

Inspections of secure training centres

Inspection of Medway Secure Training Centre

Report published: 8 August 2016

Overall effectiveness	Inadequate
The safety of young people	Inadequate
Promoting positive behaviour	Inadequate
The care of young people	Inadequate
The achievement of young people	Requires improvement
The resettlement of young people	Good
The health of young people	Good
The effectiveness of leaders and managers	Inadequate

Inspection dates: 19–24 June 2016

Lead inspector: Sheena Doyle

Age group: 12–18

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Overall effectiveness	Inadequate
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The overall effectiveness of Medway secure training centre is inadequate. This judgement is based on the centre's performance since the last full inspection in September 2014. The stability of the centre has been sorely undermined by a combination of significant factors. These include: the current provider, G4S Care and Justice Services Limited, engaging in the re-tendering process to run the centre in 2015, winning the contract then announcing its decision to withdraw in March 2016; the screening of a TV documentary in January 2016 showing apparent mistreatment of young people and descriptions of deliberate falsification of records by centre staff; the consequent scrutiny that has followed a change of director at the end of January 2016; the findings of the Medway Improvement Board; and the ongoing police investigation.

The findings and recommendations of the Medway Improvement Board and the centre's improvement plan drawn up by G4S, have not been implemented properly. Actions which require longer lead-in and implementation have been deferred to the new provider, the National Offender Management Service (NOMS), with the transfer date scheduled for 1 July 2016.

Actions which could have helped to stabilise and improve the daily functioning of the centre have not occurred. This includes maintenance of the physical fabric such as door locks and ensuring good communication with both the wider staff group and the young people. This would have helped the young people feel more secure about their futures and helped to contain the growing myths and rumours about what will happen next. Although it is accepted that there is still much that remains to be determined by the incoming provider, young people expressed fears to inspectors that could readily have been allayed by the current provider.

The centre has lost significant numbers of staff at junior and senior managerial levels. Some of this has been due to the criminal investigation and/or employment misconduct findings. The dismissals, suspensions and resignations have left vacuums that have been filled by staff who do not always have sufficient training or experience for their new roles.

There is considerable inconsistency and variability across the centre both in terms of actual practice with young people and in the recording of that practice. This has serious implications for maintaining good order and promoting young people's welfare and for governance of arrangements. Centre managers agree that boundaries of behaviour between staff and young people are currently too variable. This includes some physical contact, not judged to be sinister in intention, but could be misunderstood, particularly in an environment where boundaries are poorly understood and/or enforced.

The enforced removal of some staff, coupled with a staff attrition rate over the last 12 months of 67% means most staff are very inexperienced. The current provider has not ensured that these staff have sufficient support and supervision to help them

grow into their roles. This is likely to be contributing to the inconsistent application and enforcement of the rewards and sanctions scheme. Inspectors saw many examples where the policy was not being followed.

Levels of violence in the centre are very high and growing. This includes violence between young people and violence towards staff, despite a small and stable population of young people. The centre's senior managers are not aware of the increasing trends in many areas of the centre's functioning, and this is a stark example of their lack of oversight and governance. There is no violence reduction strategy to address this.

Although most of the workforce have job security under the transfer of public employee (TUPE) legislation, the general uncertainty about how the centre will function and what staff's individual roles and responsibilities will be in the future, is all pervasive and contributing to a wide sense of malaise across the centre. Allowing this situation to continue will make it more challenging for the new provider to establish an effective, orderly and safe environment when it assumes responsibility. Weak management and oversight of the centre is not maintaining the status quo. It is enabling poor practice and inappropriate behaviour to become increasingly embedded and therefore a bigger challenge to turn around.

Some services within the centre have managed to continue to provide good quality interventions for young people. This is particularly true for health, education and resettlement services and staff should be credited for this. Emotional and psychological health services and interventions have continued to be strengthened. Resettlement staff strive hard to ensure young people have suitable places to live in and suitable training placements when they leave the centre. The centre's education team provide a varied curriculum and some good quality teaching although there are improvements to be made. While many young people make good progress from their starting points when they were admitted to the centre, a notable proportion is working below their potential.

This report sets out a number of recommendations but these should not be regarded as the only shortcomings in the centre that require addressing. It is expected that the new provider will take account of the totality of findings contained within the whole report and use these to inform future plans.

Recommendations:

Immediately:

- Ensure all child protection and safeguarding matters are dealt with in line with statutory guidance and Local Safeguarding Children Board (LSCB) procedures. In particular that all referrals to external safeguarding agencies are prompt, internal actions are swift, and good records of activity are maintained.
- Staffing and rotas should meet the needs of the young people and protect both staff and young people.
- Ensure that all health, safety and security arrangements and contingency plans are up to date, comprehensive and fit for purpose. This includes live and desktop exercises and partnership working with agencies such as the fire service.
- Ensure recording and data collection and retention is accurate, secure and has effective governance. This should cover all aspects of the centre's functioning but specifically regarding key issues such as: searching, use of force, use of handcuffs, single separation, complaints, and arrangements to keep the most vulnerable young people safe.

Within three months:

- Ensure all aspects of the physical environment are safe, clean and suitable for the purpose of caring for young people safely and securely. This includes reviewing existing CCTV coverage and extending where necessary.
- Scrutinise the centre's data and performance to identify and reduce discrimination, intended or unintended, and learn lessons to inform the continuous improvement cycle. For example, by reviewing use of force incidents so that pain-inducing techniques are not used and violence is reduced.
- Ensure all staff implement behaviour modification techniques such as rewards and sanctions fairly and consistently, and that they understand and implement appropriate relationship boundaries with young people including challenging unacceptable behaviour.
- Health commissioners should ensure that young people have access to physiotherapy and podiatry services that are equivalent to those available to them in the wider community.
- Clinical governance arrangements should be fully established and implemented consistently to ensure that the quality and safety of healthcare services are monitored effectively.
- Education managers and teachers should improve target setting and monitoring of academic attainment, improve the quality of teaching, and provide a suitably broad vocational curriculum tailored to individual needs.

- The education department should have greater levels of internal and external scrutiny of its functioning and effectiveness.
- Consultation with young people about all aspects of life at the centre should be strengthened with visible and prompt feedback mechanisms so they are clear about the value and impact their views have on centre developments.

Within six months:

- Ensure individual sessions with young people to address their offending behaviour and other needs are delivered to agreed standards by sufficiently well-trained staff and that the materials used are engaging and relevant.

Service information

Medway Secure Training Centre (STC) is one of three functioning purpose-built secure training centres. At the time of the inspection it was being managed by G4S Care and Justice Services Limited but was in a period of transition, with management of the centre due to transfer to the National Offender Management Service (NOMS) on 1 July 2016. The STC offers secure accommodation for up to 76 male and female young people aged between 12 and 18 years who have been sentenced or remanded to custody. On-site health care is provided by the NHS under a service level agreement with appropriate access to community-based services. Education is provided on-site by G4S. At the time of the inspection 29 young people were resident at the centre.

Inspection findings

The safety of young people	Inadequate
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1. Child protection matters are not managed effectively meaning young people are not sufficiently safeguarded. Of nine recent child protection cases sampled, five show serious shortfalls. The local authority has no record of one referral that centre managers advised inspectors had been made. Four others were not referred to the local multi-disciplinary child protection team and/or the designated officer within 24 hours with one being delayed by 13 days. In the case where there was significant delay, centre managers took no action to ensure that young people were safeguarded in the meantime. They did not give due consideration to suspension or other action such as removal from operational duties of a member of staff. The staff member who was the subject of the allegation remained in direct contact with young people. However once the Youth Justice Board was notified about the incident the staff member's certification to work as a custody officer was promptly suspended.
2. One safeguarding concern was referred by centre managers directly to the police via the 101 service. This is inappropriate and demonstrates a lack of knowledge and understanding of agreed multi-agency safeguarding procedures including a lack of awareness of how to make a safeguarding referral outside office hours.

3. Since the last inspection, investigations into safeguarding allegations by police, the local authority and centre managers have taken place, with some still in progress. This has resulted in a number of staff being arrested and five dismissed from employment. Ten staff are currently suspended from duties without prejudice and four others have been placed on non-operational duties pending the outcome of investigations. These matters concern allegations of misconduct, poor practice, and unacceptable behaviour towards young people and/or abuse.
4. Central electronic records of child protection matters are inconsistent and some are poor quality. Chronologies lack sufficient detail and other relevant information is incomplete or absent. Key information is not collated in one place. For example, letters to parents, placing authorities and young people were not present, checklists were blank and the rationale for actions in relation to one staff member was incomplete.
5. There is no system in place to quality assure child protection matters or to track the progress of ongoing cases. As a result, senior managers do not have assurance that procedures are sufficiently robust, being adhered to or actioned appropriately or in a timely way.
6. Staffing levels at the centre are variable, though minimum levels expected by the contract are largely met. However it is commonplace that a living unit will have two staff on duty and there are frequent occasions where this is reduced to one for undefined periods of time, if their colleague is called away to deal with other matters. A review of two incidents by the local authority of peer-on-peer assault, identified the common factor of lone staff working with a group of young people. In each case the staff member was distracted, providing the opportunity for an assault to take place, one of which led to hospital treatment. In the other incident, an item was used that could have resulted in serious injury.
7. Staff told us that they are moved around the centre and rotas show they do not always work on the same unit. This means that consistency of practice and the ability to develop good relationships with young people is disrupted.
8. Security arrangements are a significant concern. Recent security breaches due to ineffective centre procedures have taken place impacting on the care and safety of young people. These include a games console being brought into the centre by a staff member for a young person where procedures were breached leading to serious misuse. Current arrangements for staff purchasing items on behalf of young people are unnecessarily convoluted and lack management oversight. This means that current arrangements do not detect potential corruption, bribery or other forms of manipulation.
9. In recent weeks, two USB data sticks containing highly inappropriate material have been found in areas accessed by young people. It is clear that young people have been able to access pornography although it is not clear how many young people have been involved. In another case, insufficiently secure storage of a broken pool cue and inadequate searching resulted in a young person being

able to remove the item from a sterile area undetected, taking it from the living unit to the gym, and attempting to assault another young person with it. This could have had led to significant harm.

10. Random searching of staff lacks focus and rigour. Random searching takes place and records are kept, but there is no tracking or monitoring to ensure the system covers all staff fairly and is not unnecessarily or disproportionately targeting individuals. Custody officers are randomly selected to undertake searching. This may involve searching senior managers without always having the supervision and oversight of the security manager or other appropriate senior officer. It is questionable whether junior members of staff feel sufficiently confident to robustly search those who are more senior.
11. Although contingency plans are in place for security and safety matters, live and desktop exercises have not taken place recently. The head of security could not confirm when the last test or review of these plans was undertaken. Therefore the effectiveness of these plans is not being tested to ensure they are fit for purpose.
12. The security intelligence reporting system (SIRS) is intended to allow staff members to immediately report any concern to a senior manager that might affect the security and safety of people in the centre. Current arrangements mean that staff use 'loose-leaf' paper templates to report concerns. This system is not 'tamper-proof' meaning there is no assurance that all matters come to the attention of a sufficiently senior manager and that all are actioned. Although SIRS are discussed at morning briefings, they are considered on a case by case basis and there is no analysis of SIRS to identify any trends, themes or patterns that require wider or strategic actions. This shortfall was identified at the last inspection but has not been addressed. This was also a recommendation in another very recent inspection of a G4S STC. It would have been expected that recommendations in one setting would have been considered in other as a matter of course.
13. The room used for searching young people is stark and unwelcoming. Walls are largely bare. This is one of the first rooms/areas young people enter on admission to the centre and is unlikely to reduce anxiety. The toilet and light above it were out of action at the start of the inspection; these were repaired three days later.
14. The lack of closed-circuit television (CCTV) coverage in some parts of the centre including stairwells, kitchens and in the education block does not promote security or safeguarding. Some areas have limited coverage while others have no coverage at all. Young people have consistently reported feeling more vulnerable in parts of the centre not covered by CCTV. Its absence is also likely to increase the vulnerability felt by staff. This patchy coverage does not support improvement, such as learning from incidents. Many complaints raised by young people concern alleged incidents that have occurred in areas not covered by CCTV, raising additional complexities about establishing the facts of such matters.

