistent and often accuse them of 'favouritism' when it comes to giving rewards or sanctions. Similarly, staff continue to describe a centre that does not yet have seamless processes in place for good communication. They particularly describe handover periods as poor. The job of the residential service managers is to ensure staff provide the same level of care and service to all young people. The residential service managers have not been entirely successful in ensuring staff provide the same level of care and service to all young people.
158. The training and development of staff has been given a particularly high profile by senior managers. A number of staff confirmed that until recently they had not been given opportunities for training, since their initial training prior to working with the young people.
159. An independent review of staff competencies and training needs has recently been carried out by external consultants. All departments at the centre have recently held 'team development days', facilitated by external training consultants. A report on the general themes and issues raised by the different staff groups has been produced with a view to these being included in the centre's development plan.

160. Some training has been provided for staff already working at the centre. This has helped to clarify some of the expectations of their role, such as use of single separation and de-escalation techniques. However, staff are not yet being provided with opportunities for regular ongoing training and development. There is a commendable package of training available to be delivered to staff across the centre, but difficulties with staffing have meant this training programme has not yet been implemented.
161. There are few opportunities for multi-disciplinary training for the different groups of staff at the centre to provide staff from different departments opportunities to understand each other's roles and define common goals.
162. The main priority in relation to training has been to improve the 'Initial training course' This has been thoroughly reviewed and revamped by the recently appointed training and programmes manager. For the first time the initial training course is being systematically evaluated and reviewed. Staff now have a more structured programme of induction during the early days of working on the units.
163. Senior managers are clear about the importance of appointing appropriately skilled staff and of ensuring retention of staff. The attrition rate is high at 59.5% in the last year. Some of the 217 staff who have left have been dismissed and some left before they completed their initial training course, however this is still an exceptionally high number of staff leaving the centre in just one year.
164. It is evident that the recruitment and selection process does not test the 'resilience' of staff to work in this particular setting. This is a theme that emerges from the competency review undertaken with staff by the external training consultants.
165. The director confirms he recognises that the recruitment and selection of staff to care officer posts is not to the standard that he requires. A group of new staff interviewed during their initial training course described a chaotic process that left them with the impression that the centre was 'desperate' to appoint staff. Some staff claimed they were offered jobs before they had completed their application form. Several new staff said they were interviewed by 'administration' staff and confirmed that not all interviews were led by senior managers.
166. The director has already made contact with a recruitment agency who have experience in selecting staff to work in secure training centres. The current selection process does not include an 'assessment centre' model of testing resilience or attitudes. The recruitment consultancy agency can provide this for the centre. Efforts are being made to improve and maintain a diverse workforce at the centre.

167. Senior managers are clear about the importance of supporting staff in their difficult role with young people. The aim is to ensure that all staff receive supervision at least monthly and more regularly for new staff. Although there have been some recent improvements not all staff receive supervision at this frequency.
168. There is also an aim to ensure staff teams have regular opportunities to meet as a group, but this is also not yet being achieved. The majority of staff had their progress appraised last year and at the time of the inspection this was due to recommence for 2007.
169. Staff have two opportunities a week to meet with the director to raise concerns, issues, or ideas. One is an early morning meeting and another at lunchtime. These are referred to as 'staff forums'. This is a positive development, in that staff working directly with young people have opportunities to meet face to face with the director. However, staff working during night time periods do not yet feel they are fully included in the developments at the centre.
170. The number of incidents of violence toward staff is high. During 2006 there were 173 recorded incidences of assaults against staff, but in the first nine months of 2007 this has increased to 377. The director acknowledged that this is a high level of violence against staff, but he also clarified that the statistics do not currently distinguish between injuries to staff during incidents of physical restraint and those that are direct violent assaults.
171. Senior managers at the centre are open about the improvements in practice and acknowledge that they are very recent and will require evaluation and revision as appropriate.
172. The centre's statement of purpose has been revised to reflect the format of Every Child Matters 'outcomes for young people'. It is a brief, but clear document. Copies of a summarised statement of purpose are displayed throughout the centre as required by the contract with the Youth Justice Board.
173. Detailed external monitoring of the work of the centre by an appropriately qualified professional or manager is not yet in place. The director has already identified this as an area for development and intends to appoint a visitor to carry out similar checks to those carried out by an appointed visitor under Regulation 33 of the Children's Homes Regulations.
174. The collection and analysis of quality performance information has improved slightly at the centre, but there are still areas of significant weakness. A strategy is now in place to address this. The director is clear that Oakhill must be a learning organisation if it is to provide the highest standard of care and service to the young people.

