

# Hassockfield Secure Training Centre

## Inspection report for Secure Training Centre

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<b>Inspection date</b>	28 October 2008
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<b>Additional inspector</b>	Elizabeth Taylor

<b>Type of inspection</b>	Random - unannounced
<b>Type of registration</b>	Secure Training Centre

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## About this inspection

In accordance with Statutory Rules for 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

*Outstanding:* this aspect of the provision is of exceptionally high quality

*Good:* this aspect of the provision is strong

*Satisfactory:* this aspect of the provision is sound

*Inadequate:* this aspect of the provision is not good enough

*Not judged:* this aspect of the provision was not judged

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## Service Information

### Brief description of the service

1. Hassockfield Secure Training Centre (STC) is managed by Serco, which is a private company responsible for other services, including adult prisons. Hassockfield STC contracts with the Youth Justice Board to provide accommodation for children and young people serving sentences or remanded to a secure setting.
2. Hassockfield STC is situated near the town of Consett in County Durham. It is a purpose built secure establishment. It is one of four STCs and is the only one in the north of the country.
3. The STC has recently expanded its service and now contracts with the Youth Justice Board for 64 places. This is an increase of six places. The centre currently offers provision for young people aged from 12 to 17 years. Of the 64 places available, 48 are for young men and 16 for young women. There is also provision for up to three young mothers and their babies, although this resource has yet to be used. At the time of the inspection there were 51 young people in residence.

## Summary

### The overall quality rating is good.

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

4. This was a random unannounced inspection carried out in accordance with the service level agreement between the Youth Justice Board and Ofsted.
5. The aim of this inspection was to review progress against the recommendations made in the report of April 2008. Two Ofsted inspectors spent a day and a half on site, providing managers with initial feedback at the close of the inspection.
6. The centre has continued to change and develop services and improvement is constantly on the agenda. Senior managers are aware of the potential for chaos if change is not managed appropriately and are therefore clear about the 'processes' that need to be followed to ensure acceptance and success. They have attempted to consolidate some of the changes that have been made this year. However, further significant changes have yet to be implemented, including the introduction of the new rewards and sanctions scheme.

7. The centre has increased capacity and is now able to work with 64 young people. This increase has been the result of the refurbishment of six rooms to create additional bedrooms. The increase in the number of young people has also resulted in an additional 18 care staff posts being created. This has provided opportunities to have more staff working directly with the young people in their living units.
8. There has been a restructure of the middle management team, with further clarity about the management of the house blocks and expectations of care staff with clear key performance indicators. The role of residential supervisors has also been revised and the post of team leader established. They are responsible for day to day management and support to residential care officers. It is a concern that this restructuring has not yet resulted in care staff consistently receiving formal supervision. However, young people are benefiting from knowing who the house block manager is, and seeing more of them in the living units than was previously the case.
9. Young people are well served by managers and staff who recognise and acknowledge their individual needs and put in place a range of strategies and interventions to address them appropriately. There are good, open, honest and respectful interactions between staff and young people.

## **What has been improved since the last inspection**

10. Of the 14 recommendations made at the last inspection, six have been met and eight have been partially met and are still 'work in progress'. Of the four recommendations made by education inspectors, evidence is available to suggest that two of these have been implemented, but the impact of progress upon young people was not addressed during this visit. The two other recommendations are in the process of being addressed.
11. There have been improvements within the healthcare department, particularly in relation to mental health training for nursing staff. Other improvements include an increase in the mental health service to young people and an improved immunisation programme.
12. There have been changes to the mealtime periods, which in the main are welcomed by young people. The quality of food served is of a very good standard.
13. Clarification has been given about the use of restrictive physical intervention, particularly in relation to its use to maintain good order and discipline. The revised rewards and sanctions scheme had been thoroughly considered and discussed, although the new system has not yet been implemented.
14. There has been a restructuring of the middle management tier and the house blocks are now led by managers with dedicated responsibility for that task.

The roles of other senior staff within the residential living units has also been clarified and the new post of 'team leaders' established. This provides a much improved management structure that gives a clear line of accountability and support for both staff and young people.

15. There have been some improvements in the frequency and quality of supervision provided to care staff. However, the centre is not yet achieving its own target for care staff of six-weekly sessions.
16. Opportunities for young people to participate in enrichment activities have improved even further, with more 'clubs' on offer during each session and these are now available every evening and weekend.
17. Of those recommendations that have not yet been fully addressed, several are linked to resources, for example vacancies within the healthcare department have meant that nursing staff have not attended internal reviews. Others are related to the delays in fitting out the mock 'bed sit' for young people to gain independence skills.