15. Centre managers conducted a 'safe zones' survey in September 2015, which sought young people's views about how safe they feel in some areas of the centre. This survey reports that 86% of young people feel safe at the centre. However the survey does not ask about stairwells which do not have CCTV coverage and which are frequented by young people. In other surveys and conversations with young people they have expressed feeling unsafe in stairwells. The survey makes appropriate recommendations but its partial nature undermines the reassurance it gives about safety.
16. Young people's vulnerability is assessed on admission leading to the development of management plans for staff to follow. In our survey 85% of young people who responded said they felt safe on their first night. One young person said, 'When I first got here I didn't feel safe because I don't trust people, but after a week I felt okay, after I got used to the system.' Records indicate that no young people have required a 'suicide and self-harm' (SASH) log since June 2015.
17. Vulnerability plans, intended to manage lower level self-harm concerns, have been initiated on 59 occasions. Three recent vulnerability plans reviewed do not show an individualised approach to meeting young people's needs. They lack specificity and detail about what a young person could safely have in their room and what the rationale for each decision was. For example, plans stated 'as per regime' or 'as per incentive level' to specify what possessions a young person could keep. One young person's plan specified the need to remove the phone immediately after use so the cord could not be used as a ligature or to self-harm in some other way. However if this young person was on a high incentive level, which most young people are, they may have had access to a television, radio or other items that pose at least an equal risk. The records do not show that sufficient account was taken of all potential risk factors. Vulnerability plans are not specific enough to guide staff about how to keep young people safe.
18. The centre introduced a risk-led approach to searching practice in August 2015. This negates the previous standard use of dignity searches which involve young people removing their clothing. The standard search is now a pat down and use of an electronic wand unless any concerns or identified risks suggest a dignity or full search should be carried out. In our survey, all young people felt they were treated with respect when searched and 88% said that staff explained why when this took place. Centre records indicate eight full searches have taken place since August 2015. Full searches have the added requirement that young people must open their dressing gown without any clothing underneath to show staff they are not concealing any prohibited items. YJB records for the same period indicate that 30 full searches, which includes the centre's full and dignity searches, have taken place. Even taking account of different categorisations, there is a discrepancy between the figures. This raises a concern about the validity of data kept and provided to inspectors. Of the centre's eight full search records, two did not contain a duty director's authorisation as required by the centre's procedures, and two indicate they were carried out by one staff member, which is not safe practice. 24 dignity searches were carried out in the

same period. Records do not always include sufficiently detailed rationales. For example, rationales seen included 'new admission', 'meeting with solicitor', and 'previous history' as the totality of justification for dignity searches. Both full and dignity search forms do not always note the gender of staff carrying these out.

19. Use of handcuffs for young people going out on 'mobility', that is, leaving the centre for some reason, is subject to a risk assessment with a recorded rationale. Some running records of events that occur during mobility are not sufficiently detailed to show whether the plan for the use of handcuffs was followed; for example, whether handcuffs were removed when the young person was having a consultation or examination with a medical professional. There is no evidence of quality assurance of records of handcuff use by centre managers.
20. All young people who completed our survey stated they were well looked after by staff on their journey to the centre. Centre managers told us that on most occasions, appropriate vehicles are used to transport young people. On the few occasions when inappropriate vehicles had been used these incidents were appropriately reported to the YJB as the commissioner. Written records within the centre were not available to inspectors to confirm transport arrangements.

Promoting positive behaviour	Inadequate
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21. There are serious and widespread failings and inspectors are concerned about their impact on outcomes for the young people living at the centre. Behaviour management across the centre has deteriorated significantly since the previous inspection. Rewards and sanctions are implemented inconsistently, levels of violence are high, particularly against staff and oversight of the use of force and restraint is poor. Inspectors also found evidence of under-recording of violent incidents against both young people and staff. During the inspection we observed many examples of poor behaviour from young people that was not adequately challenged by staff.
22. The incentives scheme has the potential to be a positive motivational tool but it is not being applied properly. Young people's behaviour is assessed in all areas of the centre and points are awarded (from nought for non-compliance to four for outstanding behaviour). Incentive levels are reviewed weekly by averaging out the points awarded during the previous seven days. It is appropriate that points gained in education carry a higher weighting than other areas and also that young people on the higher levels of the scheme have to resolve their mixing issues and participate in group activities including communal dining. It is also positive that new admissions now enter the scheme at the highest level so they can immediately experience the benefits of behaving well. However not all the young people believe the incentive and sanctions schemes are applied fairly or can make the link between poor/good behaviour. In interviews and informal conversations young people told inspectors that they were not always told why they were being deducted points, particularly in education. A significant number said that 'kicking off' was a more effective way of getting what they want than

by asking staff or behaving well. Many young people had access to incentives they had not earned, for example, being allowed to watch television on their units when they should be undertaking school work.

23. The individual support plans which are developed for the few young people who would otherwise spend long periods on the lowest level of the scheme are not being well managed or meeting their intended aims. These plans should provide young people with rewards for short periods of positive behaviour so that they understand clearly the type of behaviour which attracts a reward. The scheme is undermined by poor implementation by staff. Of the plans reviewed, entries by staff were inconsistent with one plan having no entries made for days and one young person being taken off a plan despite continuing poor behaviour.
24. Staff have access to a range of appropriate sanctions that differentiate between low level and more serious misbehaviour. Serious misbehaviour can result in the loss of all privileges for up to 72 hours but the procedure includes a review after 24 hours to see if a reduction is appropriate. This is based on the young person's subsequent good behaviour, mediation or remorse. In the majority of cases seen there was no evidence of a review at the 24 hour stage.
25. As with incentives, the application of sanctions by staff require significant improvement. We saw examples of relatively minor infringements attracting the same punishment as serious incidents, including acts of violence. In addition, staff and young people said that some staff do not always implement sanctions in order to have an 'easy shift'.
26. The sanctions' arrangements are too de-motivating for young people. In most cases young people are demoted to the lowest level of the incentives scheme after the completion of a sanction. While this is appropriate in some cases, in others it is unnecessary and not proportionate. Residential staff said that they feel unsupported by leaders and managers in the consistent and fair implementation of both incentives and sanctions.
27. Reported levels of violence are high, and exceptionally high against staff, resulting in an increasing number of incidents where force has been used by staff. There are significantly fewer young people living in the centre than at the time of the last inspection making direct comparisons difficult. However, in the six months prior to this inspection the centre reported 31 assaults on young people by other young people and 13 fights. Over the same period there were 51 reported assaults against staff. The increasing levels of violence against staff is particularly concerning with 27 assaults reported in the two months prior to the inspection. There is no evidence of any attempts or a strategic approach to reducing the violence in the centre.
28. There is under-reporting of violent incidents. Some fights are reported as 'altercations', which are less serious, or a description of events is recorded, rather than being categorised as assaults. This is unacceptable and, as a consequence, neither the centre managers nor the YJB can be sure they have an accurate understanding of the levels or trends of violence in the centre. This

under-reporting and incorrect categorisation of serious incidents has not been noted and challenged by the YJB monitor despite the monitor having reviewed CCTV footage of at least one of the incidents.

29. It is a significant failing that the centre was unable to provide inspectors with accurate records of the number of young people requiring medical treatment as a result of assaults or fights. Documentation provided showed that no young person required hospital treatment because of an assault or fight but healthcare records clearly contradict this. As a consequence, inspectors are unable to comment on the figures in relation to injuries sustained but are clear that governance of this is inadequate.
30. Use of force and restraint are increasing and the number of such incidents in the month before the inspection was higher than at any point in the previous 12 months. Many incidents over the previous two months are accounted for by two young people who have been involved in multiple incidents. However, this does not account for all of the increase which is a consequence of more widespread higher levels of violence against both young people and staff.
31. The centre has implemented body worn video cameras, which can capture good quality video and audio inputs, and these are used in most incidents. Staff are not using them effectively during all incidents so some footage is unclear and muffled. Some staff do not turn on the cameras early enough or at all. There are insufficient cameras available.
32. Inspectors reviewed documentation, CCTV and body worn video camera footage for 20 incidents including all incidents in the month before the inspection as well as specific incidents where complaints had been made. In the majority of incidents staff use force appropriately to prevent injury to young people and staff. However, the footage contains many examples of poor incident management and a lack of confidence in applying the approved minimising and managing physical restraint (MMPR) techniques. This leads to unnecessarily long restraints that put young people and staff at risk. Despite these failings, most incidents are low level and short in duration.
33. It is inappropriate that pain-inducing techniques have been used twice since the last inspection. This has been made worse by the misapplication of techniques by inexperienced staff.
34. Many records of incidents of the use of force are unsatisfactory. Many are incomplete and there is little evidence that key parts of the process including debriefing sessions with staff and young people take place. Every incident where force is used should be reported the same day and staff are required to fill in documentation before the end of their shift. However, this is not being enforced and we found one incident of use of force that went unreported for two weeks. These shortfalls may have occurred as a result of a shortage of staff who are responsible for conducting debriefings and overseeing the recording of incidents, namely the duty operations managers and MMPR Coordinators.

35. Governance and oversight of use of force is significantly worse than at the last inspection. The lack of MMPR coordinators means that some incidents are not reviewed before the weekly use of force meetings. The attendance at both weekly and monthly use of force meetings is poor. The impact of these failings is that the quality assurance and oversight systems have not identified or addressed many of the shortcomings seen by inspectors.
36. Examples were seen where poor behaviour is not managed well, including one occasion where a young person was able to prevent a whole unit attending education through a passive protest. Inspectors witnessed other repeated examples of offensive language going unchallenged by staff.
37. The recorded use of single separation is not excessive with around two incidents a month, but some records are inaccurate and note shorter separations than have actually taken place.

The care of young people	Inadequate
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38. With a few exceptions the approach taken to the care of young people is reactive rather than proactive. There is no evidence of young people being kept informed about the changes in centre management. Several young people approached inspectors with concerns and questions about what they think may happen. Some are fearful and have concerns about their futures that could be allayed easily. Although arrangements about how the centre will be run when the National Offender Management Service (NOMS) assumes responsibility on 1 July 2016 is still unclear to current staff, more could have been done to reassure the young people living in the centre by G4S staff and managers, and the YJB.
39. Residential accommodation is showing signs of wear and tear with damaged furniture on some residential units. There is a clear lack of investment in maintaining the fabric of the centre in areas relevant to the general care of young people. For example, the degeneration of locks on doors making them difficult to lock and unlock. This has potential health and safety implications for staff and young people.
40. Some units are not homely, have bare walls, dirty floors and lack anything to personalise the units. Procedures set out a clear expectation that young people will have daily chores to complete on their units but despite this, there are variations in standards of cleanliness. Unit staff are not ensuring that young people complete their chores including keeping their rooms tidy, and some rooms have been left in a poor state when young people leave the unit to go to education. The weekly 'sparkle' competition provides an incentive for those who do take a pride in their rooms, and some are kept very clean and tidy.
41. Complaints arrangements are not achieving their stated aims. It is positive that units have blank complaints forms which young people can access without having to ask staff. However, the complaints boxes are opened by residential

managers and then investigated by the relevant unit manager. It is not clear that these arrangements provide young people with confidence in impartiality. The quality of investigations is inconsistent and some are poor. The written responses to young people do not provide sufficient information that the complaint has been fully investigated and an appropriate outcome has been achieved. For example, one young person complained their lunch was not available when they returned from court. The response advised them that their lunch had been disposed of for health and safety reasons after 'sitting out' for four hours. There was no explanation of why or how the lunch was left 'sitting out' prior to the young person's return. In another instance, a young person who complained about not advancing up the incentive levels was advised this was due to his failure to complete key work packs. The formal response did not set out what steps would be taken to enable him to complete the packs in the future, nor did it consider whether unit staff shared any responsibility for the lack of completion.

