

OFSTED

OAKHILL SECURE TRAINING CENTRE UNANNOUNCED MONITORING INSPECTION

DATE: 24/25 APRIL 2007

	RECOMMENDATIONS LAST KEY INSPECTION	ACTION TAKEN	EVIDENCE	COMMENTS/ OUTSTANDING RECOMMENDATIONS
2.1	The director should review the statement of purpose to ensure its relevance to the wide audience for whom it is intended.	The Oakhill Development Plan 2007-2010 states that the deputy director will review the Statement of Purpose by the second quarter of 2007. No evidence was seen to suggest that this task had been carried out at the time of the inspection.	The statement of purpose displayed on walls around the centre was inspected	Not achieved.
2.2	The director should ensure that priority is given to ensuring the routine involvement of parents and carers in the assessment, planning and review processes for children and young people.	The Oakhill Development Plan 2007-2010 states that a deputy director will devise and implement a children's participation and involvement programme by the second quarter of 2007.	Evidence on some files seen of parental/carer involvement but not evident on all files reviewed. Evidence on the units of good contact between parents and young people by telephone It is envisaged that the appointment of the case work manager will improve consistency in this area.	Not yet achieved. New Recommendation The director should consider how best to audit practice in relation to the inclusion of parents in assessment and planning.

2.3	The director should, as a priority, establish a protocol for the sharing of information between the professional disciplines and staff groups at the Centre.	The Oakhill Development Plan 2007-2010 states that this protocol will be in place by the second quarter of 2007. Assessment Team Review Meetings (ATRM) are taking place daily to ensure relevant information is shared.	<p>The Oakhill Development Plan 2007-2010</p> <p>An inspector attended an ATRM meeting.</p> <p>Several managers and staff describe some progress in this area, but many agree that there is still much work to be done to ensure a consistent standard of sharing and inclusiveness.</p>	Not achieved. Ongoing work.
2.4	The director should ensure that the review of the Initial Training Course (ITC) achieves a better balance between the amount of time committed to practical matters and the development of models of good practice.	<p>The Oakhill Development Plan 2007-2010 states that this recommendation will be met through sharing experiences within the STC community, and developing opportunities for staff to pursue NVQ training in childcare and/or criminal justice. All to be completed by the third quarter of 2007.</p> <p>Senior managers confirmed the introduction of 'learning circles' for staff and described this as a process for learning and development. They confirmed that a recent increase in the staffing establishment with effect from just two days prior to the inspection will enable more regular learning circles and facilitate supervision.</p>	<p>The Oakhill Development Plan 2007-2010.</p> <p>An interview with the YJB monitor and perusal of the Oakhill contract with YJB showed that Oakhill STC offers a 6 week ITC compared to 7 – 9 weeks elsewhere. Contract with YJB recommends a total of 294 hours for staff engaged in induction. Oakhill offer a total of 247 hours, an apparent shortfall of 47 hours.</p> <p>An inspector also met with the learning and development officer and head of human resources who are responsible for training.</p> <p>The ITC is in the process of being reviewed. This has been a slow process. Staff responsible for</p>	<p>Not achieved. Ongoing work</p> <p>This recommendation continues to be relevant, particularly given the high turnover of staff (currently at 48% annually) and the inexperience of many newly appointed care staff.</p> <p>New Recommendation</p> <p>The Youth Justice Board should</p>

			<p>managing the delivery of training and senior managers said they felt the ITC was 'fit for purpose'.</p> <p>Several staff shared their thoughts on the ITC and many say they would prefer the training to be more focused on preparing them to deal with the challenges presented by the young people who are placed at the centre, with complex needs. A number of staff say they do not always have the opportunity to shadow a colleague, which is the expectation for the first two weeks of employment post ITC training. They say this is often due to staffing shortages.</p> <p>Several staff spoken with said that so far the 'learning circles' available to them have been a process for reflective practice rather than a training or relevant development forum.</p>	<p>review with G4S the training hours delivered to new custody staff, and ensure this is sufficient to prepare them for their role in caring for young people.</p>
2.5	<p>The director should ensure that managers give priority to the formal supervision of staff, particularly those inexperienced or newly appointed.</p>	<p>The Oakhill Development Plan 2007-2010 indicates that supervision and appraisal will be reviewed by the third quarter of 2007, and all newly appointed staff will serve a probationary period. The director stated in January 2007 that part of the purpose of the change to Residential Service Manager (RSM's) roles was to facilitate more time on the units and</p>	<p>Conversations with senior managers, RSM's, and a range of supervisors, night staff and members of the care teams on the units.</p> <p>There was some evidence on units and some staff spoken with indicated that they are now</p>	<p>Not achieved</p> <p>It is essential that staff working with children and young people with the complex needs and challenges that</p>