## The effectiveness of the service

### Helping children to be healthy

#### The provision is good.

18. Young people's individual health needs are identified and action is taken to promote their physical and mental well-being.
19. Four health care recommendations were raised during the last inspection. Health care targets are now incorporated in to the centre's improvement plan. Identified people responsible for addressing them all have specified timescales for completion. Action has been taken to address all four recommendations though three remain 'work in progress'.
20. The medication dispensing system of 'secondary' dispensing continues to be used as a measure to reduce risk to young people. Arrangements are in place for this system to be assessed by two independent professional agencies. Their findings will inform future practice to ensure young people's health and safety is adequately promoted.
21. Members of the healthcare team are now receiving training in mental health. The sessions take place on a two weekly basis. The training supports effective assessment of young people's mental health welfare by the healthcare team and enables nurses to monitor and support young people on a daily basis.
22. A new healthcare contract has been signed with a local hospital. This has resulted in an increase in mental health services in the centre. Visits by Community Psychiatric Nurses and a psychiatrist have increased and a clinical psychologist is now engaged to attend six times each month. The increase in psychological and psychiatric services ensures young people's mental health needs are speedily and effectively addressed.
23. Young people are encouraged to take an interest in looking after their health and have a good understanding about how a balanced diet and exercise contribute to a healthy lifestyle. The healthcare team continue to keep up to date with current thinking and legislation in matters related to healthy eating. They liaise closely with catering, care and education staff to promote healthy lifestyles for all the young people.
24. The system for assessing risk to each young person has been reviewed and staff training in the new process is due to commence in January 2009. The new assessment process will then be implemented.

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25. The use of two time out rooms located within the health centre has been reviewed. One room is currently being refurbished as a 'chill out' area for young people to go to when they need a quiet, calming environment. The second room continues to be used as a time out area for young people during education. However, due to declining use, consideration is being given to converting the room to further enhance the health care service offered to young people.
26. The system for young people's meals has been revised. Each house attends the central dining room on a rotational basis. Young people say the system is fair though some say they feel hungry waiting for the last sitting and would appreciate a snack being offered on these days. A reduction in the number of people sitting down to eat at any one time has resulted in a calmer, less frenetic atmosphere in the dining room. However, care staff do not consistently sit with young people to enhance the social aspect of mealtimes.



## Protecting children from harm or neglect and helping them stay safe

### The provision is good.

27. There were two good practice recommendations made under this outcome heading. One has been met in full and the other is work in progress.
28. The promotion and maintenance of good order and discipline through the use of positive professional relationships is a strength of Hassockfield. The use of Therapeutic Crisis Intervention (TCI) techniques to engage young people and address challenging behaviour is continuing to make a significant positive difference in the way young people are managed.
29. However, although there were clear policies and procedures in place informing staff of expectations of them in relation to the maintenance of 'good order and discipline' at the time of the last inspection, there was still the potential for confusion and misinterpretation in some circumstances. As recommended, further clarification has now been given about the use of restrictive physical intervention for the maintenance of good order and discipline. A recent high court judgement has made this clear and managers have taken appropriate steps to ensure staff understand the legal position. Policies and procedures have been appropriately revised and staff have been made aware through a variety of routes, including a monthly 'Behaviour management newsletter' of the legal position.
30. There has been an increase in the number of young people refusing to comply with staff instructions and these incidents are being recorded and monitored by managers. One of the more difficult periods is when young people simply refuse to go to their room at bedtime. The centre locks down shortly after the young people are in their rooms for the night and staff on the evening shift leave the centre. A strategy is now in place to ensure that additional staff are available during this period should a young person or group refuse to go to their bedrooms. The aim is to 'sit out' the situation with the young person and encourage them to comply with the expectation to be locked in their rooms from 9.30pm. The duty director is informed if a young person is refusing to enter their bedroom and they monitor the situation. If a resolution is not reached by 10.30pm the duty director will go in to the centre.
31. In the majority of cases of refusal young people do eventually comply and go to their room, without resorting to violence and therefore a restrictive physical intervention is not necessary. The approach taken means that young people are reminded what is expected of them, but use of force is not necessary as they eventually understand that they will have to comply.