42. Young people spoken to know how to make a complaint and no-one expressed any concerns about the consequences of doing so. Young people are given information about the appeal process but this is ineffectual. Some young people told centre managers they were not satisfied with how their complaint was dealt with but none appealed.
43. In 2015, 107 complaints were submitted by young people. Up to the time of this inspection, 96 have been submitted in 2016. This suggests an increase in complaints, with a significantly higher rate per young person when taking into account the smaller population of young people compared with the population during 2015. Centre managers were not aware of this increase from their own monitoring, and the reasons for the increase have not been explored which is a shortfall.
44. Grumbles books, designed to enable young people to raise low-level issues and concerns on each unit, are not consistently understood or effective. Some young people are positive about the grumbles system and use it, saying it leads to action. In contrast, others did not know what grumbles books were.
45. It is disappointing in our survey that only 11% of young people said they would turn to an advocate if they had a problem. Information about the advocates is visible on most residential units, but is not kept up-to-date with photos of the advocates. Most young people we asked told us they knew who the advocates were and saw them around the centre and on the units, but the majority said they had not used them. Inspectors were advised by the advocacy service that it had increased the presence of advocates following the screening of the BBC documentary on 11 January and received more referrals for individual young people from centre managers and the YJB monitor during the following months. Despite this, young people spoken to could not say what added value an advocate has, or could have, for them.
46. In our survey 97% of young people reported feeling respected by staff but inspectors are not satisfied that this translates into good quality care. This was

because young people spoken to were positive about many aspects of their lives and care in the centre, but not all of this was reassuring. For example, some young people explained that they liked certain members of staff because they were overly lenient with them. Other young people expressed concern about how they are treated by some staff, strongly implying favouritism, inconsistency and a lack of fairness. Inspectors observed generally appropriate interactions between staff and young people but some poor behaviour was not addressed. Some young people said that, for example, their swearing goes unchallenged and thought that this was right because 'we are not kids anymore'. In some cases boundaries of behaviour between staff and young people are inappropriate with too much familiarity.

47. Young people have their key work needs identified through their sentence planning and reviewing processes. Their progress through assigned key work packs is monitored by their caseworker. Index offences are appropriately used as the basis for identifying key work packs that are most relevant and useful to individual young people.
48. Not all young people know who their keyworker is, despite keyworker names being recorded on their door card. A few said they did not have key work sessions although records show these had occurred. It is possible that young people do not always recognise key work sessions as different to other forms of interaction with unit staff. This is because the quality of key work sessions is variable. Some sessions recorded as key work are more of a general conversation and have little relevance to the young person's offending, plans for the future or current concerns. Some of the records show keyworkers changing from session to session, while others have more consistency. One young person's key work pack could not be completed in the way it was designed to be because it lacked the picture cards which are essential prompts for the discussion in each session. Unit staff working through the pack with this young person did their best to compensate for the lack of picture cards. However it is not clear why this shortfall, which was clearly recorded for each session, was not resolved by the caseworker responsible for checking pack completion.
49. The value and importance of key work packs is undermined on some units. On these units, inspectors found key work packs kept in a haphazard fashion, pages detached, and no sense of importance given to them; this contrasts with other units where packs are kept carefully and neatly. These practices give clear and different messages to young people about the value of key work sessions.
50. There are appropriate meetings in place to ensure that relevant information about young people is shared and acted on. Weekly meetings review individual young people's progress and consider plans for their ongoing care. Each young person also has a remand or sentence training plan based on their individual needs. These plans are discussed and updated at regular formal reviews involving centre staff, external professionals involved in their management in the community, family members/carers and the young person. Allocated case workers are responsible for convening reviews, and act as a conduit between the young person, people outside the centre involved in their care, and their

keyworker on the residential unit. This is a good arrangement that provides continuity. However, its impact is hampered because, apart from caseworkers, young people rarely have the same centre attendees for consecutive reviews.

51. 'Xchange' meetings, designed to enable young people to put forward their ideas about the centre, are held regularly but minutes give little assurance that anything changes as a result. Minutes of meetings are not displayed on residential units and the Xchange notice board in the education building is months out-of-date. This suggests to young people that little importance is given to the meetings.
52. It is not clear who has lead responsibility for the promotion of diversity within the centre and minutes of the diversity meetings do not demonstrate a strategic approach. Young people do not always attend these meetings and the use of data to identify any inequitable outcomes for young people from different minority groups is limited. Plans to identify and adopt good practice in this area from other places of juvenile custody have not progressed because of other changes in the centre. The management of discrimination incident report forms is weak. Two have been submitted in 2016, both by staff. It is not clear how young people would know that they could raise complaints of discrimination in this way as blank forms are not available to them. There is also no evidence that any attempts have been made to inform young people about the existence of the procedure. Inspectors heard young people make homophobic comments during the inspection that were not challenged by staff.
53. Despite the lack of strategic direction, there is generally a good focus on the individual needs of young people. These needs are identified on arrival and kept under review during young people's time at the centre. During the inspection we found good support in place for a young person for whom English is not their first language, and good support for a young person to maintain phone contact with his family overseas.
54. Arrangements for faith observance are appropriate with group worship and one-to-one support available. Regular support for the faiths mostly commonly represented within the centre's population is provided and religious leaders of other faiths can be secured when needed. There are appropriate processes in place to support young people who want to change their faith. Religious festivals are celebrated appropriately and young people who are observing Ramadan are supported. It is disappointing to see that the previously attractive memorial garden is in a poor condition. Faith leaders are talked about positively by young people, although they do not have a dedicated multi-faith area in the centre to work from and in which to see young people in private.
55. Monitoring of young people who do not receive visits is in place and is used to identify those who would benefit from the volunteer scheme. A volunteer visitors' scheme is organised by the chaplain for young people who do not receive any other visits. Visiting arrangements are in place but require improving. Current arrangements whereby the length of a visit is determined by how far the visitors have travelled is inappropriate: all young people should be able to spend

sufficient time with their family regardless of the distance family members have travelled. Proper use is made of engagement visits to promote family ties. A flat is available for families who need to stay overnight in order to visit, but it has only been used once in 2016. In addition, the centre pays for taxis for visitors travelling from the nearest train station. The centre does not utilise alternative means of contact between young people and their families, such as those that social media software can provide at low or no cost and this is a missed opportunity to promote positive contact. Young people who are parents are supported to have contact with their children, where appropriate.

56. Contact with friends and family members is further promoted by young people being able to send three free letters each week and make phone calls to authorised recipients in private in their rooms. They can make one 10-minute phone call each day free of charge, but they are charged for minutes that exceed the 10 permitted. Inspectors believe that staff should actively manage call length and not charge young people for extra time. There are no limits on the number of incoming calls a young person can receive at suitable times.
57. Useful information about the centre is available for new arrivals and their parents/carers. As has been noted at previous inspections, some of the language in the young people's guide is too complicated, is not child-friendly and requires amending. Information about peer mentors is on display around the centre, and they are used appropriately to help settle in new arrivals.

The achievement of young people	Requires improvement
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58. Many young people make good gains in their knowledge, skills and confidence and develop a positive attitude to education. However, a significant minority fail to make the progress they are capable of and work below their potential. In the best instances, they learn to manage relationships with adults and how to conduct themselves appropriately in vocational workshops. Most achieve relevant accreditation. Young people with poor basic skills, and who often have a fragmented track record of education, make swift progress. For example, one young person mastered a good standard of English having arrived with none. Despite the offer of enhanced groups for the more able, these young people, and those of middle ability, are not sufficiently challenged by the education programme. They sometimes repeat work, or the courses fail to stretch them or sustain their interest. This is particularly the case for those serving longer sentences.
59. There are clearly communicated and shared expectations across the centre about the value of education. Leaders and managers are however failing to apply a suitably critical eye in identifying weaknesses and the key actions needed to bring about improvements in education. The expertise which exists within the staff team is not being drawn on and young people's often perceptive views about education are not being sufficiently facilitated and heard. At the request of education managers, recent visits by school improvement advisers from Kent

County Council have introduced external scrutiny. There are, however, no external professional advisory arrangements to provide support and challenge to managers and this is a gap.

60. The quality of teaching is good but with a greater proportion of poorer classroom practice than has been identified by managers. The better teaching is lively and includes a variety of activities. These teachers pose well-informed and challenging questions, suited to the needs of the young people. They manage classroom and workshop behaviour with a light touch which ensures that potential behavioural problems are de-escalated. As a result, young people are engaged, keen to express their views and able to learn. Teachers are becoming increasingly confident in the use of interactive whiteboards which enlivens learning.
61. There are too many weaknesses in teaching overall. In such instances teaching fails to engage young people's interest at the start of lessons and worksheets are too readily used. Teachers do not provide suitably clear explanations, fail to check whether young people understand, and do not adapt their approaches to accommodate potentially disruptive behaviour. As a result young people are, at times, half-hearted and seldom complete their work. Teachers willingly teach a second or even third subject but are not being provided with the levels of professional support needed to do so with confidence.
62. Attendance during the inspection period was uncharacteristically erratic due to timetable modifications, but over time it is good. The few young people that fail to attend education and remain on their living units do so for well-founded security reasons. Steps are taken to try and reintegrate them back into education as soon as possible. They are provided with work packs and visits by learning support assistants but this approach does not provide education of sufficient value. Unit staff often lack the awareness and skills needed to support and encourage learning.
63. Without exception, teachers are skilled in conducting one-to-one sessions. Young people are comfortable in seeking help and make good progress during these sessions. Learning support is responsive and improving. Information about young people with designated special educational needs is provided to teachers to assist them in their classroom planning. Staff make significant efforts to liaise with young people's previous schools to retrieve information needed.
64. The curriculum is appropriate and kept under review. It includes English, mathematics, science, leisure and tourism, physical education and a weekly tutorial. The department has specialists in English and science but the lack of a mathematics specialist teacher has created a significant gap in young people's education. Recent appointments in mathematics and in performing arts are positive developments and will bolster the staff team. Given the education department's dependency on non-specialist staff, the need to maintain and properly deploy a core of experienced teachers is of critical importance.

65. A recently introduced 'pathways' curriculum initiative, aimed at broadening young people's access to vocational programmes has had unintended consequences. Its execution created instability among young people and staff because some of the practicalities had not been sufficiently thought through by managers. Timetabling amendments were introduced during the week of the inspection in an attempt to improve matters. Despite this rocky start, the ambition to increase access to vocational programmes is sound. Vocational training provided by the on-site catering company is good and enables a few young people to gain the skills and discipline needed for the workplace.
66. There are weaknesses in target setting and in monitoring young people's academic progress. The use of 'reading ages' does not identify young people's attainment levels, the progress they make, and what they have to do to improve. This impedes teachers' ability to plan lessons and predict young people's targets. Young people have too little understanding of the progress they are making or their academic levels.
67. As a team, staff know the young people well and use this knowledge to support their personal and social development. Education staff work effectively as part of an internal multidisciplinary team which aids young people's overall progress and good levels of attendance.
68. Arrangements are in place through the Medway Youth Trust (MYT) to provide young people with information, advice and guidance for their move into education, employment or training on release. Support sessions are programmed towards the end of a young person's sentence period. However, the impact of the MYT contract is unclear as records are poor. It is unclear how the 2015-16 objective of 100% of young people making positive progress is being measured.
69. Teachers and support staff attend internal generic training on topics such as security, restraint and radicalisation. Arrangements to help them keep abreast of developments and up-to-date in their respective specialist areas are too ad hoc. A few have taken the initiative to identify and pursue continuing professional development opportunities linked with external networks such as in hair and beauty and special education. Teachers benefit accordingly. This requires expanding to include more education staff.
70. The enrichment programme is varied and good. Some young people are able to undertake the Duke of Edinburgh's award and there is a fruitful partnership with a local school where its students assist with a reading club within the centre. Occasionally, young people are supported through mobility arrangements to attend the local further education college to advance their studies. These initiatives are valuable, add much to young people's education and are sought after by them. Education staff are confident that there is scope for more such opportunities. Options to introduce risk-assessed temporary release for young people to study externally or attend work experience are not routinely considered.