		<p>opportunity to supervise staff.</p> <p>The head of education confirmed that all teaching staff receive regular formal supervision.</p>	<p>receiving supervision, or that the frequency of supervision has improved, but only very recently. Others reported that supervision is still not taking place appropriately, with some describing only having received one supervision session in approximately three years of employment.</p> <p>RSM's spoke of willingness to carry out supervision, but limited capacity due to other duties. The roles and responsibilities of RSM's are once again being reviewed by senior managers. Training is being provided to supervisors on 'contracting' for supervision and it is expected that all staff will be receiving regular formal supervision by mid May. Commendable intention to offer two weekly supervision to probationary staff. This process is shortly to commence with staff on the current ITC.</p>	<p>many at the STC present, receive regular opportunities to discuss their concerns, be given guidance, support and ongoing on the job training.</p> <p>The momentum being generated by recently appointed senior managers in this respect must be sustained.</p>
2.6	The director should review residential service manager's (RSM) span of control to ensure that they have the capacity to deliver the required level of	The Director and the Oakhill Development Plan 2007-2010 identifies this process as having taken place. The role of the RSM has been reviewed and changed, with more RSM's allocated to their house blocks, but a decrease in the number of Duty Operational managers (DOM's). The Development Plan states	The Oakhill Development Plan 2007-2010	<p>Not achieved</p> <p>The role of the RSM's as managers of the individual house units is one of the most important</p>

	service.	that this will allow greater clarity regarding roles and responsibilities, and more stable establishment if less incidents, and improved staff retention.	spend as much time on their units or carry out the tasks that they should be. The RSM's said that on occasion they do not know they are to be the duty manager until they arrive at work. They currently do not have the capacity to deliver the required level of service. An inspector attended a senior management team meeting during the inspection where further proposals were being made to review and revise the role and responsibilities of the RSM. There was an acknowledgement that the recent changes had not brought about the desired outcome. There are resource implications for senior managers to achieve their objectives in relation to the management of the house blocks. Discussions are continuing.	within the centre. They need to set the tone for the quality of care given to the young people and the success of many aspects of the contract with the YJB. Staff need clear direction and leadership. They need consistent guidance, support and to be held to account as appropriate. The inconsistencies described by many staff interviewed across the centre and by the young people are unacceptable and need to be addressed as a matter of priority.
2.7	The director should review the current management arrangements for the supervision of the	The Oakhill Development Plan 2007-2010 identifies this review as complete. The Child Protection Coordinator is to carry out this function. The newly appointed Head of Safeguarding and Offending	The Oakhill Development Plan 2007-2010 The head of safeguarding and offending behaviour was	Achieved

	head of the substance misuse service.	Behaviour has been given the task to supervise the head of the substance misuse service.	interviewed and confirmed that this was one of her tasks.	
2.8	The director should review the need at the Centre of the security dog and handler.	The Oakhill Development Plan 2007-2010 states that alternatives will be explored and submitted for discussion with the YJB monitor and authority. The Head of Security and Operations stated that he has liaised with the prison service to find any better alternatives to using the dog for sniffing drugs. He has not found one and wants to keep the dog. The external manager for the centre, the Custody and Rehabilitation Director from G4S, indicated that he will review the use of the dog, given other centres manage without one.	The Oakhill Development Plan 2007-2010 Interviews with the Head of Security and Operations and meeting with external manager.	Not achieved. Work in progress.
2.9	The director should ensure that the handling strategies are developed for those children and young people who present a serious threat to other children and young people and staff at the Centre.	The Oakhill Development Plan 2007-2010 states that multidisciplinary meetings will include professionals, not administration staff. The director reported that the centre has introduced 9 new care staff posts and revised the staff duty rotas to create more staff on the units to engage with the young people, and allow more flexibility for staff. The director reported that a management briefing meeting takes place each morning to share information and discuss possible responses.	The Oakhill Development Plan 2007-2010 An inspector attended the morning management briefing and the first part of the ATRM meeting. The briefing meeting did not include some of the issues of the previous evening of which inspectors were aware, and there appeared to be limited consideration of bullying within the centre at the ATRM, even though bullying has been a problem at the centre in the recent	Not achieved. There were three serious assaults during the period of the inspection and the procedures in place for reporting and responding to them and other issues appear to be inadequate.

		<p>Also, the multi disciplinary Assessment Team Review Meeting (ATRM) meets daily to review young people across the centre and agree handling strategies. Bullying and threatening behaviour were reviewed daily at the meeting.</p>	<p>past.</p> <p>Inspectors witnessed poor communication between staff and managers during the two day inspection. Relevant people were not being informed of incidents, log books were missing, staff left the living units without formally handing over information, a young person was placed in a unit without any documentation, (and given that she had spent the previous night in healthcare this was totally unacceptable). Inspectors were concerned that one staff member was left alone with five young people for over an hour. This could have placed her and the young people at risk.</p> <p>There was evidence of strategies for dealing with children who present a particular threat to other young people or staff, but the delay in reporting and responding to incidents or revision of the management strategy potentially leaves people at risk.</p>	<p>Senior and middle managers need to ensure appropriate and consistent application of procedures across the site and within all relevant departments.</p> <p>This must be a priority for managers at all levels and for staff to reduce risk to young people and colleagues.</p>
2.10	The director should ensure that responsibility for case management is clearly defined within	The Oakhill Development Plan 2007-2010 states that a deputy director will be responsible to ensure that case management is linked to the participation and involvement programme during the	The Oakhill Development Plan 2007-2010 The head of safeguarding and offending behaviour is also	Not achieved to date The arrangement for case

