

Hassockfield Secure Training Centre

Inspection report for Secure Training Centre

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About this inspection

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

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

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

The key inspection judgements and what they mean

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

Good: this aspect of the provision is strong

Satisfactory: this aspect of the provision is sound

Inadequate: this aspect of the provision is not good enough

Not judged: this aspect of the provision was not judged

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Service Information

Brief description of the service

1. Hassockfield Secure Training Centre (STC) is managed by Serco, which is a private company, responsible for other services, including adult prisons. Hassockfield STC contracts with the Youth Justice Board to provide accommodation for children and young people serving sentences or remanded to a secure setting.
2. Hassockfield STC is situated near the town of Consett in County Durham. It is a purpose built secure establishment.
3. The STC currently offers provision for up to 58 young people of mixed gender aged from 12 to 17 years. They also have purpose built provision for up to three young mothers and their babies.

Summary

The overall quality rating is good.

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

4. This is an announced inspection to evaluate the effectiveness of the custodial element of the Detention and Training Orders (DTO), and the regime for young people serving Section 91 sentences or those remanded to the centre.
5. The last full announced inspection took place in August 2006 and an unannounced inspection was carried out in February 2007. The purpose of the inspection in February 2007 was to review progress in relation to the recommendations made in the report of the August 2006 inspection. The unannounced inspection report is attached as an appendix to this report. Also attached is the report of an unannounced inspection conducted in April 2004, after the tragic death of a child at the STC. The delay in publishing the report from that period was at the request of the coroner.
6. The inspection used the standards and criteria devised by the Youth Justice Board (YJB), as set out in the service level agreement between Ofsted and the YJB.
7. Four inspectors from the secure estates team and two HMI education inspectors conducted the inspection. The education inspectors reviewed the education facilities against agreed standards and their findings and recommendations are included in this report.
8. The secure estate inspectors spent three days reviewing the progress of the social care aspect of the service. Inspectors met with managers, staff, senior

staff from Serco, the YJB performance monitor, health care professionals from within and external to the establishment, the advocate and staff from the local safeguarding teams.

9. Inspectors spent time with young people from early morning until evening time when they were preparing for bed. Inspectors also met with night staff.
10. Detailed written and verbal feedback was given to senior managers and representatives from the YJB on the 2 July 2007.

What has been improved since the last inspection

11. These inspection findings showed once again that the centre has made significant progress in a number of areas. The director and his senior management team have continued with their plans for improvement at the centre.

12. The inspection team found:

- a child focused establishment which has consolidated this position even further
- care staff who feel more valued and part of a professional team working with young people
- a considerable investment in training for staff to ensure they have the skills to work effectively with young people
- commitment to a method of behaviour management that appears to have resulted in a significant reduction in the use of restrictive physical intervention and a reduction in the use of enforced single separation
- a revised induction procedure that involves young people meeting staff from all departments on their first full day
- a revision of the social awareness programme in an effort to ensure a more meaningful process for young people and staff
- an improved activities programme available to young people
- improving procedures to ensure that agencies are held to account when making arrangements for resettlement
- a focus on consultation and participation with young people
- positive professional relationships with the local safeguarding service, which ensures young people are protected
- commendable efforts to form partnerships with relevant stakeholders to support all aspects of the centre's work
- considerable investment in a system for the electronic recording and monitoring of incidents
- a learning organisation demonstrating reflective practice that is open to challenge and change.

13. Managers have plans for further improvements which will build on progress and developments to date. They are aware however, of the importance of ensuring a period of consolidation takes place. With that in mind the recommendations made in this report will build on the positive progress already made.

The effectiveness of the service

Helping children to be healthy

The provision is satisfactory.

14. Healthcare services continue to be managed and organised by the assistant director of healthcare who reports to the director of the centre and is the member of a senior management team. The healthcare team continue to be well integrated in to the work of the establishment. Nursing staff are involved in the admission process for each individual young person and participate in the initial mental health screening and risk assessment process, for which they receive training.
15. Young people's health needs are thoroughly assessed upon admission. They receive a comprehensive healthcare service which includes having their health needs assessed on admission and having individual plans prepared to address these. An initial mental health service assessment is also undertaken during this period.
16. The centre has a contract agreement with the mental health team at the Kolvin Unit, which is a local Child and Adolescent Mental Health (CAMHS) service. A community psychiatric nurse (CPN) and psychiatrist are available for referral as necessary. Young people are referred to the CPN if a detailed mental health assessment is required, or if ongoing therapeutic intervention is needed. The CPN reported that referrals are made in a timely and appropriate fashion and that there is a good working relationship between the centre and the Kolvin unit.
17. The procedure for dealing with potential risks presented by young people continues to be robust. A 'high risk assessment team' (HRAT) procedure is initiated if young people are considered to be at risk of harm to themselves. The procedure includes the development of a support plan for the young person with advice to all staff about how best to deal with the issues presented.
18. Young people are supported by positive working relationships between health care professionals, which are child focused. External and internal health professionals reported good working relationships with each other and through observations of practice, discussions, and information on files, they were found to work closely together to address the needs of young people.
19. Nursing care is available on site 24 hours a day. A GP visits six days a week and sees all young people within 24 hours, except during weekend periods. The dentist visits weekly. Young people are entitled to and receive, if requested, monthly medical examinations and/or health assessments by

health staff. They also have access to National Health Service facilities and specialists when clinically required.

20. The centre has recently interviewed and appointed a substance misuse coordinator. The start date is subject to the satisfactory completion of recruitment checks. This will provide for three substance misuse workers within the centre. These posts are all managed by the assistant director of healthcare.
21. Substance misuse staff routinely consult with young people. They encourage young people to contribute to the newsletter 'new kids on the block'. Teaching staff also encourage young people to participate in the production of information for the newsletter. Substance misuse staff work with young people individually and also provide some sessions with groups.
22. Smoking is not allowed at the centre and substance misuse staff reported that the cessation of smoking on arriving had not been particularly problematic for the young people. The young people did not mention this as a concern to inspectors. Young people can also have access to the local 'sexual health promotion team'.
23. Young people, external visiting professionals and care staff across the centre all confirmed that practices in the health centre are child focused. Inspectors also observed this during the inspection. However, the premises do not lend themselves to this. The location of the 'time out' room detracts from the principle of child centred approaches. Internal and visiting health care professionals spoken with were critical of the manner in which the noise from the 'time out' room could disrupt them when consulting with children. A young person who was being admitted to the centre was very anxious and looked distressed when hearing noise from an adjoining room. This was observed by an inspector.
24. The admissions room and other areas of the medical centre need decorating. The décor is presently poor; there is a broken door hinge in the 'time out' room, chipped and marked paintwork throughout and repairs needed where shelves have been removed. Senior managers confirmed that it is their intention to focus on the healthcare centre once the refurbishment of the living units has been completed.
25. The medication administration records and storage facilities need to be reviewed. The controlled drugs register (CDR) does not, at all times, reflect the medication held in stock. The present system of secondary dispensing and reducing totals of stock held, at the same time, does not give an accurate indication of stock if a young person then refuses medication. Totals then have to be amended which is not good practice. The administration witness signature in the CDR is not entered at the point of drug administration, but rather when the medication is secondarily dispensed, ready for the drug round to start.