32. The use of restrictive physical intervention is continuing to reduce. Statistical information shows the use of Physical Control in Care (PCC) in 2008 was lower than in 2007, except for July 2008 when there were five more restraints.
33. Monitoring of incidents in education reflect a reduction of 44% when compared with 2007 figures. In the first six months of 2008 the use of 'time away', or removal from association, had also decreased by 31% from the same period in 2007.
34. After each use of PCC the duty director will review the reports and documents, view the Closed Circuit Television (CCTV) footage, and meet with staff and the young person involved. They ensure that the reports are completed appropriately, that there are no concerns about the response from staff, and that staff and young people are appropriately debriefed after the incident. This more detailed process provides an improved level of scrutiny, ensuring that young people are supported after an incident and provided with an opportunity to reflect upon the situation. They are also given an opportunity to raise any concerns, which are initially recorded on their Life Space interview form.
35. The use of PCC and other critical incidents are also very rigorously scrutinised each month at the Critical Incident Review Panel (CIRP). This is a multi disciplinary forum, and includes managers and staff from each of the departments at the centre, the police, the advocacy service and the local children and young person safeguarding team. The CIRP is an excellent forum to review and monitor critical incidents and the use of restrictive physical intervention at the centre. The function of this multi agency group, which also includes the Youth Justice Board performance monitor, reflects a centre that is transparent in its dealings with relevant partners and stakeholders. The commitment to reduce the use of restraint and time-away, and review their use independently and transparently, ensures measures to manage young people's behaviour are carried out safely and young people are protected.
36. A very comprehensive planning process has been undertaken regarding the rewards and sanctions scheme which was still in the design stage during the last inspection. The educational psychologist has been actively involved and there has been a thorough consultation process across all groups in the centre, including young people. The aim is to devise a whole centre approach to rewarding co-operation and positive behaviour. The centre is clearly trying to make certain they have the most appropriate system. Once implemented this will be a complete change of approach, moving away from the main focus on negative sanctioning to rewarding positive behaviour. This is a major cultural change and will take time to embed in practice across the centre. It has been decided to pilot the new system with one house block and this is due to commence in November. Several staff said they are cautiously optimistic about the new system. Several young people say they have heard about changes to the incentive scheme and feel that an improvement in the opportunities to receive more rewards will be positive.

37. Young people are able to complain without fear of discrimination if they are not happy with their care, and receive a timely response. There are clear, transparent and effective complaints procedures which are included in the written information given to young people and their families. Young people are invited to comment upon the outcome and sign the record of any complaint made by them. The records indicate that they usually comply with the request.
38. There has been a change in how information is held on complaints made by young people. Records of investigations carried out by house block managers and subsequent action taken are not held in a central file, although an electronic note is held of each incident and the outcome. Copies of the complaint, action taken and outcome are placed on individual young people's case files, but when they leave the files are archived. This does not allow easy access to information held.
39. Details held on staff files, where there has been a question about their behaviour, are also not consistently maintained. Discussions with managers reflect a very thorough process of dealing with any questions or concerns highlighted when young people complain, but notes in supervision files do not consistently reflect this process.
40. The centre's procedures and practice ensure that young people are kept safe from harm. There is a clear and transparent written child protection procedure agreed with the Local Safeguarding Children Board (LSCB). All of the referrals made to the LSCB since the last inspection have been dealt with within agreed timescales.
41. All staff receive training in child protection procedures at the time of their induction, and the training is refreshed annually. Several managers are also in the process of receiving further training arranged by the LSCB, including 'safer workforce recruitment', which is good practice.

## Helping children achieve well and enjoy what they do

### Education

#### **The provision is not judged.**

42. The head of education provided a range of documents and other evidence to confirm progress against the three recommendations specific to the education provision, made by education inspectors during the last inspection. However, as no education inspectors were part of the team during this inspection, it has not been possible to verify impact for young people.
43. One recommendation related to the purchasing of resources had not been sufficiently met and this is repeated in this report under the management outcome area.

## Helping children achieve well and enjoy what they do

### Welfare

#### The provision is good.

44. Young people are encouraged to achieve and enjoy what they do. The range of enrichment and leisure activities available to young people has continued to improve. Organised 'clubs' are now run each weekday evening and weekends. This has increased from the original arrangement of four nights a week, providing a greater variety of opportunities for young people.
45. Teaching staff remain at the centre on a rota basis and provide a range of 'clubs' during the evenings. A staff skills analysis has been carried out with care staff, enabling further development of the programmes available to young people. The number of clubs and activities available has also increased to six each evening, or weekend day. The types of activities include opportunities for relaxation, sport, arts and crafts, and practical skills such as cooking and hairdressing. A chess club has also been established. These developments enrich the quality of experience available to the young people.
46. Systems are in place to monitor and record the young people's attendance at activities. A note of attendance is also made in the minutes of the weekly review meetings held to discuss young people's progress and personal development. The flexibility of the programme allows it to be amended when needed to meet the needs of the young people, for example the provision of one to one reading sessions. Young people also have opportunities to 'chill out' in their living units.
47. The popular activities, such as the cooking club, have been extended. This now runs three times a week, with two sessions each time. This is a positive development and one that clearly places enrichment and activities at the centre of planning for young people. Less popular clubs are reviewed to make them more appealing, otherwise they are cancelled.