The resettlement of young people	Good
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71. Resettlement is considered appropriately at the point of admission. A range of processes are in place to ensure that young people's resettlement plans are frequently reviewed and updated.
72. Good oversight is maintained by the casework and transitions manager who understand the inherent challenges that young people face when moving on from the centre. The sharp focus from the small team of staff ensures that young people's resettlement plans remain current and purposeful. This means planning for release or transfer is considered from the point of admission and remains a priority throughout the young person's time at the centre.
73. Detailed training plans outline the individual needs of young people and how they should be met by the centre and external agencies. They take account of offending behaviour, family situations, levels of risk, and vulnerability and emotional needs. All these are particularly relevant when considering future accommodation, education and training options. Young people's plans are based on thorough assessments and this ensures that their future plans take account of the full suite of known risks and needs, assisting planning for discharge, whether this be back into the community or transfer to another secure facility.
74. Sentence planning and reviewing is undertaken regularly and thoroughly; it allows for each young person to have their progress toward release or transfer routinely evaluated. The regular reviews enable young people and other interested parties to link sentence planning with post-release provision, notably accommodation, education, training or employment. Where young people are looked after statutory reviews are held. Young people's needs remain paramount during reviews and they are encouraged to participate. When they attend they are given good support and provided with ample opportunities to express their views. As a result, they have the opportunity to influence their plans which increases the likelihood of them achieving a successful transition.
75. Effective systems are in place that enable staff to identify and respond to potential problems in transition planning. Information relating to young people's progress and the performance of external agencies in identifying post-release provision, such as accommodation or education, is frequently evaluated using a traffic light system. Any shortfalls are discussed at the weekly resettlement meeting and actions are triggered to proactively address these. This may include amending the interventions programme to address specific needs such as life-skills training, increasing opportunities for mobility, or challenging external agencies.
76. Centre staff make clear from the outset the expectations they have of external social workers and others with a legitimate interest in the care and welfare of young people at the centre. When necessary there is proportionate challenge of partner agencies to ensure they meet their statutory duties in providing the

services young people need when they return to the community. This includes challenging a lack of education or training placements, but the majority of concerns continue to be in relation to delays in identifying suitable accommodation. Centre staff not only challenge agencies but also escalate concerns within different authorities if other avenues of raising concerns have proved fruitless. This has ensured that no young people have been released without accommodation being identified for them.

77. Young people's risks are identified at an early stage. Case managers liaise with external youth offending teams (YOTs) and social workers to ensure that Multi-Agency Public Protection Arrangements (MAPPA) are in place for high risk young people who meet the MAPPA threshold. Communication is good and partner agencies are kept informed of the relevant aspects of young people's behaviour in the centre. This includes, for example, information about the young person's engagement in specific intervention programmes and any attitudinal changes. Staff are diligent in their efforts to ensure these matters are taken into account when planning for release and challenge those responsible for MAPPA arrangements if centre staff do not think arrangements are sufficiently robust. On one occasion centre staff believed it was inappropriate that a young person was going to be discharged and placed with other high-risk individuals in the community. The challenge was forceful and persuasive, based on evidence, and resulted in an alternative, more suitable placement being found.
78. In the last three months, the centre has secured the services of a national voluntary sector organisation, NACRO, to provide resettlement brokerage. NACRO are providing vocational tutors as well as direct support for young people, such as helping them prepare a curriculum vitae or construct a letter of disclosure for future employers. They are playing an increasing role in sourcing training and employment opportunities for young people, both during and after their stay at the centre. The organisation's pre-existing links in the wider community are being used effectively for the purposes of resettlement. For example, sourcing accommodation on behalf of a local authority, providing training opportunities at one of their centres, and signposting young people to other training and employment providers.
79. Young people are encouraged and supported to engage in a range of purposeful offending behaviour programmes. These include programmes relating to their index offences as well as a range of general learning opportunities such as victim awareness, gang association, child sexual exploitation, relationships and 'preparing for my future - moving on'. Caseworkers are responsible for overseeing the completion of targets and referring young people to the specialist intervention team and/or health team, when required. For instance, young people convicted of sexual offences will be referred to the psychology team who undertake the relevant assessments and interventions that are designed to tackle that behaviour. These interventions are often coupled with the 'active-8' programme. This enables young people to participate in individual and group work which challenges pro-offending attitudes. Overall, young people have many opportunities to consider why they offend and how their behaviour impacts on

themselves and others. Young people are encouraged to reflect on their learning and show positive signs of engagement and understanding. One young person said, 'I have covered loads since I have been here and I am in a much better place than I was. I am confident that I will make better choices when I leave.'

80. The quality of key work records is mixed. Some show how staff use their skills and positive relationships to engage young people in meaningful discussions about past experiences, current circumstances and future plans. Other records seen were of poor quality and written text lacked any purpose or focus. In some cases the records indicated a lack of understanding of the key work role, despite the fact that all staff have received training on this. Centre managers have recognised this shortfall and quality assurance processes have recently been introduced but are not yet having the desired impact.
81. The casework and transitions team work closely with education staff to identify and plan suitable education, training and employment options. They make appropriate use of risk-assessed and approved mobility to offer young people meaningful and worthwhile activities outside of the centre. Examples of recent mobility include college, work experience, job and education interviews, shopping and visiting future places to live. These opportunities, combined with a purposeful enrichment programme, helps young people to develop and improve their personal, social and vocational skills and this, in turn, helps them to prepare for their return to the community.
82. The centre engages fully and professionally with all relevant parties in assisting the transition of young people back to their communities. Continuous liaison with parents/carers, social workers, and YOTs ensures open communication and joint working is maintained throughout the young person's time at the centre and after their release. Links with relevant consortia ensure community-based resources are matched to individual needs and are put in place prior to release. Centre staff periodically check on young people's progress after discharge from the centre to establish how they are doing with respect to their accommodation, health, education, cessation of offending, and so on. This is to help assess the impact of the centre's resettlement activity. The most recent data suggests that re-offending rates are below the national average.
83. The importance of maintaining quality family relationships through positive contact is fully recognised and promoted by staff. Young people can make telephone calls and face to face contact arrangements are facilitated in suitable surroundings. The engage visit scheme means that special arrangements can be made for family visits where necessary. For example, facilitating lunchtime visits for parents who cannot visit at the weekend or providing private space where they can spend quality time with their child. The frequency and quality of contact is monitored to ensure it is safe and productive. A number of staff have recently completed family mediation training. While it is too early to see the impact of this, the intention is to improve the quality of support they can provide to parents when helping them prepare for their child's return home, reducing the likelihood of them reoffending.

The health of young people	Good
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84. Health services at the centre have undergone some very positive developments since the last inspection. Services have been re-commissioned and the current health provision is based on an updated health needs assessment. This has resulted in a greater focus on young people's emotional and mental health, which reflects the needs and inherent risks of this population. Electronic patient records and increased pharmacy support have been established, which supports safer and more effective healthcare delivery. Health staff recruitment is ongoing, with a number of new staff awaiting vetting. Senior staff have a clear vision for the quality of the workforce they need to provide an effective service to young people.
85. Feedback from young people about how they are supported to be healthy is positive. In our survey in April 2016 75% of respondents rated health services as good, which was a significant improvement on 43% in 2014. The percentage of young people who state they have unmet health needs had reduced significantly from 2014, from 40% to 15%. Young people told us that they have good access to health professionals and that they feel that most health staff understand their individual needs. Almost all young people who responded to the health provider's own survey said that nurses respect their privacy. We observed sensitive and productive interactions between young people and health staff, who proactively involve them in decisions about their care.
86. Care planning and reviewing are evident, and this promotes independence and supports health improvement and cultural beliefs. Nurses are allocated to individual residential units which enables them to develop an in-depth understanding of the unit, its functioning and the young people living on it. Not all young people are aware of their 'unit' nurse.
87. Young people have access to a range of age-appropriate health services. Suitably skilled and child-focused healthcare staff complete assessments promptly, using recognised templates that indicate links to offending behaviour. Information is routinely sought from external agencies and families to inform the care and treatment a young person receives. Health needs such as sexual health or immunisations are identified and addressed quickly.
88. The primary care team is responsive to young people's needs and waiting times are minimal. Medicines are supplied promptly and, subject to risk assessment, young people are enabled to hold their own medicine supplies. Plans are in place to further develop some services, including smoking cessation and sexual health. Records show that pregnant girls are well supported by health staff and visiting midwives. Those young people who require it receive prompt treatment from a dentist and optician. However, young people do not currently have access to physiotherapy and podiatry services. Inspectors have asked NHS commissioners to address these shortfalls.

89. Access by healthcare staff to young people to enable staff to deliver health interventions has improved following recent contractual changes. Suitable confidential space remains limited and constrains the timing and availability of some interventions. However, the multi-disciplinary education, resettlement and interventions meeting ensures that health and centre staff maintain a coordinated approach to working with young people.
90. Partnership working with some centre staff can be challenging. Healthcare staff do not always receive the support they require to manage young people's behaviour in a way that optimises the effectiveness of care and treatment. Conversely, we saw examples of very effective partnership working. The nursing team works well with visiting midwives and experienced GPs to ensure that young people receive the care and treatment they require.
91. The psychology-led health and wellbeing service is impressive and, when fully established, will include a range of therapies to support health improvement, education and promotion. There is good access to a specialist child and adolescent mental health services (CAMHS) psychiatrist who provides prompt treatment and clinical oversight. Currently, the team delivers psychological therapies and behaviour programmes to effectively address young people's risky behaviour and their risk of re-offending. Substance misuse services are currently limited to one-to-one interventions delivered by an experienced practitioner to a caseload of eight young people. However, plans are well advanced to extend this service by the imminent appointment of a nurse and a further practitioner.
92. There is strong clinical leadership and a rich skill-mix within the primary care, substance misuse and health and wellbeing teams, designed to meet young people's needs. Nursing vacancies are regularly filled by competent temporary staff who know the centre well and offer good continuity of care. However, current staffing arrangements, particularly in primary nursing and substance misuse, may not be sufficient to meet the needs of a larger number of young people. Health staff do not attend all key multi-disciplinary meetings, including the healthy lifestyles and use of force meetings. This limits their ability to influence the care and support that young people receive.
93. Health promotion is managed through the multi-disciplinary healthy lifestyles group, where all aspects of healthy living are discussed. This supports a coordinated approach across the centre and offers opportunities to jointly implement health initiatives, such as the successful health fair in November 2015.
94. Young people receive a balanced diet and are helped to improve their diet and achieve their cultural dietary needs. We saw nine young people observing Ramadan and receiving prepared meals and additional food packs to ensure that their intake was sufficient. Menus are varied and changed in response to young people's feedback and national promotions. Portions are generous and meals are well-presented and age appropriate. Drinks and fresh fruit are available throughout the day.