26. The centre does not have guidance on homely remedies and reported that none were given other than paracetamol. However, a stock bottle of piriton was held, which reduces hay fever symptoms. This was administered to a member of staff upon request during the inspection. Clear guidance needs to be provided to ensure a thorough process of storage and administration.
27. Nursing staff spoken with during the inspection said they feel well supported by their line manager. They said the daily supervision of practice and advice is good. There did however, appear to be a difference of opinion about the frequency of formal supervision. Evidence of the formal and clinical supervision of nursing staff was not available during the inspection. All supervision records produced by other managers are sent to the human resources manager so she can monitor frequency and to a certain extent quality assure them. This was not the case with supervision records for nursing staff. The manager for health care said that the clinical aspects of the supervision records can be seen only by appropriately qualified medical professionals. She did however agree that it is useful for the professional development aspect of the notes to be seen by the human resources manager.
28. The healthcare manager said that she had access to appropriate support and supervision either by phone, in company meetings or in person. However, she felt that the development of contacts with other professionals in similar situations would be beneficial to development in the centre.
29. The centre is expected as part of the contract with the YJB to submit a report each year commenting on healthcare and education services. There appears to be some confusion about when the last report was received by the YJB. The manager of healthcare said she had prepared a report each year, but not so far for this year. This is a contract matter that requires clarification from the YJB.
30. All healthcare staff at Hassockfield STC are employed by Serco and are therefore fully integrated at all levels within the centre, including management. This is not the case for the three other STCs, who have contractual arrangements with private or NHS specialists to provide these services. The other STCs have the potential for an independent quality assurance process which staff in the healthcare department at Hassockfield do not have. The healthcare manager and the director confirmed it would be useful for the healthcare services to have a regular independent assessment of its practices and procedures. An independent assessment is already carried out in respect of the administration of medication at the centre.
31. The vast majority of young people and staff are complimentary about the quality, choice and quantity of food provided. Inspectors found a variety of meals available during the inspection that were nutritious, well presented and of good quality. However, several young people said the low calorie healthy

choices are repetitive and limited. The main low calorie meals they are aware of are the salads and baked potatoes with fillings. The chef said that the menu has been agreed with a nutritional advisor from the local Primary Care Trust.

32. Young people have breakfast and supper in the house bases, such as cereal and bread, but the food available in the house bases is limited in healthy options. Although fruit is available for young people, they tend to eat this between meals and not as alternatives to high calorie and high carbohydrate foods. Three young women said they were very concerned about the amount of weight they had put on in a short period of time. Some young people were eating well for the first time in a long time and needed some nutrition and a certain amount of weight gain. However, for those young people where excessive weight gain is of concern to them, a clear programme for healthy eating and exercise is needed as part of their health care plan.
33. Several young people said they would like to do more exercise, but they said only a few staff are qualified to supervise them in the fitness suite, or with the weights.
34. Easy access to drinking water across the centre is limited in some places. Care staff in the education centre stated it would be provided if requested. The young women in Minerva houseblock complained that they do not have access to cool water. They also said they tended to drink high calorie squash drinks as this made the tap water taste better. This is an unhealthy alternative to chilled, filtered, drinking water.
35. A tuck shop is available for young people's access on a weekly basis. Young people are able to spend earned credits on sweets, which are restricted and toiletries and other supplies. In line with encouraging a healthy lifestyle, consideration needs to be given to the type of sweets available in the tuck shop.
36. The staff canteen has been extended to provide a communal dining area for young people. The original design for the centre provided dining facilities in the living units for young people. However managers quickly realised that this is not the best way to provide good quality meals for young people, nor to offer them opportunities to develop social skills in a communal dining setting. At the present time young people can eat both meals a day in the 'Hungry Hut Bistro'. Although consideration is being given to offering a choice of where the tea time meal can be consumed, the choices will be the dining area, house base or garden area if the weather is appropriate.
37. The centre had achieved the 'Healthy Schools Award' in recognition of the quality of and choice of food.
38. At the present time young people have limited opportunities to plan, shop and prepare meals in preparation for independent living, except for lessons in

school. Senior managers confirmed that this is an area they intend to expand further.

Protecting children from harm or neglect and helping them stay safe

The provision is satisfactory.

39. The centre has well established and clearly understood security measures in place to ensure that the young people in custody are held safely and securely within its confines. Arrangements for moving groups and individual young people are explicit and well rehearsed. Daily checks of the premises are carried out, and any issues arising are shared as appropriate with managers and staff during routine daily handovers. Where potential security issues are identified, these are addressed immediately.
40. One area of risk was highlighted during the inspection, concerning access of a young person to a less secure area of the site. This was addressed immediately.
41. Clear procedures are in place to address any breaches in security or other presenting hazards. The centre has an emergency response plan in place to address serious threats to the centre and to staff and young people. A training day for managers took place in September 2006, and major exercises were completed in January and June 2007. Desk top exercises take place at approximately three monthly intervals. These focus on specific issues and establish that there are strategies in place which work effectively. A recent exercise focused on the management of a hostage crisis, to ensure staff know how to respond. Two members of staff have trained as hostage negotiators in case of such an eventuality.
42. The centre has a 'fire plan' agreed with the local fire brigade, which identifies how the fire service will respond in the event of an emergency. The fire brigade visit at least annually, and new fire crews visit the centre to make themselves familiar with its lay out for the purposes of attending any incident there. All staff are trained in the use of short duration breathing apparatus, which is retained on site and checked weekly. The staff teams carry out fire drills monthly. As part of the local fire brigade's community services, fire officers attend Hassockfield on occasion and give presentations to the young people about fire and fire prevention. The centre is promoting the involvement of young people in the 'Young fire fighter's programme' supported by the local fire brigade, to improve the fire awareness of the young people.
43. A recent fire incident in May this year was caused when a young person set fire to paper in his room. The staff acted swiftly and appropriately to address the fire, which was quickly brought under control. They were commended by the fire service for their actions. Investigation into the cause of the fire suggested that it had probably been deliberately caused by a young person who had managed to smuggle a lighter into a bedroom. However, the investigation was not able to establish how the lighter was brought into the centre. Data provided by the YJB monitor showed that there had been four

occasions when young people had been found with contraband in the centre in May 2007, compared to none in each of the previous two months. It is clearly of concern that young people are able to smuggle contraband items into the centre. The centre has clear procedures for the searching of young people and their rooms, and for the control of items brought into the centre. These may need review.