	the staffing structure.	first quarter of 2007. A new post of Programmes Manager is to be created and appointments set for February 2007.	<p>responsible for case management. She intends to completely review the practices at the centre in relation to case management. The post of case and programmes manager has recently been advertised. The previous head of operations was designated effective practice manager. The aim is to bring together relevant staff from all departments and hold a multi-disciplinary meeting each day to discuss all new admissions, allocate young people to units and to review any young people who are vulnerable or are a challenge. The view of a number of people interviewed was that this forum had resulted in progress in this respect. However, no other forum is available to regularly discuss all the young people at the centre, as is recognised good practice in other STCs.</p> <p>A separate forum for the most challenging and complex young people has recently been established, called the 'complex case review meeting'.</p>	<p>management is confusing and different aspects are managed by different departments. A thorough review of the current processes and a fresh approach to this very important aspect of the work of the STC is crucial and long overdue.</p>
2.11	The director should ensure that staff comply with the requirement to	Addressed earlier as Recommendation 2.2.		

	consult parents and carers ahead of making decisions that affect the lives of children and young people.			
2.12	The director should as a priority establish an information sharing protocol for all staff providing a service to children and young people at the Centre.	The Oakhill Development Plan 2007-2010 states that the Director reviewed the centre's information sharing protocol, which had been distributed to appropriate stakeholders. Healthcare staff are allocated to residential units, residential staff are supporting in school, and teachers supporting evening activities. A multidisciplinary approach to care planning, assessment and review processes is being adopted.	The Oakhill Development Plan 2007-2010 The Assessment Team Review Meeting is happening daily. An inspector sat in an ATRM. Head of Healthcare reported that young people are now allocated link nurses to supervise their health plan. Care staff were seen to be in school supporting teachers.	Ongoing work
2.13	The director should review the planning, organisation and staffing of the activities programme.	The Oakhill Development Plan 2007-2010 states that the Head of Activities will be responsible for a centre wide review of activities across the disciplines, to be completed by the second quarter of 2007. The centre has a planning coordinator, and there was evidence seen of pre planned activities being organised for the young people.	The Oakhill Development Plan 2007-2010 Observation by inspectors and staff reports suggested that staffing issues are having a negative impact on provision of activities for young people. On Cedar on Tuesday evening, one member of staff supervised five girls on her own for an hour. She was quite unable to initiate individual work.	Not achieved Given that the young people do not have many opportunities to participate in activities off the living units every effort should be made to provide a range of interesting

			<p>However, on Willow, a member of staff did engage with the girls by showing them her dancing skills. She kept the whole group engaged for at least half an hour. Girls spoken with complained that there are limited opportunities for them. Boys are able to go outside for football, but many girls do not want to do that. Several young people said they had opportunities for physical activities, but sometimes that depends on the staff on duty.</p> <p>There was little evidence of organised activities apparent at the time of this visit.</p>	<p>activities and opportunities for fresh air and exercise to all young people.</p> <p>To achieve this, staffing levels obviously need to be sufficient and consistently so.</p> <p>This recommendation remains outstanding.</p>
2.14	The director should immediately cease the practice of limiting children and young people's access to underwear and books as part of the reward and sanctions.	Addressed prior to the last inspection by CSCI in January 2007. Were found to have ceased in September 2006	<p>The Oakhill Development Plan 2007-2010</p> <p>Interview with the Director in January 2007, discussion with the external manager, and observations on the residential units in January 2007</p>	Achieved.
2.15	The director should restate the guidance on the single separation of children and young people	The Oakhill Development Plan 2007-2010 states that a cross centre multidisciplinary review of single separation/practice including "time out" and elective separation will take place by the second	<p>Records of sanctions seen on the units did not correlate with single separation records.</p> <p>Whilst triangulating separation</p>	<p>Not achieved.</p> <p>There was an inadequate understanding</p>