- 95. Healthcare governance systems are developing. However, while appropriate systems are in place for monitoring the quality and safety of the service, they are not always used effectively and some require further development. For example, while staff training is robustly recorded and monitored, the recording of staff supervision is not so effective. Some regular medical equipment checks are not robustly monitored to ensure that they are completed adequately.
- 96. The implementation of electronic patient records and a review of attendance at multi-disciplinary meetings have improved the safety and appropriateness of confidential information sharing. Inspectors raised with the healthcare provider the risk of discrimination against young people who make complaints because details of their complaints are recorded in patient records. However, other records showed that responses to complaints about health services are timely and effectively address the issues raised.
- 97. Incident reporting and risk management is effective and discussed with staff. Staff demonstrate a good awareness of their safeguarding responsibilities and most receive the supervision they require. In January 2016 the health and wellbeing team completed a survey of young people which was being used to inform service development well at the time of the inspection.

The effectiveness of leaders and managers	Inadequate
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- 98. Since the last inspection the centre has experienced changes in senior leadership, contributing to wide instability across the workforce.
- 99. Sharply contrasting high level decisions made by the provider G4S Care and Justice Services Limited has resulted in turbulence in the running of the centre at all levels. In particular, the decision by G4S to bid for a further contract to run the centre in 2015 which was successful, followed by a decision to withdraw from providing the service announced in March 2016.
- 100. The sustained interest from the media, senior politicians, government offices and other parties, subsequent to the airing of an undercover investigative report screened by BBC Panorama on 11 January 2016, has further destabilised the centre. There was protracted uncertainty about leadership of the centre after the BBC programme which reduced confidence in the judgement of the provider and the YJB as the commissioner. Rectifying this, particularly in terms of maintaining acceptable staff behaviour and morale, requires robust and strong leadership from the current provider and this has not occurred.
- 101. Furthermore, the close proximity of contract changeover and the strategic decision by G4S to withdraw has led to a disjointed approach to improving the centre. The improvement plan drawn up by G4S after the publication of the Medway Improvement Board report and recommendations, is partial and insufficient to turn the centre around. Moreover, it cannot be implemented by

the current provider properly as many of the actions and targets are longer-term. These therefore become the responsibility of the new provider, NOMS, when management of the centre transfers on 1 July 2016.

102. Some transition arrangements are in place and NOMS staff were on-site at the time of the inspection. However the handover period of only three weeks where both G4S staff and NOMs are on-site in the centre is very short and sets a significant challenge for the future.
103. The centre's current leadership team are not sufficiently well-informed about their areas of responsibility to provide assurance that they are all capable of driving progress forward. For example, the responsible senior manager is unaware of how many, and how often, staff have been subject to random searches on entry to the centre. Exercises to test, rectify and provide assurance about safety and security issues have not been undertaken. Inspectors would expect senior leaders to have an up-to-date and accurate knowledge of the current pattern and trends over time regarding the levels of violence within the centre but this was not apparent.
104. Some key data supplied to inspectors was inaccurate, out-of-date, or unclear. One example of this was the number of young people who have attended hospital externally for treatment for any reason. This was reported as none during the time period specified but inspectors found two examples where young people had been to hospital. This type of shortfall is replicated across all aspects of recording in the centre to differing degrees. The infrastructure of sufficient monitoring, oversight and recording has significantly broken down. It is clear that there is a strong sense of malaise across the centre. Staff and middle managers report feeling a lack of leadership and have low or no confidence in most senior managers.
105. Governance and oversight of key issues such as the use of force is inadequate. Instances of assault have been incorrectly categorised as 'altercations', implying less seriousness, and this has not been identified through the centre's and the YJB's existing quality assurance processes.
106. Oversight by the YJB is inconsistent and weak. There have been changes of YJB monitors on-site, with different monitors attending subsequent meetings within the centre. This lack of continuity contributes to poor oversight of activity and progress. It also contributes to insufficient challenge, for example, the YJB has reviewed some of the incidents including those reported as 'altercations' but has not challenged incorrect categorisations.
107. NHS commissioners have been unable to establish effective strategic partnerships with the YJB and senior centre staff due a series of changes at this level and there is an absence of a productive partnership to drive improvement. This has significantly delayed the resolution of some operational issues, such as the provision of additional clinical space. However, NHS commissioners have already made contact with the incoming director who has expressed a commitment to partnership working and a joint strategic meeting is planned.

108. The senior leadership team has not been proactive regarding violence reduction in the centre. This is against a backdrop of the incidents of violence increasing despite a falling population of young people. Staff have experienced increased levels of assaults from young people and it is likely that this has contributed to the high attrition rate of staff, at approximately 67% over the last year.
109. The high turnover of staff who leave for other reasons, coupled with the increasing numbers of staff at different levels of seniority who have been suspended and/or arrested and/or dismissed as a consequence of the ongoing police investigation following the BBC documentary, means that the current workforce is significantly more inexperienced overall. Many positions of seniority have been vacated without notice for these reasons, creating difficulties in providing sufficient management oversight of a good enough standard.
110. Many staff spoken to show both enthusiasm and commitment to wanting to do a good job and provide good care for young people. However this is being seriously undermined by a toxic combination of experienced long-serving staff feeling beleaguered and tarnished by association with the revelations of institutional abuse revealed by the BBC programme coupled with many new inexperienced staff. Some staff are clearly devastated by the revelations and question whether they could have done anything differently. This self-reflection is a positive quality expressed by some staff spoken to. However there is too high a ratio of new and inexperienced staff who do not have enough good role models and leaders to help them mature and develop their skills.
111. Poor practice demonstrated by staff is not routinely and robustly followed up by managers to establish why they behaved as they did. Action is also not always taken to reduce the likelihood of repetition by way of further training, advice, or sanctions. This means that there have been missed opportunities to improve the overall standard of care provided to young people. For example, multiple breaches of minimum practice standards noted with respect to a relatively new and inexperienced member of staff was not sufficiently addressed by managers, nor was the refusal to sign the log of concerns, saying they were being scapegoated. There was no consideration of these previous issues when a subsequent event of poor searching led to a young person attempting to assault another young person with a concealed weapon.
112. The behaviour of staff seen by inspectors and reported by senior managers at the centre points towards too many being unclear and inconsistent in how they manage the complex behaviours of the young people. Boundaries of behaviour between staff and young people are inappropriate with some instances of too much familiarity. This is indicative of insufficient guidance and advice from those who supervise and manage them.
113. The training provided to staff is insufficient to meet the needs of their roles. Those in positions that include some supervisory or managerial functions do not have adequate training or support to execute these tasks to a sufficiently good standard. Many have been promoted internally relatively quickly in their careers. Supervision is of poor quality and insufficiently reflective. There is a thread of

insufficient and/or ineffective training for staff at all levels within the centre once they finish their induction training. Too much focus is placed on compliance with attending core training at the expense of assessing whether or not it is having the desired impact. Safeguarding training is minimal.

114. Safeguarding arrangements are not robust. Records of referrals to the local authority are incomplete and quality assurance is ineffective. This is particularly surprising and concerning as inspectors expected safeguarding arrangements to have received significant attention and strengthened oversight as a priority following the BBC documentary and subsequent investigations. Delays in referring concerns out to the local authority in a sample of recent referrals seen ranged from two to 13 days. This leaves young people in situations of potential risk, for example, a member of staff continuing to work shifts after a concern had been raised.
115. Inconsistent application of rewards and sanctions coupled with inadequate oversight and governance of these arrangements combines to result in weak management of behaviour. There are frequent instances where young people are allowed to misbehave and are not dealt with appropriately. It leads to too many young people expressing discontent at perceived unfairness and injustice in the imposition of sanctions, and also pleasure at receiving unearned rewards. This gives credence to their view of favouritism from some staff. It is likely that many staff 'give in' to young people's demands inappropriately because of a prevailing culture which is not strong enough to impose and maintain appropriate boundaries and rules. This has the opposite effect of helping young people to feel safe and secure; inspectors were struck by how many times we were told that 'the young people are running the place' and young people told inspectors that sometimes it was easier for them to get their own way if they 'kicked off'.
116. The building and environment is not being sufficiently well maintained. This is attributable to a combination of tasks that should be completed by the provider not being undertaken, such as good maintenance of the door locks, and staff not ensuring that young people complete their expected chores to maintain good standards on the living units. Items are left in places which could constitute risks such as in stairwells where they could be used as weapons. This is entirely avoidable.

About this inspection

This inspection was carried out in accordance with Rule 43 of the Secure Training Centre Rules (produced in compliance with Section 47 of the Prison Act 1952, as amended by Section 6(2) of the Criminal Justice and Public Order Act 1994), Section 80 of Children Act 1989. Her Majesty's Chief Inspector's power to inspect secure training centres is provided by section 146 of the Education and Inspection Act 2006.

Joint inspections involving Ofsted, Her Majesty's Inspectorate of Prisons (HMIP) and the Care Quality Commission (CQC) are permitted under paragraph 7 of

Schedule 13 to the Education and Inspection Act 2006. This enables Ofsted's Chief Inspector to act jointly with other public authorities for the efficient and effective exercise of his functions.

All inspections carried out by Ofsted and HMIP contribute to the UK's response to its international obligations under the UN Optional Protocol to the Convention against Torture (OPCAT) and other Cruel, Inhuman or Degrading Treatment or Punishment. OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) - which monitor the treatment of and conditions for detainees. HMIP is one of several bodies making up the NPM in the UK.

The inspection was unannounced. It was carried out by seven inspectors comprising two from HMIP, four from Ofsted and one from the CQC. The inspection was informed by a survey of young people's views undertaken in April 2016 by senior researchers from HMIP. Of the 36 young people in the centre 33 responded to the survey, representing 92% of the population. Three were unable to respond as they were out of the centre at the time of the survey, to attend court.

All inspectors drew keys and accessed all parts of the centre. The inspection team considered key aspects of young people's experience of living in the STC and the effectiveness of the support available to them. Inspectors observed practice and spoke with young people. Inspectors also spoke with former young persons, their parents and carers, frontline staff, managers, the Youth Justice Board (YJB) monitor, the Local Authority Designated Officer (LADO) and other key stakeholders including the advocacy service provider. In addition, inspectors analysed performance data, reports and other management information available within the STC.

This inspection judged how well young people are kept safe during their time in the STC. Inspectors also evaluated how well staff promote appropriate behaviour and manage challenging behaviour in a safe and child-centered manner. Progress in education and skills development, improvements in health and well-being, and the effectiveness of case planning for young people to move on from the centre, either to other establishments, or back into the community, were also scrutinised.

The centre was inspected against the standards outlined in the inspection framework published in July 2015. Findings and recommendations should be used to improve practice and outcomes for young people. Progress in relation to areas for improvement will be considered at the next inspection.



Medway STC

Summary of questionnaires and interviews

12-13 April 2016

Introduction

The objective of the STC survey is to give young people the chance to comment on their treatment and conditions in custody, as part of the evidence base during HM Inspectorate of Prisons and Ofsted inspections.

The data collected are used in inspections, where they are triangulated with inspectors' observations, discussions with young people and staff and documentation held in the establishment. More detail can be found in the inspection report.

Survey Methodology

A voluntary, confidential and anonymous survey of a representative proportion of the population of children and young people (12–18 years) was carried out by HM Inspectorate of Prisons.

Selecting the sample

At the time of the survey on 12 and 13 April 2016, the population of young people at Medway STC was 36. All young people at the time of the survey were aged between 14 and 18 years. Questionnaires were offered to all young people.

Completion of the questionnaire was voluntary and refusals were noted.

Interviews were routinely offered to all young people. In total, 21 young people were interviewed¹.