44. The privacy and dignity of the young people are routinely promoted and respected. Staff routinely treat young people with respect and courteous good humour, and young people are encouraged to behave acceptably through the use of positive professional relationships. During the inspection, staff were heard to call to young people and knock on the bedroom door before opening observation hatches. A number of young people who spoke with inspectors said they felt the staff 'cared' for them. They described staff as 'helpful' and said they gave them time and attention when they needed it.
45. The Serco 'child care principles' included in the Hassockfield STC 'Information for families and carers' state clearly that young people will be treated with dignity and respect. These are reflected in the aims of the centre included in the centre's 'statement of purpose'.
46. The personnel files of three recently appointed staff examined reflected a thorough process of recruitment and vetting. The extensive vetting procedure includes having enhanced Criminal Record Bureau (CRB) certificates and reference checks in place prior to appointment.
47. There is no evidence to suggest that young people are locked in their bedrooms inappropriately. However, there remains an apparent lack of clarity about the recording of 'elective' separation. Young people were seen asking to spend time in their rooms on a number of occasions during the period of inspection. This was allowed on each occasion. None of the occasions were seen to be recorded. Directed and enforced single separations are routinely recorded in detail, as are all uses of restraint. The centre's staff are all fully trained in the 'Physical care in control' (PCC) method of restrictive physical intervention.
48. Youth Justice Board records reflecting the use of single separation during the first quarter of 2007 suggest that there has been a significant reduction in its use. The record for January 2007 indicates that there had been 359 episodes of single separation, with 266 in May 2007. Twelve young people were separated in January 2007 for periods of three hours or more. This contrasts favourably with only one young person separated for over three hours in June 2007.
49. The managers and staff are heavily committed to tackling bullying, and an anti bullying working party has developed a new anti bullying strategy in an attempt to address it. The centre was accredited and awarded an 'anti bullying accreditation kite mark' by the 'North east regional anti bullying alliance' in

May 2007. This is for its work in addressing bullying. However bullying remains a problem for some young people at the centre. There were nine recorded cases of bullying in January 2007 and 21 cases in May 2007.

50. There were also 11 fights between young people in January 2007, compared to 19 in May 2007, and 10 assaults on staff in June 2007 compared to three in January 2007. The centre was clearly facing some very challenging behaviour. Bullying and fighting were both identified as issues at the time of this inspection. Several young people identified bullying as an issue for them, and commented how it had caused them distress. These young people said that the staff react firmly to any bullying that they see, but they do not always see it.
51. The rise in incidents of young people fighting reflected in the data provided was also reflected during the period of the inspection. Several incidents of young people fighting took place, resulting in some of them transferring between residential units. Staff members quickly take steps to deescalate behaviour if young people are becoming angry and there is a risk of fighting or disturbance. However, a by product of the increase in activities and opportunities for staff to work directly with young people can be that one member of staff may be left on a unit for periods with a number of children. Under these circumstances, the level of supervision is likely to be less rigorous. During this inspection, although members of staff were seen supervising young people alone on occasion, the atmosphere remained positive and friendly.
52. Information provided showed 54 uses of PCC in January 2007, and 65 in May 2007. Records also show that the number of PCC episodes in the first three months of 2007 was steadily declining, with figures for March 2007 showing a 17% reduction since January 2007. They then rose again in April and May 2007. However, the turnover of young people in May was also high. There were 30 admissions and discharges of young people during that month.
53. Similarly, the information provided showed a 50% reduction in the use of enforced single separation for the first three months of 2007 compared to the same months in 2006. This information is viewed by the management team as clear evidence that the introduction of 'Therapeutic crisis intervention' (TCI) as an alternative means of addressing challenging behaviour is beginning to show positive results. The centre has committed heavily to the introduction of TCI as a means of positive behaviour management and an alternative to early use of restraint. By May 2007, 160 staff had successfully completed TCI training, and recently, one and half day refresher training had also been completed.
54. The Hassockfield secure training centre (HSTC) Improvement Plan (2007) sets a target of a 50% reduction in incidents of PCC by December 2007, and a 50% reduction in enforced and directed single separation by the same time. These are commendable aims.

Whereas TCI is considered to have had a very positive impact on behaviour across most of the centre, there are some concerns about some behaviour in the classroom. Some unacceptable behaviour in the classroom does not appear to be challenged as readily as may have been the case previously. This can have a negative impact on classroom discipline. The assistant director (residential care and security) believes that this reflects some staff uncertainty about their role in the classroom, but will address the issue with the staff. He is clear that TCI principles are equally effective in the classroom, although they may take a little longer to become established.

55. Following recent advice from the YJB related to the maintenance of good order and discipline amongst young people, the staff team have been using their TCI and negotiating skills to good effect to ensure the smooth running of the centre.
56. The centre has a very clear policy and written guidance on the use of restraint, although parts of it are currently under review nationally by the YJB. The guidance is consistent with the expectations of section 10 ('a system for restrictive physical intervention') of the YJB code of practice included in Code of practice: Managing the behaviour of children and young people in the secure estate. (2006). All staff undertake full training in PCC as part of their induction, and must pass if they are to successfully complete the course. All incidents of PCC are carefully recorded and monitored, and critically reviewed later by the management team. A nurse from the health care team attends all restraints, and has a clear responsibility to ensure that the restraint is applied appropriately. The assistant director (healthcare) outlined the centre's policy in this area. She said that if the nurse has any concerns about the application of the restraint and believes that inappropriate force may have been used, she is obliged to notify the local safeguarding children team.
57. Discussions with managers and staff across the centre show optimism about the impact of TCI on behaviour management and staff morale at the STC. During the inspection of August 2006, the staff said that they did not feel involved or consulted. This has changed. During this inspection many staff said that TCI has made them feel more skilled, and more able to engage with the young people more confidently rather than use PCC. Physical restraint has become more of a last resort than may previously have been the case.
58. The centre has now commenced on the third phase of their TCI implementation. Care staff have also been introduced to 'Teen Talk', a new way of approaching key working with young people. Some TCI refresher training in behaviour management has taken place. Managers and team leaders attended 'post crisis response' debrief training in June and the formal 'debriefing' aspect of the TCI procedure is due to be implemented in July 2007. The centre intends that a full debriefing session will take place after every PCC incident and the outcome of the session will be recorded. However, young people are not asked to make a written comment as part of the 'life

space interview' (LSI) process after a physical restraint. This is recognised good practice and managers were invited to consider this as part of the new improved procedures.