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175. A significant omission in management information is the lack of a systematic record and analysis of the resident population. Managers are not yet analysing the statistics about young people admitted to the centre, the age range, gender, ethnicity, types of orders and average length of stay, in order to inform strategic planning.
176. Although there is a strategy for the delivery of a comprehensive mental health service it is not fully available to young people as two key personnel have only recently been appointed and another post is still vacant. The recent appointments include a clinical nurse specialist and a forensic psychologist.
177. The protocols and procedure for the review of service level agreements with the different partners contracted to provide services at Oakhill are not robust. The director has already identified this as an important area for development, particularly in relation to service delivery for the education provision.
178. Staff do not keep records containing confidential information on young people safe and secure. Books containing information about incidences of physical restraint and single separation are often left on desks in small rooms used by young people to make telephone calls in private. Some work recorded on crime avoidance is left in these same rooms, where young people could easily read details about other young people without staff being aware.

Recommendations

The following recommendations are made to the Director of the secure training centre, unless otherwise stated.

Where recommendations from HMIP and Ofsted inspectors are complementary these have been identified together in the table below. Others are listed separately in the HMIP report annex.

- consider how best the centre can work with young people to enable their trust in the catering arrangements (Being healthy - Standard 1)
- review the mealtimes held on the living units, particularly in respect of the presentation of meals (Being healthy - Standard 1)
- develop the menu planning to be more inclusive of meals reflecting the varied cultural backgrounds of the young people (Being healthy - Standard 1 - 1 and 17 Positive Contribution)
- ensure all young people have access to reasonable drinking water throughout the day (Being healthy - Standard 1)
- review the risk assessment procedures for when young people are empowered to manage their own medication, clarifying any potential risks to other residents (Being healthy - Standards 3/4)
- make available on unit files the health care plans for individual young people, omitting only strictly confidential information that is best held in the health centre (Being healthy - Standard 3)
- liaise with local police and fire and rescue services to ensure that respective roles in the event of emergency are clear (Being safe - Standards 4 - 18)
- review the frequency of the fire evacuation drills for the site and ensure night staff are familiar with and have opportunities to test the procedures (Staying safe - Standard 4)
- consider how best to balance the requirement for observation through bedroom door panels with a reasonable amount of privacy for young people, particularly when they taking showers (Staying safe - Standard 3)
- ensure behaviour management records include antecedents for every incident and de-escalation strategies carried out (Staying safe - Standard 7)
- clarify arrangements for the use of the 'independent living' areas to include monitoring arrangements to ensure that the resource is not used inappropriately (Staying safe - Standard 11)
- risk assess minimum staffing needs for each unit prior to shift and ensure staff deployment takes into account the identified risks (Staying safe - Standard (management) 8/9)
- review the use of the first response team (Staying safe - Standard 4)
- review the use of sanctions, in particular being placed on 'bronze basic' and losing all privileges, to ensure they are fair (Staying safe - Standard 8). The rewards and sanctions scheme and all aspects of disciplinary procedures should be part of a centre-wide behaviour management policy. (HMIP)
- Young people should be part of the consultation process relating to the review

of the rewards and sanction scheme and their views on relevant incentives and privileges should be taken into account. (HMIP)