Methodology

Every attempt was made to distribute the questionnaires to each young person on an individual basis. This gave researchers an opportunity to explain the independence of the Inspectorate and the purpose of the questionnaire, as well as to answer questions.

All completed questionnaires were confidential – only members of the Inspectorate saw them. In order to ensure confidentiality, young people were asked to do one of the following:

- have their questionnaire ready to hand back to a member of the research team at a specified time
- seal the questionnaire in the envelope provided and hand it to a member of staff, if they were agreeable, or
- seal the questionnaire in the envelope provided and leave it in their room for collection.

Young people were not asked to put their names on their questionnaire, although their responses could be identified back to them in line with child protection requirements.

If a young person indicated child protection concerns in the survey, these were immediately passed on by Ofsted to the centre Director for follow-up and resolution. This occasionally results in allegations being refuted or withdrawn. However, in these circumstances we do not amend the original survey responses on the basis that the responses given reflected the young person's perceptions at the time when it was initially completed. The survey provides a valid and confidential route for the young person to volunteer information.

Response rates

The population at the time of the survey was 36. In total, 33 young people completed and returned their questionnaires.² This represented 92% of children and young people in the establishment at the time.

¹ This includes one young person interviewed via an interpreter.

² Three young people were away from the centre at court during the time of our handout and could not be offered the opportunity to complete a questionnaire.

Unit	Number of completed survey returns
Avon	5
Blackwater	4
Ferry	4
Heaver	5
Leeds	2
Romney	4
Scotney	3
Stour	6

Comparisons

Over the following pages we present the survey results for Medway STC.

First a full breakdown of responses is provided for each question. In this full breakdown all percentages, including those for filtered questions, refer to the full sample. Percentages have been rounded and therefore may not add up to 100%.

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant³ differences are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in young peoples' background details.

Filtered questions are clearly indented and preceded by an explanation of how the filter has been applied. Percentages for filtered questions refer to the number of young people filtered to that question. For all other questions, percentages refer to the entire sample. All missing responses have been excluded from analyses.

Percentages shown in the full breakdown may differ slightly from those shown in the comparative analyses. This is because the data has been weighted to enable valid statistical comparison between secure training centres.

The following comparative analyses are presented:

- The current survey responses from Medway in 2016 compared with responses from young people surveyed in all other secure training centres. This comparator is based on all responses from young people surveys carried out in three secure training centres since April 2015.
- The current survey responses from Medway in 2016 compared with the responses of young people surveyed at Medway in 2014.
- A comparison within the 2016 survey between the responses of white young people and those from a black and minority ethnic group.
- A comparison within the 2016 survey between responses of young people who have been in local authority care and those who have not been in local authority care.

³ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. In order to appropriately adjust p-values in light of multiple testing, $p < 0.01$ was considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

Summary

In addition, a summary of the survey results has been included, which shows a breakdown of responses for each question. Percentages have been rounded and therefore may not add up to 100%.

No questions have been filtered within the summary so all percentages refer to responses from the entire sample. The percentages to certain responses within the summary, for example 'I don't have a keyworker' options across questions, may differ slightly. This is due to different response rates across questions, meaning that the percentages have been calculated out of different totals (all missing data is excluded). The actual numbers will match up as the data is cleaned to be consistent.

Percentages shown in the summary may differ by 1% or 2% from that shown in the comparison data as the comparator data has been weighted for comparison purposes.

Secure Training Centre Survey

Section I: Questions about you

QI.1	Are you?	Male 28 (85%)			Female 5 (15%)			
QI.2	How old are you?	12 0 (0%)	13 0 (0%)	14 1 (3%)	15 9 (27%)	16 10 (%)	17 10 (%)	18 3 (9%)
QI.3	What is your ethnic origin?							
	White - British (English/Welsh/Scottish/Northern Irish).....	7 (21%)						
	White - Irish.....	3 (9%)						
	White - Other.....	1 (3%)						
	Black or Black British - Caribbean.....	9 (27%)						
	Black or Black British - African.....	6 (18%)						
	Black or Black British - other.....	0 (0%)						
	Asian or Asian British - Indian.....	0 (0%)						
	Asian or Asian British - Pakistani.....	1 (3%)						
	Asian or Asian British - Bangladeshi.....	2 (6%)						
	Asian or Asian British - Chinese.....	0 (0%)						
	Asian or Asian British - other.....	0 (0%)						
	Mixed heritage - White and Black Caribbean.....	1 (3%)						
	Mixed heritage - White and Black African.....	0 (0%)						
	Mixed heritage - White and Asian.....	0 (0%)						
	Mixed heritage - other.....	3 (9%)						
	Arab.....	0 (0%)						
	Other ethnic group.....	0 (0%)						
QI.4	What is your religion?							
	None.....	7 (22%)						
	Christian (including Church of England, Catholic, Protestant and all other Christians).....	18 (56%)						
	Buddhist.....	0 (0%)						
	Hindu.....	0 (0%)						
	Jewish.....	0 (0%)						
	Muslim.....	7 (22%)						
	Sikh.....	0 (0%)						
	Other.....	0 (0%)						
QI.5	Do you consider yourself to be Gypsy/Romany/Traveller?	Yes 3 (9%)			No 29 (91%)			
QI.6	Are you a British citizen?	Yes 30 (91%)			No 3 (9%)			
QI.7	Do you have a disability? Do you need help with any long term physical, mental or learning needs?	Yes 6 (19%)			No 26 (81%)			

		Yes	No
Q1.8	Have you ever been in local authority care (looked after)?	13 (41%)	19 (59%)

Section 2: Questions about your trip here and first 24 hours in this centre

		Yes	No	Don't remember/ Not applicable
Q2.1	On your most recent journey to this centre, did you feel that staff looked after you well?	33 (100%)	0 (0%)	0 (0%)
Q2.2	When you arrived at the centre were you searched?	33 (100%)	0 (0%)	0 (0%)
Q2.3	Did staff explain to you why you were being searched?	29 (88%)	3 (9%)	1 (3%)
Q2.4	When you were searched, did staff treat you with respect?	33 (100%)	0 (0%)	0 (0%)
Q2.5	Did you see a doctor or nurse before you went to bed on your first night here?	31 (94%)	2 (6%)	0 (0%)
Q2.6	On your first night here, did anybody talk to you about how you were feeling?	27 (84%)	5 (16%)	0 (0%)
Q2.7	Did you feel safe on your first night here?	28 (85%)	5 (15%)	0 (0%)

Section 3: Daily life

		Yes	No	I don't know
Q3.1	In your first few days here were you told everything you needed to know about life at the centre?	31 (94%)	1 (3%)	1 (3%)
Q3.2	If you had a problem, who would you turn to? <i>(Please tick all that apply)</i>			
	No-one.....			2 (6%)
	Teacher/ Education staff.....			5 (15%)
	Keyworker			12 (36%)

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Case worker.....	13 (39%)
Staff on your unit.....	24 (73%)
Another young person here.....	9 (27%)
Family.....	18 (55%)
Advocate.....	4 (12%)
Other.....	3 (9%)

Q3.3	Do you have a keyworker on your unit?	Yes 29 (88%)	No 4 (12%)
Q3.4	Does your keyworker help you?	I don't have a keyworker 4 (13%)	Yes 26 (84%) No 1 (3%)
Q3.5	Do most staff treat you with respect?	Yes 32 (97%)	No 1 (3%)
Q3.6	Can you follow your religion if you want to?	Yes 27 (82%)	No 1 (3%) I don't want to/ I re no religion 5 (15%)
Q3.7	What is the food like here?		
	Very good.....		1 (3%)
	Good.....		10 (30%)
	Neither.....		18 (55%)
	Bad.....		3 (9%)
	Very bad.....		1 (3%)
Q3.8	Is it easy to keep in touch with your family or carer outside the centre? (for example phone calls, visits)	Yes 32 (97%)	No 1 (3%)
Q3.9	How often do you have visits from family, carers and friends?		
	I don't get visits.....		2 (6%)
	Less than once a week.....		15 (47%)
	About once a week.....		15 (47%)
	More than once a week.....		0 (0%)

Section 4: Behaviour

Q4.1	Does the incentives and sanctions scheme (gold, silver and platinum levels) encourage you to behave well?	I don't know what the scheme is 0 (0%)	Yes 27 (82%)	No 6 (18%)
		I don't know what the scheme is	Yes	No

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Q4.2	Do you think the incentives and sanctions scheme (gold, silver and platinum levels) is fair?	0 (0%)	24 (73%)	9 (27%)
Q4.3	If you get in trouble, do staff explain what you have done wrong?	Yes 26 (93%)		No 2 (7%)
Q4.4	Do most staff let you know when your behaviour is good?	Yes 28 (85%)		No 5 (15%)
Q4.5	Have staff ever made you stay in your room away from the other young people because of something you did? (this could include having things removed from your room such as pictures or bedding)	Yes 10 (30%)		No 23 (70%)
Q4.6	Have you been physically restrained since you have been here? (you may have heard it called MMPR)	Yes 12 (36%)		No 21 (64%)
Q4.7	Were you given a chance to talk to somebody about the restraint afterwards?	Not been restrained 21 (64%)	Yes 10 (30%)	No 2 (6%)

Section 5: Health Services

Q5.1	If you feel ill are you able to see a doctor or nurse?	Yes 30 (94%)	No 2 (6%)	I don't know 0 (0%)
Q5.2	What are the health services like here?	Good 24 (75%)	Bad 5 (16%)	I don't know 3 (9%)
Q5.3	Do you have any health needs which are not being met?	Yes 5 (16%)		No 27 (84%)

Section 6: Complaints

Q6.1	Do you know how to make a complaint?	Yes 31 (94%)		No 2 (6%)
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		I have not made one	Yes	No
Q6.2	Are complaints dealt with fairly?	10 (32%)	17 (55%)	4 (13%)
Q6.3	Have you ever wanted to make a complaint but didn't because you were worried what would happen to you?	Yes 2 (6%)		No 30 (94%)

Section 7: Questions about education, training and activities

		Yes	No	I don't know
Q7.1	Do you have a care plan that sets out targets for you to achieve while in custody? (this might be called a training, sentence or remand plan)	18 (55%)	7 (21%)	8 (24%)
Q7.2	Since you have been here have you been given any advice about training or jobs that you might like to do in the future?	Yes 27 (82%)		No 6 (18%)
Q7.3	Have you learned any skills for jobs that you might like to do in the future (e.g. bricklaying/ hairdressing)?	Yes 25 (76%)		No 8 (24%)
Q7.4	Do you think your education/ training here will help you once you leave the centre?	Yes 26 (79%)		No 7 (21%)
Q7.5	Have you learned any 'life skills' here (e.g. cooking/cleaning)?	Yes 29 (88%)		No 4 (12%)
Q7.6	Are you encouraged to take part in activities outside education/ training hours (i.e. hobbies, sports or gym)?	Yes 30 (91%)		No 3 (9%)
Q7.8	Do you know where you are going to be living when you leave the centre?	Yes 18 (58%)		No 13 (42%)
		Not sentenced	Yes	No

Q7.9	Have you done anything here to make you less likely to offend in the future?	7 (21%)	17 (52%)	9 (27%)
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Section 8: Questions about safety