59. The centre uses a behaviour incentive scheme to encourage young people to engage with the care staff and teachers more positively. Staff and young people were familiar with the scheme, and there is a great deal of information about it being made available to the young people. It is included in information booklets for the young people, and more information is displayed on the walls in the living units.
60. The centre has revised its procedures to identify, assess and address the needs of young people who present a risk of suicide or self harm. Any member of staff who considers that a young person presents a risk of self harm can open a 'high risk assessment team (HRAT) log. This will trigger a multi disciplinary support plan to address the risk, with increased supervision, support and monitoring. Any specific need for specialist support is identified and offered as part of the HRAT plan. The multi disciplinary team meetings, now called the 'Case planning and review meetings', take place twice weekly to review progress, and decides whether the young person should have an 'individual crisis management plan' (ICMP) or 'behaviour support plan' (BSP).
61. The level and nature of the supervision and support offered to young people is determined by the type of plan they are assessed as needing. Young people placed on an ICMP are considered to be at the highest level of risk and the detailed management plan reflects this.
62. The residential units are advised daily of young people placed on ICMPs and supervise them in accordance with the agreed plan. Risk assessment is ongoing throughout a young person's stay at the centre and is very regularly reviewed. ICMPs are reviewed twice weekly, and BSPs are reviewed monthly.
63. The centre has introduced a 'critical incident review panel' which meets each month. This panel includes the 'National Youth Advisory Service' (NYAS) advocate and a representative from the local safeguarding children team as well as managers from the centre. Each month the panel views a random selection of incidents involving restraint recorded on DVD. It critically evaluates the incidents to determine whether they highlight any areas for improvement. The panel also reviews the behaviour management policy and its application across the centre. This is a commendably transparent initiative to monitor behaviour management and to learn from the experience. The inclusion of external independent professionals is particularly praiseworthy.
64. The advocate from NYAS visits the centre several times each week and has access to the young people. She visited during the course of the inspection, and reports that support for young people and advocacy are taken very seriously by the centre management, and that young people are encouraged to speak to her. She sees all new admissions with 24 hours of their arrival at

the centre. She also sits on the critical incident review panel and attends the trainee council meetings.

65. There is a well established complaints procedure at the centre which presents as robust and transparent. Young people are advised of the procedure during their induction to the centre, and it is included in the young people's information booklet. All of the young people spoken with were familiar with the procedure. Complaints may be made through staff members, or confidentially by posting a letter in the 'post box' situated in the grounds. Young people pass this as they travel to school or the dining room.
66. All complaints are received centrally, logged, and then passed to the appropriate manager to address. Any complaint that includes child protection issues is forwarded immediately to the local safeguarding children team. The progress of complaints is carefully tracked to ensure that they are being addressed appropriately and within time scales. Records provided by the centre show 101 complaints in the period from 25 April 2006 to 24 May 2007. Of these, 13 were substantiated. Two of these related to bullying, and a further two to racist behaviour. Young people accepted the outcomes of the investigations in all but two cases. These led to appeal by the young people. One was agreed at this stage. Complaints were generally met within the agreed time scales.
67. The centre also has clear child protection procedures. The arrangements for referral to the local child protection team are effective and transparent. Any inappropriate behaviour stemming from the use of restraint might be referred to the local safeguarding children team by the nurse present, or referred by management when the DVD record of the incident is reviewed. Any significant incident that is caught on the centre's closed circuit television (CCTV) would be reviewed routinely by a duty director. If there are any concerns, the incident will be referred to the safeguarding team.
68. Comments made by staff responsible locally for the investigation of potential child protection matters are positive about the links with the STC. The social work team leader of the local safeguarding children team and her police colleague spoke with inspectors. They are satisfied that they have a close professional working relationship with the centre, and work closely with the centre's compliance and investigations manager. They say that the managers and staff at the centre are helpful and transparent in their dealings with them. The safeguarding team leader says that the safeguarding team routinely respond within 24 hours of any referral or within 48 hours at the latest.
69. All injuries caused by restraint are automatically referred to the safeguarding team, and the team advise if they have concerns. The team leader and her police colleague visit the centre when a referral is received and meet with the centre's compliance and investigations manager. They may then decide to call a formal strategy meeting.

70. The compliance and investigations manager maintains detailed records of all child protection referrals and their outcomes. The centre referred 43 possible child protection incidents to the safeguarding team between 14 June 2006 and 4 June 2007. These included 12 automatic referrals following the use of handcuffs, and one automatic referral following use of a thumb distraction restraint technique. It is centre policy that a referral is made in these cases. One referral was a disclosure of historic abuse. No further action was taken in 33 of the referred cases. Ten of the officers were subject to internal discipline or further training as a result of investigations following referrals to the safeguarding team.
71. The local safeguarding professionals had expressed concern recently about two incidents when young people had been injured, requiring hospital treatment after being physically restrained. Both of these incidents were still being investigated by the police child protection team. The local safeguarding team manager confirmed she had written to the STC director to express her concerns. She was confident that the director would accept her comments. However, she and her police colleague were concerned that they are not always made aware of the outcome of management investigations into some incidents. These are incidents deemed not to be child protection matters but requiring further management investigation. They said a forum had been in place as part of the local Area Child Protection Committee (ACPC) protocols. Managers from the STC used to meet quarterly with the local child protection professionals. The group reviewed all referrals that had been made during that period and confirmed the outcome, including action taken with staff, or revision of procedures.
72. The YJB performance monitor was positive about the thorough review carried out by the STC into a recent serious incident with a young person.

Helping children achieve well and enjoy what they do

Education

The provision is satisfactory.

73. The learning centre at Hassockfield STC provides full-time education for up to 58 children and young people between the ages of 14 and 17 years. This represents an expansion of 40% over the last year and an increase in the number of young women. Currently, there are 55 young people of whom 15 are young women, 12 young people are on secure remand, 37 are completing Detention and Training Orders (DTO) and six are serving longer sentences. One convicted young person is awaiting sentence. Almost 95% of the young people are of White British heritage. All the young people are vulnerable with histories of behavioural problems and very few have positive experiences of education. Of the present group, 15% have specific or profound learning difficulties. Levels of literacy and numeracy are significantly lower than chronological ages. The average length of stay at Hassockfield is 2.6 months.
74. Hassockfield provides a good level of education and effectively supports the needs of most young people. The head of education is a member of the senior management team and plays an important role in the strategic planning and direction of the centre.
75. Good progress has been made in tackling the areas for improvement from the inspection in July 2006, in particular by the provision of vocational pathways options, more rigorous target setting and in the appointments of a Connexions assistant and a part time educational psychologist. Achievements and standards of work are good. The majority of young people leave with accredited qualifications. Teaching and learning are satisfactory overall and good in PE and hairdressing. Reviewing learning at the end of lessons is underdeveloped and too little use is made of information and communications technology (ICT) across the curriculum and the learning resource centre (LRC) to support learning. Most young people make good progress during their time in education.
76. However, the behaviour of a small number of young people is poor and inhibits the learning of others. Despite considerable investment in behaviour management, many teachers are hesitant in challenging effectively the inappropriate behaviour of some children. Induction and initial assessment are good but there is insufficient support for young people with additional learning needs. Enrichment activities and the promotion of release on temporary licence and community access are strengths. The majority of residential care workers provide effective support in classes but do not have access to formal training to improve their skills as learning support assistants.