## Helping children make a positive contribution

### The provision is good.

48. Only one recommendation was made under this outcome heading at the last inspection. This remains work in progress.
49. A system for collecting data about attendance at internal, monthly review meetings on young people has been implemented since June 2008. Attendance by the resettlement team is excellent and that of the education and care staff is good. However, there is no representation from the healthcare team during this period although they provide written information to the meetings regarding an update on individual young people's health needs and treatment.
50. It is policy that a nurse would usually attend the internal review meetings, but a vacancy within the healthcare team has impacted on their ability to do so for some months. Although the quality of the reports provided by the healthcare department are good, the attendance of representatives from the different departments is necessary to ensure the holistic needs of young people are effectively reviewed and planned for.
51. Action is being taken to improve the recording of internal review meetings held to discuss young people. The recording format has been revised to include a section on 'enrichment' for young people. This ensures staff focus on the wider needs of young people, not just their behaviour, and shows how young people are helped to gain the skills and self-belief to help them live a rewarding and fulfilling life.
52. Daily recording on young people is improving. Comments about young people's emotional well-being, socialisation and self-help skills are beginning to be noted as well as reports about their behaviour. This provides a more rounded picture of young people's daily lives.

## Helping children achieve economic wellbeing

### The provision is satisfactory.

53. There was one good practice recommendation under this outcome heading.
54. Development of a comprehensive life skills programme is still work in progress. A strategy document and comprehensive life skills resource pack have been completed. At the point of admission staff ascertain young people's knowledge and capabilities in a wide range of areas related to independence skills. The delay in implementing the life skills programme is now largely due to the fact that the mock bed sit is not yet ready for use. Funds have been identified and work has commenced to relocate the stores and facilities departments which have resided in the rooms that will be converted to an independent skills training flat.
55. Young people have opportunities to develop cooking skills and several during the inspection showed the successes of their cooking session that evening.
56. Staff advocate well for young people placed at the centre. They consistently challenge local authorities who are not planning appropriately or in a timely manner for young people preparing for discharge. The centre has advised young people to seek support from external advocacy agencies and this has been successful on a number of occasions.
57. Considerable efforts and investment continues to be made as part of the centre's intention to provide young people with a safe and comfortable living environment. Furniture and carpets have recently been replaced and there is an ongoing programme of improvement throughout the centre.
58. An additional six bedrooms have recently been brought on stream, through the conversion of six small lounges in the three house blocks for the boys. These are largely completed, although replacement windows are taking some time to acquire. The young people like the new bedrooms, which are considerably larger than the other bedrooms. Only young people on the higher levels and those not considered vulnerable are permitted to reside in these bedrooms. This not only ensures young people's safety, but also provides an incentive for them to achieve higher level status and have an opportunity to experience the larger bedroom.

## Management

### The provision is good.

59. There were three good practice recommendations made under this outcome heading.
60. The centre has a strong child centred value base, which is established and modelled by senior managers. There is an important ethos that all staff at the centre, no matter what their role, play a crucial part in the quality of care and service provided to young people. Staff at the centre effectively use interpersonal skills with young people and form meaningful relationships with them as quickly as possible.
61. Senior managers are aware of the importance of supporting staff in their work with young people and have recently increased the tasks of the duty directors, who are on call outside of normal office hours and now have a physical presence in the centre at weekends. The aim is to demonstrate support for staff. This has been achieved although some are not very clear about the reasons for the weekend visits, but concede that it is helpful to know senior managers are aware of the pressures they face in their work with young people.
62. The duties of the house block managers and duty operational managers have also been reviewed and resulted in a restructuring of their respective roles. The result has been that two managers have the responsibility for managing two house blocks each. They are each responsible for 32 young people.
63. This new management structure ensures that a manager is responsible for the teams in each house block and the day to day running of the units. The management structure within the house blocks includes three team leaders, which are new posts, three deputy team leaders and a group of residential care staff in each house block.
64. These changes bring more opportunities to clarify the role of staff and for meetings within the house blocks. This provides greater clarity in the provision of service to young people.
65. House block managers now have a higher profile on the living units and are known by the young people. This provides young people with an opportunity to raise issues with a manager they know is responsible for the running of their unit, and have the issues dealt with before they become a complaint. Staff confirm that they now have opportunities to talk with the house block managers and feel the role of the team leader and the deputy is useful. They now have a clearer understanding of the lines of accountability. Progress in this respect has been positive.