Q8.1	Have you ever felt unsafe here?	Yes 7 (21%)	No 26 (79%)
Q8.2	Do you feel unsafe at the moment?	Yes 1 (3%)	No 32 (97%)
Q8.3	In which areas have you ever felt unsafe? (Please tick all that apply)		
	Never felt unsafe		26 (81%)
	Everywhere.....		4 (13%)
	Admissions room		1 (3%)
	In single separation		1 (3%)
	At the gym		1 (3%)
	Outside areas/ grounds		1 (3%)
	Corridors.....		1 (3%)
	Dining room.....		0 (0%)
	At education/ training		0 (0%)
	At religious services		0 (0%)
	At health services		1 (3%)
	In the visits area		1 (3%)
	On your unit.....		2 (6%)
	In your room		1 (3%)
	Other		1 (3%)
Q8.4	Have you experienced any of the following from young people here? (Please tick all that apply)		
	Insulting remarks about you		5 (16%)
	Physical abuse (being hit, kicked or assaulted).....		4 (13%)
	Sexual abuse.....		0 (0%)
	Feeling threatened or intimidated		1 (3%)
	Shout outs/ yelling through windows about you.....		6 (19%)
	Having your property taken.....		0 (0%)
	Other		0 (0%)
	Not experienced any of these things		21 (66%)
Q8.5	If yes, what was it about? (Please tick all that apply)		
	Your race or ethnic origin		4 (13%)
	Your religion/religious beliefs		0 (0%)
	Your nationality.....		0 (0%)
	Being from a different part of the country to others.....		0 (0%)
	Being from a traveller community		0 (0%)
	Your sexual orientation		0 (0%)
	Your age.....		0 (0%)
	Having a disability.....		0 (0%)
	You being new here.....		3 (9%)
	Your offence/ crime		2 (6%)
	Gang related issues/ people you know or mix with.....		3 (9%)

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About your family or friends.....	2 (6%)
Drugs.....	0 (0%)
Medication you receive	0 (0%)
Your gender.....	0 (0%)
Other	2 (6%)

Q8.7 Have you experienced any of the following from staff here? (Please tick all that apply)

Insulting remarks about you	2 (6%)
Physical abuse (being hit, kicked or assaulted).....	2 (6%)
Sexual abuse.....	0 (0%)
Feeling threatened or intimidated	3 (10%)
Having your property taken.....	2 (6%)
Other	1 (3%)
Not experienced any of these things.....	25 (81%)

Q8.8 If yes, what was it about? (Please tick all that apply)

Your race or ethnic origin.....	1 (3%)
Your religion/religious beliefs.....	1 (3%)
Your nationality	2 (6%)
Being from a different part of the country to others	1 (3%)
Being from a traveller community.....	0 (0%)
Your sexual orientation.....	0 (0%)
Your age.....	2 (6%)
Having a disability.....	0 (0%)
You being new here	1 (3%)
Your offence/ crime.....	1 (3%)
Gang related issues/ people you know or mix with.....	1 (3%)
About your family or friends.....	1 (3%)
Drugs.....	0 (0%)
Medication you receive.....	0 (0%)
Your gender	1 (3%)
Because you made a complaint.....	1 (3%)
Other	2 (6%)

	Yes	No
Q8.10 If you were being bullied or 'picked on', would you tell a member of staff?	21 (68%)	10 (32%)



Survey responses from children and young people: Medway STC 2016

Survey responses (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance. NB: This document shows a comparison between the responses from all young people surveyed in this establishment with all young people surveyed for the comparator.

Key to tables

		2016 Medway STC	STC comparator	2016 Medway STC	2014 Medway STC
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in young people's background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		33	102	33	65
SECTION 1: ABOUT YOU					
1.2	Are you aged under 16?	31%	32%	31%	25%
1.3	Are you from a minority ethnic group? (including all those who did not tick White British, White Irish or White Other category)	67%	34%	67%	46%
1.4	Are you Muslim?	23%	12%	23%	20%
1.5	Do you consider yourself to be Gypsy/Romany/Traveller?	9%	13%	9%	18%
1.6	Are you a British citizen?	92%	93%	92%	93%
1.7	Do you have a disability?	20%	22%	20%	25%
1.8	Have you ever been in local authority care?	40%	38%	40%	45%
SECTION 2: YOUR TRIP HERE AND FIRST 24 HOURS					
2.1	On your most recent journey to this centre, did you feel that staff looked after you well?	100%	89%	100%	91%
2.2	When you arrived at the centre were you searched?	100%	93%	100%	99%
2.3	Did staff explain why you were being searched?	89%	71%	89%	87%

2.4	When you were searched, did staff treat you with respect?	100%	81%	100%	94%
On your first night here:					
2.5	Did you see a doctor or nurse before you went to bed?	94%	89%	94%	78%
2.6	Did anybody talk to you about how you were feeling?	85%	61%	85%	79%
2.7	Did you feel safe?	86%	88%	86%	84%
SECTION 3: DAILY LIFE					
3.1	In your first few days here were you told everything you needed to know about life at the centre?	94%	68%	94%	77%
If you had a problem, who you would turn to?					
3.2a	No-one	6%	14%	6%	16%
3.2b	Teacher/Education staff	14%	15%	14%	4%
3.2c	Keyworker	36%	35%	36%	20%
3.2d	Case worker	39%	44%	39%	23%
3.2e	Staff on the unit	72%	45%	72%	50%
3.2f	Another young person here	28%	16%	28%	19%
3.2g	Family	56%	53%	56%	52%
3.2h	Advocate	11%	11%	11%	9%
3.3	Do you have a keyworker on your unit?	89%	89%	89%	97%
For those who said they had a keyworker:					
3.4	Does your keyworker help you?	97%	88%	97%	86%
3.5	Do most staff treat you with respect?	97%	86%	97%	91%
3.6	Can you follow your religion if you want to?	81%	62%	81%	77%
3.7	Is the food here good/ very good?	33%	30%	33%	37%
3.8	Is it easy to keep in touch with family or carer outside the centre?	97%	84%	97%	91%
3.9	Do you have visits from family, carers or friends at least once a week?	46%	53%	46%	58%

SECTION 4: BEHAVIOUR					
4.1	Does the incentives and sanctions scheme encourage you to behave well?	81%	78%	81%	81%
4.2	Do you think the incentives and sanctions scheme is fair?	72%	66%	72%	65%
4.3	If you get in trouble, do staff explain what you have done wrong?	93%	79%	93%	85%
4.4	Do most staff let you know when your behaviour is good?	86%	70%	86%	84%
4.5	Have staff ever made you stay in your room away from the other young people because of something you did?	31%	53%	31%	46%
4.6	Have you been physically restrained since you have been here?	36%	30%	36%	25%
For those who had been restrained:					
4.7	Were you given a chance to talk to somebody about the restraint afterwards?	85%	56%	85%	82%
SECTION 5: HEALTH SERVICES					
5.1	If you feel ill, are you able to see a doctor or nurse?	94%	94%	94%	92%
5.2	Do you think that the health services are good here?	74%	54%	74%	43%
5.3	Do you have any health needs which are not being met?	15%	21%	15%	40%
SECTION 6: COMPLAINTS					
6.1	Do you know how to make a complaint?	94%	96%	94%	99%
For those who have made a complaint:					
6.2	Are complaints dealt with fairly?	83%	64%	83%	72%
6.3	Have you ever wanted to make a complaint but didn't because you were worried what would happen to you?	6%	18%	6%	17%
SECTION 7: EDUCATION AND ACTIVITIES					
7.1	Do you have a care plan which sets out targets for you to achieve while in custody?	56%	42%	56%	49%
7.2	Have you been given advice about training or jobs that you might like to do in the future?	81%	71%	81%	77%
7.3	Have you been able to learn skills for jobs that you might like to do in the future?	75%	66%	75%	67%

7.4	Do you think your education here will help you once you leave?	78%	62%	78%	67%
7.5	Have you been able to learn any 'life skills' here?	89%	84%	89%	86%
7.6	Are you encouraged to take part in activities outside education/ training hours?	92%	85%	92%	88%
7.8	Do you know where you will be living when you leave the centre?	59%	73%	59%	72%
For those who are sentenced:					
7.9	Have you done anything here to make you less likely to offend in the future?	66%	63%	66%	69%
SECTION 8: SAFETY					
8.1	Have you ever felt unsafe here?	22%	24%	22%	21%
8.2	Do you feel unsafe at the moment?	3%	11%	3%	7%
Have you experienced any of the following from young people here?					
8.4a	Insulting remarks?	15%	38%	15%	30%
8.4b	Physical abuse?	11%	25%	11%	16%
8.4c	Sexual abuse?	0%	3%	0%	0%
8.4d	Feeling threatened or intimidated?	3%	23%	3%	13%
8.4e	Shout outs/yelling through windows?	20%	34%	20%	18%
8.4f	Having your canteen/property taken?	0%	13%	0%	3%
For those who have indicated any of the above, what did it relate to?					
8.5a	Your race or ethnic origin?	11%	11%	11%	7%
8.5b	Your religion or religious beliefs?	0%	8%	0%	2%
8.5c	Your nationality?	0%	11%	0%	2%
8.5d	You being from a different part of the country than others?	0%	13%	0%	0%
8.5e	You being from a Traveller community?	0%	3%	0%	2%
8.5f	Your sexual orientation?	0%	3%	0%	0%
8.5g	Your age?	0%	7%	0%	0%

8.5h	You having a disability?	0%	3%	0%	3%
8.5i	You being new here?	9%	13%	9%	8%
8.5j	Your offence or crime?	6%	12%	6%	10%
8.5k	Gang related issues or people you know or mix with?	9%	8%	9%	5%
8.5l	About your family or friends?	6%	12%	6%	15%
8.5m	Drugs?	0%	10%	0%	3%
8.5n	Medications you receive?	0%	2%	0%	0%
8.5	Your gender?	0%	3%	0%	0%
Have you experienced any of the following from staff here?					
8.7a	Insulting remarks?	6%	15%	6%	18%
8.7b	Physical abuse?	6%	13%	6%	2%
8.7c	Sexual abuse?	0%	3%	0%	2%
8.7d	Feeling threatened or intimidated?	9%	11%	9%	9%
8.7e	Having your canteen/property taken?	6%	11%	6%	4%
For those who have indicated any of the above, what did it relate to?					
8.8a	Your race or ethnic origin?	3%	5%	3%	7%
8.8b	Your religion or religious beliefs?	3%	2%	3%	7%
8.8c	Your nationality?	6%	2%	6%	2%
8.8d	You being from a different part of the country than others?	3%	4%	3%	2%
8.8e	You being from a Traveller community?	0%	4%	0%	2%
8.8f	Your sexual orientation?	0%	3%	0%	2%
8.8g	Your age?	6%	2%	6%	2%
8.8h	You having a disability?	0%	3%	0%	2%
8.8i	You being new here?	3%	4%	3%	2%
8.8j	Your offence or crime?	3%	4%	3%	4%

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8.8k	Gang related issues or people you know or mix with?	3%	3%	3%	2%
8.8l	About your family or friends?	3%	4%	3%	4%
8.8m	Drugs?	0%	4%	0%	2%
8.8n	Medications you receive?	0%	2%	0%	2%
8.8o	Your gender?	3%	3%	3%	2%
8.8p	Because you made a complaint?	3%	4%	3%	2%
8.10	If you were being bullied or 'picked on', would you tell a member of staff?	68%	68%	68%	51%



Diversity comparator (ethnicity) Medway STC 2016

Survey responses (missing data have been excluded for each question).
Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

Key to tables

		Black and minority ethnic young people	White young people
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		22	11
SECTION 1: ABOUT YOU			
1.2	Are you aged under 16?	33%	25%
1.3	Are you from a minority ethnic group? (including all those who did not tick White British, White Irish or White Other category)		
1.4	Are you Muslim?	33%	0%
1.5	Do you consider yourself to be Gypsy/Romany/Traveller?	0%	25%
1.6	Are you a British citizen?	88%	100%
1.7	Do you have a disability?	9%	33%
1.8	Have you ever been in local authority care?	35%	58%
SECTION 2: YOUR TRIP HERE AND FIRST 24 HOURS			
2.1	On your most recent journey to this centre, did you feel that staff looked after you well?	100%	100%
2.2	When you arrived at the centre were you searched?	100%	100%
2.3	Did staff explain why you were being searched?	83%	100%