77. Good progress has been made in establishing systems for quality assurance. The self-evaluation report produced for the inspection was broadly accurate and there is good capacity to improve.

78. Strengths:

- High levels of accreditation achieved through a broad range of courses that include vocational options.
- Good arrangements for induction and initial assessment.
- Very good developments for support and information, advice and guidance through the Connexions and educational psychologist appointments.
- Positive benefits for young people from enrichment activities and the promotion of release on temporary licence and community access.
- Effective and very strong strategic management.
- Good staff development opportunities.
- Very good links with external providers.
- Good relationships between education and residential care staff.

79. Areas for development

- Make greater use of ICT and the learning resource centre to support the curriculum.
- Deal more effectively with the challenging behaviour of young people in some classes.
- Implement strategies to respond more effectively to the individual and additional learning needs of young people.
- Improve the quality of the teaching accommodation in the 'academic' area.
- Provide more formal training opportunities for residential care staff working in classroom settings.

80. Inspection grades

Overall effectiveness: Grade = 2

Capacity to improve: Grade = 2

Achievements and standards: Grade = 2

The quality of education and training: Grade = 2

Leadership and management: Grade = 2

The contribution by education to Every Child Matters outcomes:

81. Education at Hassockfield makes a good and well planned contribution to the five outcomes of Every Child Matters (ECM). Maintaining a healthy lifestyle is a particular focus of the curriculum in PE and catering and is promoted through the evening enrichment activities programme. The Healthy Schools Award has

been achieved. The college has received a local anti bullying award and developed a successful mediation initiative. There is a strong focus on internal mobility and release on temporary licence (ROTL) and the vocational pathways and careers curriculum. The positive work of the Connexions personal adviser helps to prepare young people appropriately for the challenges they face in education, training and employment on their release to the community. The development of a peer leaders' initiative enables young people to make a positive contribution to their community.

Commentary on the key questions

Key Question 1: how well do learners achieve?

82. Young people's achievements are good overall with some outstanding features. Accreditation is achieved by almost all young people and for many this is their first success in education. The accreditation offered is well-matched to the needs of the young people, many of whom are only at the unit for a very short time. In the last 10 months, young people attained 2500 AQA and basic skills units and PE Lead Body Awards that require five to 15 hours of study, 171 more substantial AQA entry level certificates and 29 OCR hair and beauty awards. The education department has effectively managed the necessary paperwork to enable a number of young people to sit GCSEs which they would have otherwise had to forfeit.
83. The majority of young people make good progress in their learning given their starting points, limited prior attainment and frequent and prolonged absences from school. Progress in lessons is satisfactory. Improved systems are in place but not fully embedded to record, monitor and review progress. A timetabled weekly tutorial programme is in place but it is too early to discern clear benefits from it for young people.
84. Young people's attitudes to learning are satisfactory. Behaviour in lessons is variable. Whilst the majority of young people want to learn, the attitudes and behaviour of a significant minority are unacceptable and inhibit learning opportunities for others. Teachers have received therapeutic crisis intervention (TCI) training. Two teachers have trained in mediation techniques. These have contributed to a reduction in exclusions and 'time out' of lessons by helping to de-escalate difficult behaviour. However, the monitoring and management of inappropriate behaviour in classes lacks clarity overall. Teachers are frequently too hesitant to tackle challenging behaviour. They use TCI too rigidly and feel undermined by a recent YJB directive relating to the management of young people.
85. Good progress continues to be made in preparing and supporting young people in their transition to the community or moves to another establishment. Release on temporary licence is used effectively and new, accredited courses are being developed, for example, with Weston Spirit.

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

86. The quality of teaching and learning is satisfactory with some good features. Most of the lessons observed were judged to be good or satisfactory and there was no unsatisfactory teaching. Good teaching was observed in physical education and hairdressing. Lessons are well prepared with clearly stated objectives but insufficient attention is given to the assessment of learning at the end of sessions. Use of ICT across the curriculum is underdeveloped despite the investment in resources.
87. Most teachers have or are studying for an appropriate teaching qualification and have good subject knowledge and experience. In the good lessons, such as PE and hairdressing, teachers plan lessons that are imaginative and motivate young people who want to make progress. In less successful lessons, teachers have low expectations and time management is poor. Overall, there is a lack of consistency in dealing with and responding to inappropriate behaviour in classes, resulting in a small number of young people setting the agenda and only working on their terms. This causes considerable disruption and adversely affects the learning of others in some lessons.
88. Careful attention is given to the identification of individual additional learning needs but the ability to respond to such needs is limited given that the special educational needs co-ordinator (SENCo) works on a part-time basis and there are no learning support assistants (LSA) to provide one-to-one or classroom support for young people. However, residential care workers do provide effective support in most lessons but this work is of a general nature and not usually targeted at meeting the needs of individual young people. A positive development has been the appointment of a teacher to identify and meet the needs of the more able and talented pupils.

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

89. The quality and range of the curriculum are good. Programmes are well matched to the diverse needs and interests of young people. They broadly satisfy the requirements of the national curriculum and the YJB specification of 25 hours education. The core curriculum includes English, mathematics, ICT, PSHE, careers and PE. With an increase in older young people attending and an expansion in the numbers of young women, vocational pathways have been made available in a new teaching block in construction crafts, catering, PE and hair and beauty. Some young people have work experience opportunities in horticulture and painting and decorating. However, vocational options lack clarity of purpose and, currently, do not reflect work-based standards. Staffing shortages have reduced access to English and drama and there is no longer provision for music.
90. The timetable is underpinned by a clear rationale. Following time in the induction group, young people move to one of seven interest based groups.

The structure of the teaching day does not allow for appropriate breaks and access to water. Mixed gender groups produce a positive ethos in most classes and across the college. An effective programme of enrichment activities is provided every Wednesday afternoon by residential care staff with support from some teachers. A good range of evening optional activities are provided jointly by residential care staff and teachers including sport, art and a youth club.