	<p>and closely monitor and audit the practice of managers and staff.</p>	<p>quarter of 2007, under the supervision of the Director.</p> <p>The Plan also states that a system of quality assurance for the management of single separations will be devised, and staff trained appropriately. This work will be in place by the end of the second quarter of 2007.</p>	<p>records and sanction records it was noted sanction records were not been maintained appropriately.</p> <p>In Oak unit a sample of sanction records found</p> <ul style="list-style-type: none"> ○ Records not being audited and signed off by senior staff, 16 of 36 records in March not signed by Head of Dept. ○ No single separation record for an event noted as 'Put in room to calm down' ○ Sampled March sanction records and page 83 in particular, and found: <ul style="list-style-type: none"> - Three records not signed by members of staff making the record, nor head of department signature as expected. - On one double page (83) only first name of trainee and staff recorded. Of the eight records on page 83, four only used first name of trainee and three only used first name of staff. - Three of the eight records did not have the 'resolution' recorded. - The record stated that the 	<p>amongst sampled staff of the meaning of single separation and inadequate recording. Some records were not signed or dated.</p> <p>New Recommendation</p> <p>The director must ensure that records related to the behaviour management of young people are recorded fully and appropriately at all times, and routinely and regularly monitored by management.</p> <p>Work in progress.</p>
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			<p>young person was 'put into room to calm down'. Two of the care team spoken with had differing views of whether this was single separation or not.</p> <p>The centre had a senior manager from the company seconded to Oakhill to review and devise a quality assurance system for its contractual obligations, procedures and practice.</p> <p>The first draft of this proposal was seen on a computer as the printer was not functional, and the manager responsible, the National Health and Safety Manager, outlined her plan to audit each process to advise management and ensure it is completed in accordance with policy.</p>	
2.16	The director should ensure that the management of complaints retains the confidence of the children and young people for whom it is intended.	The Oakhill Development Plan 2007-2010 states that a system of quality assurance will be established, and a meeting will take place with the advocacy service "VOICE" to see if the complaints system might be improved. This will be the responsibility of a deputy director, and be addressed by the second quarter of 2007.	The Oakhill Development Plan 2007-2010 Interview with the complaints administrator. She meets young people directly to ensure that their complaints are received properly, and may deal with minor complaints herself. She has not been trained in child protection, nor received any training in	Not achieved. There is evidence of complaints being addressed honestly and fairly by the relevant officers. However, the management and recording of complaints needs

			<p>complaints management or investigation. She is currently line managed by the audit and compliance manager, who is similarly untrained for this particular work.</p> <p>Records of complaints, child safeguarding referrals and complaints against staff were reviewed during the inspection, and the head of safeguarding, and the investigations and health and safety officer were interviewed.</p> <p>Inspectors noted that there is no audit trail for complaints that are subsequently reclassified as safeguarding issues (and forwarded to the head of safeguarding) or as complaints against staff (and forwarded to the investigations officer).</p> <p>The complaints forms did not include any record of the process, and complaints files might be held by three different people, dependent upon how the complaint was defined.</p> <p>Some of the complaints held in the complaints file and considered to</p>	<p>attention, and some key staff need to be trained appropriately.</p> <p>As some young people were not satisfied with the outcome of their complaint, it is evident that the processes for dealing with their concerns are in urgent need of review.</p> <p>All those involved in the management of the complaints procedures need to ensure they retained the confidence of the young people.</p> <p>New Recommendation</p> <p>The staff designated as responsible for the administration of</p>
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			<p>have been resolved did not include the investigation process, who investigated, outcome and whether the young complainant was happy with the outcome.</p> <p>Complaints are passed via a staff member or the VOICE advocate. There is no mechanism for young people to post complaints privately without recourse to others in place.</p> <p>One complaint related to hair found in food, was made by all the young people on one unit. The response to the complaint was simply that the kitchen was monitored by the appropriate authorities, but no acknowledgement that hair may have been in the food, or apology.</p> <p>Four of the young people who complained about hairs in their food were spoken with. None were satisfied with the way the complaint was managed or with the outcome, although records indicated that they were partly satisfied.</p> <p>Two trainees stated no confidence in the complaints system as nothing gets done.</p>	<p>complaints and those who line manage them should receive appropriate training in complaints investigation, and the safeguarding of young people.</p> <p>New Recommendation</p> <p>The Director should ensure that the management and recording of general complaints, safeguarding issues and complaints against staff be reviewed to ensure that there is a clear audit trail to enable the progress of any complaint to be monitored.</p> <p>New Recommendation</p> <p>The Director should review the</p>
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			<p>There was little evidence that the centre was learning from the outcomes of complaints. There was no analysis of the different concerns raised through the complaints procedure.</p> <p>Three recent safeguarding investigations held by the head of safeguarding at the centre were inspected. They were found to be appropriately detailed and managed. However, the majority of complaints and concerns raised at the centre were investigated internally. Consideration could usefully be given to involving appropriate external agencies, as appropriate.</p> <p>The YJB monitor was reviewing the unit's response to a PCC complaint by a trainee, and was not satisfied with the centre's outcome. He was still investigating this matter at the time of the visit.</p> <p>An inspector also watched a recording of this restraint and concluded there was little evidence to show the restraint was used as 'a last resort'. The inspector shares the YJB monitor's dissatisfaction</p>	<p>complaints procedures to enable young people to make complaints without the need to involve the staff or other people.</p> <p>New Recommendation</p> <p>The Director should ensure that the nature of any investigation, the outcome of any complaint and the view of the complainant about that outcome should be included on all resolved complaints.</p> <p>New Recommendation</p> <p>The director must ensure that all staff are aware of and comply with the centre's own procedures related</p>
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			with the centre's response.	to the use of restrictive physical intervention and national standards.
2.17	An effective means should be developed for consulting with children and young people about the provision of food at the Centre.	<p>The Oakhill Development Plan 2007-2010 states that the Trainee Council will have a standing agenda item for food monitoring, and relevant minutes and/or representation should be sent to the catering manager. The catering manager will send out weekly food monitoring forms to the RSM's for completion by each unit for one month (March 2007) and thereafter quarterly. This process will cross reference with the participation and involvement programme.</p> <p>This will be the responsibility of a deputy director and be in place by the end of the first quarter of 2007.</p>	<p>The Oakhill Development Plan 2007-2010.</p> <p>Young people said that they were invited to choose meals by ticking a form each week. They said that they had no choice in menu, and that they never had the opportunity to speak to the chef directly on the residential units. Most young people spoken with said that they were not satisfied with food served.</p> <p>Several young people have complained about hair in food, and feel that they were not listened to. None of the young people made any reference to the Trainee Council as a forum to discuss food.</p>	<p>Not achieved.</p> <p>There did not appear to be any effective means for consulting with young people about the provision of food at the Centre that enjoyed the confidence of young people at the time of this visit.</p> <p>New Recommendation</p> <p>The Director should review the procedures for consultation between catering staff and young people to ensure that they are effective.</p>
2.18	The director should	The Oakhill Development Plan 2007-2010	The Oakhill Development Plan	Ongoing work.