2.4	When you were searched, did staff treat you with respect?	100%	100%
On your first night here:			
2.5	Were you seen by a doctor or nurse before you went to bed?	96%	92%
2.6	Did anybody talk to you about how you were feeling?	77%	100%
2.7	Did you feel safe?	83%	92%
SECTION 3: DAILY LIFE			
3.1	In your first few days here were you told everything you needed to know about life at the centre?	92%	100%
If you had a problem, who you would turn to?			
3.2a	No-one	8%	0%
3.2b	Teacher/Education staff	4%	33%
3.2c	Keyworker	29%	58%
3.2d	Case worker	33%	58%
3.2e	Staff on the unit	67%	83%
3.2f	Another young person here	21%	33%
3.2g	Family	58%	42%
3.2h	Advocate	13%	8%
3.3	Do you have a keyworker on your unit?	83%	100%
3.5	Do most staff treat you with respect?	96%	100%
3.6	Can you follow your religion if you want to?	92%	67%
3.7	Is the food here good/ very good?	29%	42%
3.8	Is it easy to keep in touch with family or carer outside the centre?	96%	100%
3.9	Do you have visits from family, carers or friends at least once a week?	35%	75%
SECTION 4: BEHAVIOUR			
4.1	Does the incentives and sanctions scheme encourage you to behave well?	71%	100%
4.2	Do you think the incentives and sanctions scheme is fair?	71%	75%

4.3	If you get in trouble, do staff explain what you have done wrong?	90%	100%
4.4	Do most staff let you know when your behaviour is good?	79%	100%
4.5	Have staff ever made you stay in your room away from the other young people because of something you did?	29%	33%
4.6	Have you been physically restrained since you have been here?	46%	17%
SECTION 5: HEALTH SERVICES			
5.1	If you feel ill, are you able to see a doctor or nurse?	96%	92%
5.2	Do you think that the health services are good here?	65%	92%
5.3	Do you have any health needs which are not being met?	17%	8%
SECTION 6: COMPLAINTS			
6.1	Do you know how to make a complaint?	92%	100%
6.3	Have you ever wanted to make a complaint but didn't because you were worried what would happen to you?	9%	0%
SECTION 7: EDUCATION AND ACTIVITIES			
7.1	Do you have a care plan which sets out targets for you to achieve while in custody?	50%	67%
7.2	Have you been given advice about training or jobs that you might like to do in the future?	71%	100%
7.3	Have you been able to learn skills for jobs that you might like to do in the future?	67%	92%
7.4	Do you think your education here will help you once you leave?	79%	83%
7.5	Have you been able to learn any 'life skills' here?	83%	100%
7.6	Are you encouraged to take part in activities outside education/ training hours?	88%	100%
7.8	Do you know where you will be living when you leave the centre?	48%	82%
SECTION 8: SAFETY			
8.1	Have you ever felt unsafe here?	21%	17%
8.2	Do you feel unsafe at the moment?	4%	0%
Have you experienced any of the following from young people here?			

**Inspection of secure training centres
Medway Training Centre**

8.4a	Insulting remarks?	9%	25%
8.4b	Physical abuse?	13%	8%
8.4c	Sexual abuse?	0%	0%
8.4d	Feeling threatened or intimidated?	4%	0%
8.4e	Shout outs/yelling through windows?	30%	0%
8.4f	Having your canteen/property taken?	0%	0%
For those who have indicated any of the above, what did it relate to?			
8.5a	Your race or ethnic origin?	13%	8%
8.5b	Your religion or religious beliefs?	0%	0%
8.5c	Your nationality?	0%	0%
8.5d	You being from a different part of the country than others?	0%	0%
8.5e	You being from a Traveller community?	0%	0%
8.5f	Your sexual orientation?	0%	0%
8.5g	Your age?	0%	0%
8.5h	You having a disability?	0%	0%
8.5i	You being new here?	4%	17%
8.5j	Your offence or crime?	9%	0%
8.5k	Gang related issues or people you know or mix with?	13%	0%
8.5l	About your family or friends?	9%	0%
8.5m	Drugs?	0%	0%
8.5n	Medications you receive?	0%	0%
8.5o	Your gender?	0%	0%
Have you experienced any of the following from staff here?			
8.7a	Insulting remarks?	9%	0%
8.7b	Physical abuse?	4%	9%
8.7c	Sexual abuse?	0%	0%

8.7d	Feeling threatened or intimidated?	9%	9%
8.7e	Having your canteen/property taken?	9%	0%
For those who have indicated any of the above, what did it relate to?			
8.8a	Your race or ethnic origin?	4%	0%
8.8b	Your religion or religious beliefs?	4%	0%
8.8c	Your nationality?	9%	0%
8.8d	You being from a different part of the country than others?	4%	0%
8.8e	Your being from a Traveller community?	0%	0%
8.8f	Your sexual orientation?	0%	0%
8.8g	Your age?	9%	0%
8.8h	You having a disability?	0%	0%
8.8i	You being new here?	4%	0%
8.8j	Your offence or crime?	4%	0%
8.8k	Gang related issues or people you know or mix with?	4%	0%
8.8l	About your family or friends?	4%	0%
8.8m	Drugs?	0%	0%
8.8n	Medications you receive?	0%	0%
8.8o	Your gender?	4%	0%
8.8p	Because you made a complaint?	4%	0%
8.10	If you were being bullied or 'picked on', would you tell a member of staff?	55%	92%



Diversity comparator (LA Care) Medway STC 2016

Survey responses (missing data have been excluded for each question).
Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

Key to tables

		Young people who have been in LA care	Young people who have not been in LA care
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		13	19
SECTION 1: ABOUT YOU			
1.2	Are you aged under 16?	47%	20%
1.3	Are you from a minority ethnic group? (including all those who did not tick White British, White Irish or White Other category)	53%	75%
1.4	Are you Muslim?	14%	26%
1.5	Do you consider yourself to be Gypsy/Romany/Traveller?	14%	5%
1.6	Are you a British citizen?	93%	91%
1.7	Do you have a disability?	7%	25%
SECTION 2: YOUR TRIP HERE AND FIRST 24 HOURS			
2.1	On your most recent journey to this centre, did you feel that staff looked after you well?	100%	100%
2.2	When you arrived at the centre were you searched?	100%	100%
2.3	Did staff explain why you were being searched?	86%	91%
2.4	When you were searched, did staff treat you with respect?	100%	100%

On your first night here:			
2.5	Were you seen by a doctor or nurse before you went to bed?	93%	95%
2.6	Did anybody talk to you about how you were feeling?	86%	84%
2.7	Did you feel safe?	93%	80%
SECTION 3: DAILY LIFE			
3.1	In your first few days here were you told everything you needed to know about life at the centre?	100%	91%
If you had a problem, who you would turn to?			
3.2a	No-one	0%	10%
3.2b	Teacher/Education staff	14%	15%
3.2c	Keyworker	47%	25%
3.2d	Case worker	36%	38%
3.2e	Staff on the unit	86%	62%
3.2f	Another young person here	29%	20%
3.2g	Family	47%	57%
3.2h	Advocate	0%	15%
3.3	Do you have a keyworker on your unit?	79%	95%
3.5	Do most staff treat you with respect?	100%	95%
3.6	Can you follow your religion if you want to?	71%	91%
3.7	Is the food here good/ very good?	29%	38%
3.8	Is it easy to keep in touch with family or carer outside the centre?	93%	100%
3.9	Do you have visits from family, carers or friends at least once a week?	39%	52%
SECTION 4: BEHAVIOUR			
4.1	Does the incentives and sanctions scheme encourage you to behave well?	86%	85%
4.2	Do you think the incentives and sanctions scheme is fair?	71%	80%
4.3	If you get in trouble, do staff explain what you have done wrong?	100%	88%

4.4	Do most staff let you know when your behaviour is good?	100%	80%
4.5	Have staff ever made you stay in your room away from the other young people because of something you did?	21%	38%
4.6	Have you been physically restrained since you have been here?	7%	52%
SECTION 5: HEALTH SERVICES			
5.1	If you feel ill, are you able to see a doctor or nurse?	93%	95%
5.2	Do you think that the health services are good here?	86%	65%
5.3	Do you have any health needs which are not being met?	21%	5%
SECTION 6: COMPLAINTS			
6.1	Do you know how to make a complaint?	93%	95%
6.3	Have you ever wanted to make a complaint but didn't because you were worried what would happen to you?	8%	5%
SECTION 7: EDUCATION AND ACTIVITIES			
7.1	Do you have a care plan which sets out targets for you to achieve while in custody?	53%	52%
7.2	Have you been given advice about training or jobs that you might like to do in the future?	93%	75%
7.3	Have you been able to learn skills for jobs that you might like to do in the future?	71%	80%
7.4	Do you think your education here will help you once you leave?	93%	67%
7.5	Have you been able to learn any 'life skills' here?	93%	85%
7.6	Are you encouraged to take part in activities outside education/training hours?	93%	91%
7.8	Do you know where you will be living when you leave the centre?	75%	52%
SECTION 8: SAFETY			
8.1	Have you ever felt unsafe here?	14%	25%
8.2	Do you feel unsafe at the moment?	0%	5%
Have you experienced any of the following from young people here?			
8.4a	Insulting remarks?	14%	11%

8.4b	Physical abuse?	14%	11%
8.4c	Sexual abuse?	0%	0%
8.4d	Feeling threatened or intimidated?	0%	5%
8.4e	Shout outs/yelling through windows?	14%	16%
8.4f	Having your canteen/property taken?	0%	0%
For those who have indicated any of the above, what did it relate to?			
8.5a	Your race or ethnic origin?	14%	5%
8.5b	Your religion or religious beliefs?	0%	0%
8.5c	Your nationality?	0%	0%
8.5d	You being from a different part of the country than others?	0%	0%
8.5e	Your being from a Traveller community?	0%	0%
8.5f	Your sexual orientation?	0%	0%
8.5g	Your age?	0%	0%
8.5h	You having a disability?	0%	0%
8.5i	You being new here?	7%	11%
8.5j	Your offence or crime?	0%	11%
8.5k	Gang related issues or people you know or mix with?	0%	11%
8.5l	About your family or friends?	7%	5%
8.5m	Drugs?	0%	0%
8.5n	Medications you receive?	0%	0%
8.5o	Your gender?	0%	0%
Have you experienced any of the following from staff here?			
8.7a	Insulting remarks?	0%	11%
8.7b	Physical abuse?	7%	6%
8.7c	Sexual abuse?	0%	0%
8.7d	Feeling threatened or intimidated?	7%	11%

8.7e	Having your canteen/property taken?	7%	6%
For those who have indicated any of the above, what did it relate to?			
8.8a	Your race or ethnic origin?	0%	6%
8.8b	Your religion or religious beliefs?	0%	6%
8.8c	Your nationality?	0%	11%
8.8d	You being from a different part of the country than others?	0%	6%
8.8e	You being from a Traveller community?	0%	0%
8.8f	Your sexual orientation?	0%	0%
8.8g	Your age?	0%	11%
8.8h	You having a disability?	0%	0%
8.8i	You being new here?	0%	6%
8.8j	Your offence or crime?	0%	6%
8.8k	Gang related issues or people you know or mix with?	0%	6%
8.8l	About your family or friends?	0%	6%
8.8m	Drugs?	0%	0%
8.8n	Medications you receive?	0%	0%
8.8o	Your gender?	0%	6%
8.8p	Because you made a complaint?	0%	6%
8.10	If you were being bullied or 'picked on', would you tell a member of staff?	77%	65%