91. Release on temporary licence and community access is promoted positively and well planned arrangements are in place to support this. For example, young people are accompanied on visits to college prior to release and others participate in work experience activities with local employers. Additional programmes are being developed, including an accredited introduction to an enterprise course which involves partnership work with local businesses. Hassockfield is an access centre for the Duke of Edinburgh award. The majority of young people engage with and enjoy learning and develop their self-esteem and confidence. Diversity and equality issues are satisfactorily promoted, for example, through themed activities, and racist and sexist attitudes are challenged.

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

92. The quality of guidance and support is good. Arrangements for initial assessment and induction are well planned. Young people attend a short induction course and are able to select a programme of study based on their vocational interests. The appointment of an educational psychologist has significantly improved the capacity to identify additional learning needs. Good progress has been made in improving the quality of target setting with more focused and measurable targets for young people. The tracking of pupil progress is good. Subject teachers prepare and submit written reports, on a regular basis, highlighting the behaviour and progress of individual young people in meeting targets. Weekly tutorials enable young people to discuss their progress. A preferred learning styles inventory remains superficial and contributes little to teaching plans.
93. A member of the guidance and support team prepares reports for, and attends all, detention and training order (DTO) planning and review meetings. Detailed summary reports relating to educational progress, behaviour and attitude to learning are submitted for consideration at DTO planning meetings. Links with the Connexions service are very good. A personal adviser (PA) is allocated one day each week to provide guidance and support services for young people. These include a programme of individual interviews and group work as part of the PHSE teaching programme. The Centre has recently appointed a full-time Connexions assistant who is being trained to support the work of the PA. There is a good range of careers information and materials on offer in the LRC but young people have very limited access to this facility. Considerable time and effort is spent in tracking young people's progress after their release from Hassockfield. This work is carried out by the Youth

Offending Service staff, the Connexions PA and a Community Placement Officer, but lacks overall co-ordination.

94. Relationships between staff and young people are good overall. The environment is generally noisy with a degree of restlessness. Some young people display boisterous behaviour which is not always conducive to learning. Movement between lessons can be time-consuming. On occasions, young people become impatient whilst waiting to move to their next lesson or return to the residential units.

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

95. Leadership and management are good with some outstanding features. The head of education is a member of the senior management team and plays an important role in the strategic planning and direction of the centre. There is very good strategic and operational planning within education. The self-assessment report is broadly accurate and identifies key strengths and areas for further development. Quality assurance arrangements are good. Classroom observations are conducted on a regular basis. The day-to-day work of the education department is carefully monitored through effective record-keeping. Opportunities for staff to engage in staff development opportunities are good but are restricted at times due to staff shortages. The capacity to improve is good.
96. Teaching accommodation in the recently opened Minerva building is good but not without its problems. For example the constructive crafts room has no extractors and the teacher is unable to supervise the young people at all times due to the poor layout and design of the room. Much of the accommodation in the original building is poor especially when compared to the Minerva building. Most of these rooms are unattractive, small, in poor decorative order with well-used but abused furnishings and fittings. There is a general absence of young people's work on display. Insufficient use is made of the LRC with no timetabled sessions for young people to visit and access the good range of resources including books on offer. Steps are being taken to up-grade ICT facilities and resources in the 'academic' block. Accommodation for staff has improved significantly since the previous inspection. Facilities for PE and outdoor activities are good.

Helping children achieve well and enjoy what they do

Welfare

The provision is satisfactory.

97. The provision of activities at the centre has seen considerable improvement. Young people said that the activities undertaken were 'better now', and 'there are more staff to do things'. There are two members of staff who oversee the coordination of activities and a weekly plan is available of activities available each evening. This is amended every two to three months. The set clubs and activities are led by a member of teaching or care staff. The staff members responsible for the coordination of activities said that they consulted with young people in regard to the type of activities which young people would like to see available and they were looking at how this could be developed further.
98. Several of the teaching staff at the centre are now timetabled to lead and support activity sessions during the early evening. Staff members explained that there are also some extra care staff who work on certain evenings to facilitate activities taking place. If a whole house unit should opt for one particular activity then all care staff from that unit would attend to support it.
99. A trampoline and a cardio vascular equipment suite are both available in the centre; there are two members of staff trained as instructors for each area. Staff members responsible for the organisation of activities stated that both these areas were popular with young people and that it was intended to enable more staff to receive appropriate training. However this was proving difficult, given how expensive course fees are. There are four outdoor yards and a trim trail for young people's use. Staff commented that there are plans to replace the trim trail with a crazy golf course which would be designed by the young people themselves. There are some raised planting beds where some of the young people are able to assist in the production of vegetables and flowers in an open area of the centre.
100. Astro turf style pitches which are popular with the young people are also available. Opportunities are provided for all young people to undertake an outdoor activity on a daily basis.
101. Activities which have been undertaken recently in the centre include pool competitions, fun days, visits from magicians and comedians and cooking clubs. The young people spoken with were very positive about the development of the leisure and enrichment activities. Many said they enjoyed the activities and described staff as being 'fun'. They particularly liked the youth club held twice a week. The centre take a more liberal approach to mixing of young people in these clubs, including mixed gender, than is the case in some other establishments. This practice is praiseworthy, as the dynamics can be more difficult to manage, but mixing with young people of the opposite sex is a much more natural process.

102. Staff are looking to further expand links with external groups and individuals. Presently a local professional football club attend two hours a week for lifestyle and football coaching and a judo instructor is to visit the centre shortly. The provision of even more clubs which young people can sign up to for a set period is a further aim. This will enable young people to enhance their individual skills or to follow a particular hobby.
103. Young people opt on a daily basis to take part in the activities on offer. Those who do not opt for a particular activity tend to remain on the house units occupying themselves by playing pool, watching television or joining in a game of cards for example. Some books, magazines and games are available on each of the house units but an increase in the number of these would be preferable.
104. Whilst a record is held of young people who attend a chosen activity, no record is held of those who opt to spend time on the house unit undertaking unstructured activities instead. It would be useful for managers to be aware of those young people who consistently avoid participating in any of the enrichment and leisure activities and understand why that is. This matter could be usefully included in individual care and sentence planning.
105. Whilst some work is carried out in terms of cooking clubs which form part of the enrichment and activities planning, there is scope for development of more formal life skills and preparation for independence opportunities for the young people. Some good areas of work are conducted which allow young people to develop practical skills including tending to a local general practitioners garden. However this is an area which could be developed to include further vocational experiences for the young people.
106. No budget is held by the staff members responsible for the organisation of activities; they state however that they are able to put in a request for equipment should this be required. Holding their own budget would enable further flexibility in this respect.
107. Support is offered by staff on the units to young people who wish to complete homework brought from school during the week; this is supplied to the young people once per week and completion is voluntary. A part time special educational needs staff member also spends time on the house units assisting those young people who request or require help.
108. A staff skills analysis was commenced at the centre to identify particular hobbies or interests that staff were proficient in or keen to develop. The aim of this is to enable a broadening in the range of special interest clubs and leisure activities available to young people. This analysis has not yet been completed; however some finalisation to this would be of benefit to the overall enrichment provision at the centre. Managers confirmed that this is on the agenda for them to address and they intend to invest in further training for staff.