66. Attention has been given to improving the opportunities for care staff to have regular supervision. The policy at Hassockfield is now for six weekly formal sessions to be provided for established staff with more regular supervision for newly appointed staff. Although there is a clear improvement on the levels of supervision since the last inspection, managers are not consistently achieving the target of six weekly sessions. The house block managers had initially taken on the role of supervisor to all staff, but this clearly was too large a task. Team leaders have now received supervision training and they are in the process of taking on responsibility for supervising care staff in their teams.
67. The recently increased staffing levels have also freed team leaders up from immediate child care duties and provided them with opportunities for more management tasks, including supervision. The staffing level is now three staff with eight young people, when previously it had been two staff to seven young people. This improved the quality of service offered to young people.
68. A new format for the structure and recording of supervision is in place. This provides an outline agenda which includes a number of key performance indicators for care staff. Supervisors are also expected to record the details of the session on the new format and copies of these are sent to the human resources department.
69. The frequency and quality of supervision is now also being checked by the newly appointed Quality Assurance manager, who produces feedback on quality and frequency of supervision.
70. These are all positive developments, however the target for the frequency of supervision is not being consistently met. This means that staff are not yet sufficiently supported and guided in their role with young people.
71. Processes for the recruitment and selection of staff to work at the centre are excellent and young people are actively involved in the selection of staff to all posts. This is a recent development, but one that managers, staff and young people report as being very positive. This is the first STC to include young people in the appointment of staff so extensively.
72. Young people are cared for by staff who have been subject to a thorough recruitment and selection procedure. Their involvement sends a clear message to young people that their views are important, as is their involvement in the selection of new staff, or the promotion of current staff.
73. Training continues to have a high profile at the centre, with 14 staff currently undertaking the social work degree course. A range of training has been provided for house block managers and team leaders and further training is planned. All staff are currently undergoing training in a method which teaches them to improve their interpersonal skills, based on the study of language, communication and personal change. The techniques learnt from this training are intended to provide staff with additional tools in their work with young

people and to help them manage their behaviour. This supplements the TCI training.

74. Young people clearly benefit from staff who are provided with training to improve their skills in dealing with the complex needs and challenges they present.
75. Arrangements are now in place to cover a number of key roles when the relevant staff members are on leave or otherwise unavailable. This prevents problems arising in the care delivered to young people, such as gaps in planning for activities and delays in personal items being purchased.
76. A delay in purchasing a number of items at the centre, particularly in the education provision, has continued to be problematic. Although there has been some improvement, the procurement system available in Serco is not flexible enough to meet the demands of the centre. A solution has been agreed with the organisation and a credit card will be made available for purchases up to a certain level, but this arrangement is not yet in place.
77. The collection and collation of performance management information has continued to develop at the centre. The information manager collects and analyses a range of information, which is presented in a report to senior managers each month. The role of the quality assurance manager is also adding a 'depth' of understanding to some of the information collected at the centre. Good progress is being made in this respect.

## Recommendations

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

- ensure the targets in the health care development plan are addressed (Being healthy - Standard 3)
- ensure the medication dispensing procedure is ratified by an external professional agency (Being healthy - Standard 4)
- ensure improvements are made to the 'time out' rooms in the health care centre (Being healthy - Standard 3)
- give higher priority to implementing the outcomes of the review of systems for rewards and sanctions (Staying safe - Standard 8 and Enjoying and achieve - Standard 3)
- ensure that a central record is held of the management action taken to deal with complaints made by young people (Staying safe - Standards 12/13)
- ensure a representative from the healthcare team attends all relevant meetings where a young person's needs and progress are discussed (Positive contribution - Standards 10 & 11)
- continue with progress already made to implement the life skills strategy, to support young people in preparation for resettlement (Economic wellbeing - Standards 1 & 2)
- ensure consistent practice in relation to staff formal supervision, as set out in policy guidance (Management - Standard 16)
- address the delays in receiving consumable and other learning resources that have resulted from the introduction of new purchasing arrangements (Enjoying and achieve - Standards 3 & 4)