	<p>ensure that catering services at the Centre are resourced to meet the special dietary needs of individuals and groups of children and young people.</p>	<p>states that the deputy director will meet the catering manager regularly to discuss menu structure, choice, user feedback and the YJB Monitor's report.</p> <p>The RSM's are to eat on the unit and in the dining room with the young people.</p> <p>Management information about special dietary needs is to be collected at the time of admission.</p> <p>The centre aspires to meet the National Healthy School Standards.</p> <p>These targets are to be met by the end of the first quarter of 2007.</p>	<p>2007-2010.</p> <p>Inspectors ate in the dining room with young people on three occasions. On one of those occasions, an RSM was sat with young people for the meal.</p> <p>During an interview with one of the nursing staff, it was reported that the dietary needs of young people were routinely assessed at admission. Young people with special health needs were being catered for.</p> <p>The catering manager was interviewed, and said that he prepared special meals for young people who needed them, and they were managed by health care staff.</p> <p>Inspectors saw a nurse collecting a meal for one of the young people. The chef said that all the meat served (except pork) was Halal, to ensure the religious needs of Muslim children were met. Whilst this is commendable, perversely it does not meet the needs of young people who specifically would not want Halal meat.</p>	<p>There remain issues about choice and quality of food served to young people.</p>
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2.19	The director should ensure that children and young people in the Centre have access to a Minister of their own faith when required.	The director said that the Chaplain who previously ministered to the centre has now left. The centre does not have access to a Minister.	Staff spoken with said that religious and community leaders from other faiths could be called upon as required, but this is usually arranged through the Chaplain.	Not achieved.
2.20	Develop and implement a behaviour management policy, which includes the rewards and sanctions system and monitor its application rigorously.	<p>The Oakhill Development Plan 2007-2010 states that the current systems and procedures for behaviour management are to be reviewed by the senior management team, the education department, and the multi disciplinary teams across the centre. This work is to be led by the director and head of education and be completed by the end of the first quarter of 2007.</p> <p>A more rigorous reward and sanction system was revised in February this year.</p>	<p>The Oakhill Development Plan 2007-2010.</p> <p>Members of the care team said that the discipline and control in the school setting is not yet adequate, although care staff are in the classrooms to support the teaching staff. Teaching staff equally felt that the management of behaviour in school is the greatest obstacle to development for the department overall and for individual young people.</p> <p>On the first day of this inspection, a teacher was assaulted. On the second day a staff member was punched in the face by a young person whilst walking over to school with them.</p> <p>Young people spoken with had varying views on the rewards system. Two young people on the platinum unit are very happy as they spend time away from some</p>	<p>Not achieved. Ongoing work</p> <p>The management of young people's behaviour is an issue that was raised by many of the staff from all disciplines spoken with during the inspection.</p> <p>All staff working with young people at the centre require the skills, training and support to give young people clear and consistent messages about the expectations for their behaviour and subsequent</p>