Admission Process

109. The centre has introduced a revised and more thorough induction procedure for young people admitted to the centre. This is intended to assist the young people to settle and become oriented more quickly. Young people now have an opportunity to meet with staff from all departments across the centre during their first full day at the STC. They are shown around the centre and have a ten minute slot with the director of the STC. Staff have been given clear guidance on the expectations of the induction process.
110. The centre continues to work with the YJB on a pilot scheme involving the assessments undertaken at the point of admission. This four part process provides detailed medical and health assessment information. It was observed that an admission was a lengthy process and took two and a half hours when the young person was compliant and cooperative.
111. Inspectors were concerned about the austere and basic admission room young people were expected to wait in for long periods of time. Inspectors raised this with senior managers during the inspection in February but this had not yet been addressed. The style of this room was not in keeping with the child centred focus of the establishment, and the aim to make every effort to reduce the distress and anxiety young people face when first admitted to the centre.
112. A care plan is drawn up from the information received during the initial admission process. The care plan highlights any risk, medical need and potential for self-harm. As part of the admission process parents are contacted, if appropriate, to obtain verbal permission to administer medications which is then followed up by seeking written consent.
113. Contact arrangements for young people with families, friends and external agencies are excellent. Young people are able to write letters and post these in a dedicated post box situated centrally at the centre. This box can also be used should young people wish to make suggestions regarding the day to day running of the centre, or post complaints. Telephone contact is available in line with any restrictions which may be necessary; calls can be made from the privacy of young people's own rooms. The length of call is dictated by the level the young person has attained on the reward system, with increases available at each stage. There are external helpline numbers which are automatically programmed into every young person's approved telephone call list.
114. Staff make contact with families almost immediately the young person arrives at the centre. This was witnessed with a young person admitted during the inspection. The young person is encouraged to make a telephone call to let family and carers know where they are and that they have arrived safely. Case managers quickly inform families of the arrangements for contact and

visits and start immediately to ensure they feel included in the planning for the child.

115. Young people are able to receive visitors for a maximum period of two hours per week. These visits are pre booked and examples of families visiting young people were seen during the inspection. Support is made available to visiting families in relation to transport and over night accommodation should this be needed.
116. Young people are given information and guidance about what they should expect at the centre and this includes what is expected of them. Their rights and responsibilities are constantly reinforced in all aspects of the care provided. The comprehensive written guidance in this respect is excellent.
117. A diversity manager is available in the centre who describes her role as being to 'embrace gender and race equality'. She deals with staff training and advice in the area of equality and diversity and acts as an advisor following any incidents which may be racially or gender motivated. Equality and diversity is also covered in the induction training for new staff members. A record is kept of any incidents which may be considered to be motivated in this manner so that monitoring can occur. Information is also recorded in regard to PCC, TCI and 'time away' where young people of an ethnic minority are involved. A monitoring of incidents involving young women is also undertaken.
118. Recent work has been carried out with the young people on a project which aimed to produce pictures of festivals relating to a number of differing religious faiths. The diversity manager stated that she tries to engage the young people in fun activities, and that projects had been carried out with the 'show racism the red card' project, rapping groups with a religious background and ethnic dance groups. Some of this work is carried out as part of the social awareness package offered to young people.
119. The diversity manager sees all young people shortly after admission, completing a form which identifies any ethnic, religious or special needs of the young person. The young person is also requested to sign a 'contract' which sets out acceptable and unacceptable terms for people to be called. The diversity manager holds information in relation to a range of religious contacts for differing faiths and stated that she can arrange a visit from these should this be requested by a young person. She said that she is trying to increase interest in the work of the centre in the local community and the diversity management team who meet bi monthly now have a representative from the local community.
120. The centre has a comprehensive written equal opportunities policy; however this is not made routinely available to young people and their access to it is restricted. An equal opportunities policy should be produced which is appropriate for young people and shared with them.

Helping children make a positive contribution

The provision is good.

121. The 'resettlement team' have continued to make good progress as the service at the centre taking the lead on case management, assessment, interventions, including addressing offending behaviours and resettlement planning. They ensure every effort is made to engage with relevant agencies to provide the required information on young people. Examination of the case files shows a robust and rigorous process for requesting information, particularly for young people remanded in custody, who are considered under the Children Act 1989 as 'looked after children'. Case managers have devised a series of letters they send to responsible agencies reminding them of their duties to these young people. If the Children's Services social work staff do not respond, a letter is sent to the Chief Executive. They will also if necessary involve appropriate children's rights agencies.
122. Hassockfield's 'remand management procedure' is now being shared by the YJB as good practice with other similar secure establishments.
123. The assessment and planning procedures for young people are thorough and incorporate all aspects of their needs and the challenges they present. Young people's assessments seen on case files during the inspection confirmed this process. The psychologist and assistant director (resettlement) said that they felt the staff have become more proactive and are completing enhanced assessments for young people which identify a much more individualised plan to meet their needs and address criminogenic behaviours. Case managers coordinate the assessment planning and review of young people throughout the centre.
124. The STC are involved in an ongoing pilot scheme in conjunction with the YJB. They have been asked to review the ASSET scores for young people when they arrive at the centre, as produced by the Youth Offending Team (YOT) worker and review them when they leave. Case managers have identified that the initial scores on the ASSET are unreliable. They speculate that this may be because of the lack of information available to the YOT worker. This may be because the youth offending team may not hold sufficient information, or that the young people may not have been honest with the YOT worker. The procedure provides useful data for staff and young people and reflects an increase or decrease in the scores under each category. Another target for the centre is to obtain further evidence on the impact that placement at the centre has had on young people's behaviour when they return to the community. This is an aspiration that is, in part hampered, by the fact the young people originate from a very wide geographical area.
125. Examination of the case records during the inspection reflected a much more individualised target setting for young people and clear specific tasks for the professionals working with them. Young people consistently told inspectors

that they had positive trusting relationships with staff and all knew which particular staff were working directly with them.