- Written warnings should be issued to children and young people who lose points and are at risk of demotion in the rewards and sanctions scheme. (HMIP)
- review the procedures for debriefing and supporting young people following incidents (Staying safe - Standard 9)
- Sanctions should be monitored and evaluated regularly for excessive or inappropriate use and to identify patterns or trends, this should include ethnic monitoring. There should be standardisation meetings or regular sampling exercises to ensure consistency and fairness in the application of sanctions. (HMIP)
- Alternatives to the imposition of a sanction, such as a verbal warning and/or mediation or restorative justice, should always be considered. (HMIP)
- Staff should be trained in the principles and the administration of mediation and restorative justice. (HMIP)
- amend the anti-bullying policy to include reference to child protection considerations (Staying safe - Standard 15)
- improve the quality of the personal radios and alarms in use at the centre (Staying safe - Standard 4)
- review the effectiveness of the centre's CCTV systems for the purposes of child protection (Staying safe - Standard 15)
- review the procedures for strip searching to clarify grounds for forcible searching (Staying safe - Standard 15)
- ensure young people have access to the centre's equal opportunities policy written in a user friendly format (Enjoying and achieving - Standard 2)
- ensure the written information available to young people is correct and consistent with other policies (Enjoying and achieving - Standard 2)
- record young people's participation in enrichment and leisure activities, to ensure equality of opportunities (Enjoying and achieving - Standard 4)
- develop a clear strategic plan for education and provide stable, strong and effective leadership and management which focus on raising standards and improving outcomes for young people (Enjoying and achieving - Standard 3 (management) 19)
- take effective and sustained action to address the recommendations of the last inspection, as none of them were met in full (Enjoying and achieving - Standard 3 (management) 19)
- continue to build the partnerships, mutual respect and collaboration between education and residential services (Enjoying and achieving - Standard 4)
- provide support and training to teachers to ensure that all lessons are of consistently high standard (Enjoying and achieving - Standard 4 (management) 19/20)
- provide a relevant, stimulating and high quality curriculum which meets the needs of all young people, has clear progression routes and offers an appropriate range of vocational programmes (Enjoying and achieving - Standard 4)
- involve all young people in setting targets for learning and in reviewing their progress on a regular basis (Enjoying and achieving - Standard 5)

- ensure that all management information systems are fit for purpose and that data on progress and achievement in the learning centre are used to inform service development (Enjoying and achieving - Standard 3)
- ensure that all young people have their identified individual needs consistently met (Positive contribution - Standard 10)
- improve practice in relation to dealing with young people's offending behaviours and attitudes (Positive contribution - Standard 3)
- improve arrangements are in place for young people to attend their review and planning meetings. Involve them and their parents in assessment and planning (Positive contribution - Standards - 7/10/12)
- review procedures to ensure Children's Services Authorities provide the centre with relevant documentation for Looked After Children, including young people remanded (Positive contribution - Standard 7)
- ensure that there is a clear and explicit policy and operational standard to address the resettlement of young people from the centre (Economic wellbeing - Standard 1/5)
- ensure that all young people have appropriate transition or discharge plans and are trained in appropriate life skills to copy independently in the community as part of their care plan (Economic wellbeing - Standards 1/2/5)
- consider nominating a named person to carry lead responsibility for the management of developments in relation to 'resettlement' or preparing young people for independence (Economic wellbeing - Standard 1/2)
- improve the knowledge and understanding of all staff groups of the issues related to 'resettlement' (Economic wellbeing - Standards 2/4)
- improve the external monitoring of the centre (Management - Standard 3)
- provide staff with regular opportunities for staff meetings and shift-hand over meetings to ensure a good level of communication (Management - Standard 12)
- provide staff with regular opportunities for training and professional development (Management - Standard 11)
- provide staff with regular formal supervision (Management - Standard 16)
- address the high turnover of care staff at the centre and develop a strategy to improve retention (Management - Standard 8)
- review the procedures for monitoring and reviewing the service level agreements with partners providing services at the centre (Management - Standard 14)
- ensure all records and reports held on young people are kept securely and out of the reach of other residents (Management - Standard 14)
- work of the Youth Offending Service should be properly coordinated with the key worker role so that the Youth Offending Service compliments the key worker task (HMIP)