			<p>of their peers. Several other young people are not so keen on the system.</p> <p>Some staff spoken with suggested that they had limited faith in the revised reward and sanction system, and did not see it as an effective means of behaviour management. The view was that staff are suffering assaults, and yet in their view the severity of the offence is not being reflected in the sanctions applied.</p> <p>Inspectors saw a number of staff dealing with difficult young people and effectively defused situations. However, young people were not consistently challenged by the adults caring for them and inspectors witnessed a number of young people 'play fighting' which on at least two occasions resulted in one of them being hurt.</p>	<p>consequences.</p> <p>This requires a whole centre approach with managers providing clear leadership and direction.</p>
2.21	Further develop the quality assurance and lesson observation system to focus on key issues such as the management of behaviour, lesson	The Oakhill Development Plan 2007 – 2010. The head of education confirmed that lesson observations are carried out each quarter with permanent teaching staff. Supply teachers are observed in lessons within 48 hours and if deemed unsatisfactory they would not be used	Inspectors were provided with a copy of the learning centre's 'self-assessment' report, which is presented in a format based on the inspection framework for schools. This provides written evidence of progress made in the majority of	HMI Ofsted Education Inspectors were not involved with this inspection, therefore verification of progress was not

	<p>planning and the use of learning resources.</p>	<p>again. All learning support assistants (SLAs) are also being observed as part of the overall quality assurance process.</p> <p>A quality assurance group met monthly. Quality assurance systems are built into a calendar with clear objectives throughout the academic year.</p> <p>Attendance is being monitored, as is the reason for removal from classroom.</p> <p>Lesson plans were now in place.</p>	<p>areas for development highlighted in the inspection report from June 2006.</p> <p>The head of education and two of her senior staff also provided inspectors with information during the inspection.</p>	<p>confirmed.</p> <p>Progress to be formally confirmed by HMI during the next inspection.</p>
2.22	<p>Further develop the curriculum to provide more stimulation, relevance and interest.</p>	<p>The young people were recently placed in lessons in a 'banding' stream, rather than in groups from the individual living units.</p> <p>Other additions to the curriculum included drama, with a modern version of the Merchant of Venice staged as a production.</p> <p>Young people produced paintings that were shown at an art exhibition locally. This was done in collaboration with the Arts Council and local youth services.</p>	<p>It was early days, but several young people said they preferred being in 'banded' groups, saying the lessons were more interesting.</p> <p>Not yet available but plans for 'drumming' sessions in learning centre.</p> <p>A number of other initiatives were also confirmed.</p> <p>An inspector visited the exhibition of young people's art work at the local community centre. The staff and volunteers at the community centre were extremely positive about the work produced by the young people and were positive in their comments about this aspect</p>	<p>As above</p>

			<p>of the centre's development. They were keen to undertake further projects with the centre.</p> <p>An additional positive development was the restaurant/café which was operated by the young people during special events at the centre. Evidence was seen of testimonies and pictures of the different events that indicated the output by the young people was of a high standard.</p>	
2.23	<p>Improve the co-ordination of movements so as to reduce the loss of teaching time and improve poor behaviour between lessons.</p>	<p>The Oakhill Development plan 2007 – 2010.</p> <p>The head of education said she was hopeful that the 'banding' of young people into classes related to their assessed competencies will make a difference to movements and behaviour management. She felt there was some very recent evidence of this.</p> <p>A nominated staff member of the residential care department is responsible for the liaison in school and the efficient movement of young people. This is seen as a positive development.</p> <p>A member of the education senior management team is available to deal with any disruption in classrooms.</p>	<p>Some staff interviewed, including those at management level, felt that the 'banding' of young people in classes had created further difficulties in the coordination of movements around the learning centre.</p> <p>Young people's behaviour continues to be disruptive at times in the learning centre. Even though procedures are in place to deal with this, including having senior education staff and the educational psychologist talking with young people in an effort to get them back into the classroom, disruptions are still higher than managers and teaching staff would wish.</p>	As above

		An additional room is being prepared for use as an 'inclusion' room for young people who have been removed from the classroom but where efforts are being made to reintegrate them back into lessons. The 'break-out' room also continues to be available as a place for young people to calm down and prevent them being escorted to the house block.		
2.24	Develop the accommodation, including the library, into a more appropriate learning environment with more ICT facilities.	<p>The head of education said the learning centre is not responsible for the library. It is apparently the responsibility of G4S.</p> <p>The head of education confirmed that although the ICT facilities have not improved, they are in the process of exploring the possibility of e- learning in a controlled way, that avoids the difficulties of free access to the internet.</p>	<p>Inspection of the library confirmed that little has been done to improve this facility and ensure it is a more appropriate learning environment.</p> <p>The ICT facilities have not improved</p>	Not yet addressed. Ongoing.
2.25	Further develop the role of all senior care officers (SCO's) to reflect the best practice found in some lessons.	The head of education confirmed that education staff are involved with the initial training course for care staff. They have issued guidance for staff on expectations for them in the classroom. The involvement of care staff when in the classrooms are on the observation sheet.	<p>The view of some teaching staff was that some care staff are effective and involved in the classrooms. However, some staff, particularly new staff, do not appear as comfortable in the classroom setting.</p> <p>It is evident that further training and support is needed for care staff in relation to their role of supporting teaching staff in the classrooms.</p>	Not yet addressed. Ongoing

2.26	The director should as a priority review the resourcing and content of the crime avoidance programme.	<p>The Oakhill Development Plan 2007 – 2010 sets out targets for achieving an analysis of index offences to inform the most immediate needs by the second quarter of 2007.</p> <p>The aim is also to develop series of modules, based on admission processes, offences, emotional needs, coping mechanisms and other relevant criteria, by the third quarter of 2007.</p>	<p>Interview with the head of safeguarding and offending behaviour, also interview with head of education and senior staff responsible for delivery of offending programmes during education day.</p> <p>The head of safeguarding is keen to develop this area of the centre's work with young people and with a background in youth offending services she has some ideas about how this might be developed. However, she has been in post only a few weeks and after an induction period she is beginning to separate all the areas of development requiring her input and is setting targets for that. She feels the appointment, hopefully in the near future, of the case and offending programmes manager will facilitate further development in this area.</p> <p>Care staff interviewed said they received some training in relation to providing offence related work, but felt they would benefit from further training.</p>	<p>Not yet addressed. Ongoing</p> <p>The delivery of crime avoidance was unusually split between teaching staff and care staff. There did not appear to be an overview of coordination of this process and overall quality was difficult for the centre to assess.</p> <p>The new and pending appointments will provide an opportunity to improve practice in this area and ensure the work done with young people to reduce recidivism is meaningful.</p>
2.27	The director should nominate a senior manager to be	This has been achieved, although very recently, with the appointment of the head of safeguarding and offending behaviour.	As above.	Achieved.

	responsible for the delivery and evaluation of the crime avoidance programme.			
2.28	The director and the head of healthcare should review the contribution of health care staff to the programme of health education for children and young people at the Centre.	The Oakhill Development Plan 2007-2010 states that a staffing review has been completed, and a lead nurse has been allocated to each residential unit. A PSHE training programme has been revised, and health care staff are to work with education colleagues to produce an Oakhill healthcare promotion programme with nurse lead responsibility. The Head of Health Care is to take responsibility for this work, which is to be in place by the end of the first quarter of 2007.	<p>The Oakhill Development Plan 2007-2010.</p> <p>The Head of health Care and two of the nursing team were seen during this visit. The Head of Health Care confirmed that nursing staff are now delivering a health promotion programme in the school every Wednesday afternoon.</p> <p>The health care team has two full time vacancies for junior nurses.</p> <p>The establishment is for 19 whole time equivalent posts.</p> <p>The team includes four "band 6" nurses.</p> <p>A forensic psychologist is to be recruited. The centre now has 24 hour GP cover for six days each week, and Tier 3 support from a local Children and Adolescent Mental Health Service (CAMHS) has been purchased by the centre.</p>	Achieved.
2.29	The director should give priority to reviewing the	The Oakhill Development Plan 2007-2010 states that the Suicide and Self Harm (SASH) prevention practice was reviewed	The Oakhill Development Plan 2007-2010.	Ongoing work

	<p>strategies for the management of suicide, self-harm and behaviour management.</p>	<p>in December 2006, and a CAMHS strategy adopted and implemented (Tier 1 – 4).</p> <p>Centre policy was reviewed to include daily multi disciplinary meetings to discuss all children on SRT.</p>	<p>The Head of Health Care states that SASH prevention is not solely the responsibility of the Primary Care Trust, but a shared responsibility across the centre. In line with this, the daily multi disciplinary ATRM meetings review each young person considered to be at risk of SASH and agree appropriate behaviour management strategies.</p> <p>The Head of Health Care is reviewing current policies and procedures for addressing SASH issues. She hopes to engage with the group “Young Minds” to assist her in this process, and hopes to produce her report by July 2007.</p> <p>The head of Healthcare said that all young people admitted to the centre have their full health care needs and challenges risk assessed within two days of admission.</p>	
2.30	<p>The director should set standards for healthcare assessments and healthcare plans which are compliant with the Children Act</p>	<p>The Oakhill Development Plan 2007-2010 states that the Head of Healthcare will review and develop as necessary all Oakhill healthcare procedures and documentation to ensure compliance with legislation and guidance.</p>	<p>The Oakhill Development Plan 2007-2010.</p> <p>The Head of Healthcare said that this work was underway, but not yet complete. The centre plans to completely revise its assessment</p>	<p>Ongoing</p>

	and which reflect current models of good practice.	Procedures for the management of Looked After children are to be developed and implemented, and there is to be ongoing development of the assessment and care pathways. This is to be completed by the end of the second quarter of 2007.	procedures in line with the Common Assessment Framework (CAF)	
2.31	The director should as a matter of urgency obtain an agreement with the PCT to share information held at the Centre with managers and staff responsible for the health and well being of children and young people.	The Oakhill Development Plan 2007-2010 states that the Head of Healthcare will develop and implement effective communication systems within healthcare and throughout Oakhill by the second quarter of 2007.	The Oakhill Development Plan 2007-2010. The Head of Healthcare said that the healthcare policies are to be integrated into G4S policies so that communication of appropriate information between disciplines will be included procedurally. She takes a pragmatic view, such that if the young person consents to medical information being shared with other disciplines within the centre for the benefit of the young person, she has no objection to that. She is confident that her staff ask young people, when admitted, for their consent to share medical information where appropriate. However, she acknowledges that there is no space on the admission record where that consent is recorded in writing. She agrees to address that issue.	Achieved. New Recommendation The director and the healthcare manager should ensure that healthcare staff who admit young people record on the admission forms whether the young person consents to their medical information being shared.
2.32	The head of operations should review and clarify the	The Oakhill Development Plan 2007-2010 states that an audit and evaluation of current provision for the issuing of keys	With the audit to be completed, no other action is considered to be necessary.	Achieved.

	<p>schedule of visitors to the Centre who are exempt from the requirement to carry keys and a radio while working within the secure perimeter.</p>	<p>will be carried out by the end of the third quarter of 2007. Alternative safety systems and means of raising alarm will be considered. The policy in relation to the issuing of keys and radios will be clarified and rewritten where appropriate. This work will be the responsibility of the Head of Operations/Security Manager, and be completed by the end of the third quarter of 2007.</p> <p>The Director and the YJB monitor agree that this recommendation followed a specific and unusual incident in June last year at the time of the inspection which had been addressed fully at the time</p>		
2.33	<p>The director should ensure that the personnel responsible for reviewing archived images recorded on the Centre's CCTV system are trained and equipped for the task.</p>	<p>The Oakhill Development Plan 2007-2010 states that the Head of Operations will identify and deliver appropriate training to security managers, security collators, duty operational managers and the gatehouse manager and audit and review Director's Rules in relation to the use and control of the CCTV across the centre.</p>	<p>The YJB Monitor said that the archiving of CCTV images had been extended to 15 days (from 9) to the detriment of the quality of the image.</p> <p>Evidence was not forthcoming on the target having been achieved for the appropriate training having been achieved.</p>	<p>Ongoing</p> <p>Oakhill needs to take a more proactive approach in relation to the assessment of risk. When risks are identified action should be taken as required, and the revised procedures effectively communicated</p>

			<p>However, an inspection of the CCTV coverage of the centre, and a discussion with control room staff about camera use etc, indicated that there are “blind spots” in the camera coverage in certain areas. Other areas outside are also reportedly not covered by cameras. It is not clear whether young people have access to these areas. Control room staff said that the blind spots were reported to management some time last year (July/August) and no response has been received.</p> <p>It was unclear if risk assessments have been undertaken relating to the areas not covered by cameras as staff could not immediately confirm this.</p> <p>The head of security and operations said that if there was a problem this would then be ‘sorted’</p>	<p>across the centre and monitored effectively.</p> <p>New Recommendation The director should ensure that appropriate risk assessments and management strategies are in place to deal with any potential ‘blind spot’ areas not covered by the CCTV cameras. Systems should also be in place for review.</p>
2.34	The head of operations should establish a programme for testing the Centre’s fire alarms and evacuation	The Oakhill Development Plan 2007-2010 states that the Head of Operations will liaise with the local fire and rescue services, and establish a system of weekly fire alarm tests and frequent exercises. Responsibility for this work will rest with the Senior Management Team,	<p>The Oakhill Development Plan 2007-2010</p> <p>An RSM has been given a specific responsibility for fire safety within the centre. He was spoken with by an inspector, and said that the fire</p>	<p>Not yet achieved.</p> <p>New Recommendation The director should review and as</p>

	<p>procedures across the 24-hour day.</p>	<p>and it will be completed by the end of the first quarter of 2007,</p>	<p>alarms are routinely tested in zones around the campus. There was a fire alarm test on the day of inspection. A review of evacuation procedures is under way but not yet completed at the time of this inspection.</p> <p>A table top exercise has been completed and amendments to procedures recommended. These have to be finalised before implementation. Both the responsible RSM and the head of security and operations separately referred to the desk top exercises and planned procedural changes. However, the recommendations were not seen during this visit because the RSM was unable to print them off.</p> <p>However, following discussion it became apparent that there is a need to reassure the young people if the fire alarm is to be activated at night. The RSM acknowledged that this has not been considered, and agreed to include guidance to staff about this in the procedures, and to include information for the trainees in the 'welcome pack'</p>	<p>appropriate revise the fire safety procedures, including amending the policy and procedural guidance. This should include an expectation that staff reassure young people who might be in the bedrooms, when testing of systems or drills take place, about their safety.</p> <p>This might be usefully included in the young people's welcome pack.</p>
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