126. A 'staff pod' is formed for each young person, which consists of a nominated case manager, who is a member of the social work service, a member of the psychology team and two residential care staff as allocated key workers. Members of the key team all have input into the programme devised and delivered for each young person. The role of residential care staff in the planning of and delivery of interventions had improved considerably since the last inspection. The director's rule on key working has been rewritten and includes an expectation for joint working and for sessions to be completed each week with young people.
127. The director and his senior team had long aspired to involve care staff in the more focused work with young people. He was aware that residential care staff felt that they are not as important as other professionals who work more 'therapeutically' with young people. He realised that care staff needed further training and 'tools' to help focus their interventions with young people for the key worker's role to be meaningful. Senior staff are also aware that the availability of staff time is an issue.
128. All care staff have received training in 'teen talk', a package used for direct work interventions with young people. The package includes over 130 individual sessions that young people can participate in with their key worker. Key workers are expected to hold two one hour sessions each week and record these. The focus of the work is agreed as part of the young person's individual training plan. If the key worker is not available another staff member is allocated to work with the young person. A working party has been set up to monitor the implementation of the 'teen talk' interventions and their effectiveness. All members of the individual young person's case work team are included in the process.
129. Residential care staff spoken with said they really enjoyed using the 'teen talk' package with young people during their one to one time with them. However some were frustrated that they did not feel they had sufficient time to prepare and deliver the session. Managers had recently considered how best to create time in the routines of the day for staff to work directly with young people. Efforts are being made for key workers to have time available during the evening period between 17.00 and 18.00 hours. Steps are being taken to ensure sufficient staff are available during this period to free up key workers. Residential care managers will provide cover during this period if necessary. Three staff from the 'resettlement team' also work each week day evening until 20.00, providing additional opportunities for individual work with young people.
130. The psychologist and her team have completely reviewed and revised the 'social awareness' (crime avoidance) programme. Sessions were previously provided for one hour each day including weekends. This was an expectation

of the contract with the YJB. The current programme includes two group work sessions each week, one on Wednesday and one at the weekend. Young people also have three individual sessions each week, two with their key worker and one with another member of their 'key team', such as the social worker or psychologist. All these sessions are recorded, evaluated and monitored and are used to inform the assessment of a young person's progress whilst at the unit.

131. The range of programmes provided is designed to address offending behaviour. This includes work on 'victim empathy', 'Impact' (to address car crime), hazard perception work, violence reduction programmes and anger management, amongst others. A working party of staff from the centre is also reviewing the progress of the 'teen talk' initiative, designed to improve the quality of individual key work with young people. Care staff are also being given opportunities to 'shadow' staff in the multi-disciplinary 'resettlement team', in order for them to develop a greater understanding of the different disciplines within the centre.
132. Senior managers aim to continue to provide appropriate training for care staff to improve even further their direct work intervention skills. An additional package of training called 'Jigsaw' is being considered. This will provide some excellent tools for specific individual sessions with young people.
133. The 'case management planning and review' meeting provides a holistic forum to review the needs of each young person, the planning to meet those needs and the progress being made. This meeting replaces the multi-disciplinary team and now includes a review of HRAT, ICMPs and behaviour support plans. This meeting is held twice a week and is chaired by a senior member of staff. The chair types up the minutes and decision points, including those related to high risk young people, which are circulated by email to all staff immediately after the meeting. A copy is also prepared for the next staff handover meeting. An inspector attended one of these meetings and confirmed a thorough and professional process of review and planning.
134. Consultation and participation is now firmly embedded in the culture at the centre. Young people have been asked for their views on a range of issues. Case managers clearly have regular contact with the parents or carers of young people; this is evidenced on the contact sheets in case records examined. However, it is difficult to ascertain from these records the level of consultation with parents and the efforts to ensure they participate as much as possible in the lives of their children during their stay at the STC. Further work needs to be done to formalise this process and ensure consistent practice.
135. Young people's religious needs are addressed by the centre. A chaplain and a visitor from the prison ministry are both available for young people to meet with. They are able to speak with young people on any subject and they are aware of the need to take into account safeguarding procedures in their work.

Services are conducted at the centre and 'party in the hack', an outdoor celebration with a band and barbeque has been organised once again for the summer. Young people who follow any faith can be catered for and the diversity manager holds a list of contacts for spiritual leaders of a range of faiths.

Helping children achieve economic wellbeing

The provision is good.

136. The centre's resettlement team includes a small team of psychologists, social workers, assistant social workers, the community programmes officer and the diversity manager. The team is led by the assistant director (resettlement). The team continues to welcome social work students to have placements in the team and work alongside young people in the centre.
137. The team recently had a training day during which they reviewed the effectiveness of the work they were doing and how it might be improved. Members of the team work on a rota to ensure that they are available to meet with young people and staff out of office hours. At least three members of the team work until 20.00 hours each evening. This has enhanced the service the team are able to offer.
138. Each young person placed at the centre has an appropriate individual programme that seeks to address their educational, social and emotional needs, together with any identified offending behaviour. Alongside and as part of the 'tackling offending' work, the centre is involved in a range of projects for young people, both within the centre and community based. These are intended to enable the young person to grow in confidence and self esteem, and learn more skills to enable them to cope more successfully in the community when they are discharged.
139. The centre has, in partnership with external agencies, developed some commendable initiatives to improve services to young people and their families. The community programmes officer has the brief to contact external agencies and gain their support for programmes and initiatives for the benefit of the young people. Two representatives from the charitable trust the 'Inside out Trust', a charity dedicated to restorative work in prisons, are engaged with young women placed on Minerva house. The project 'Young women can' is intended to allow young women to make a meaningful contribution to the community by supporting a community project which will benefit disadvantaged people locally. The young women will decide which project to support. The project is intended to increase the self esteem and skills of the young people who participate.
140. The community programmes officer indicated that she intends to become more involved in home visits to the families of young people at the centre, and the team will support young people visiting home as a planned part of mobility. This task was previously carried out by the social worker. The intention is to ease the transition to home for young people, and to identify any particular potential difficulties that need to be addressed if the return home is to be successful.
141. The centre is supporting young people to engage in a number of other community projects. For example, young people are involved with a local angling club, a rugby club and a golf club, and a scheme called the 'Weston spirit'. This scheme is intended to 'empower young people in personal and social development which will lead them to a more purposeful and fulfilling

life'. An officer from the Army visits the centre and has done a presentation about careers in the services. The centre also supports the 'Duke of Edinburgh's Award' for young people.

142. A partnership agreement is in place between the centre and the children's charity Barnardo's. The aim is for Barnardo's to offer a parenting programme to the families of young people who live within the Middlesbrough and Berwick catchment areas. The scheme is set up and the STC are now waiting for an opportunity to make an appropriate referral. This is a commendable initiative.
143. Student mentors from Durham University are involved with individual young people at the centre. Two students at the end of their degree course and a new coordinator met with an inspector. They said that students and the young people they visit find the interactions helpful and positive. This initiative is coordinated and supervised by the resettlement team.
144. Commendably, the centre is committed to engaging with young people as partners in their care, and to carefully planned and appropriate resettlement in the community. The director has recently issued a 'director's rules' (DR 200) to ensure that young people are 'actively encouraged to make positive decisions in their lives both within and outside of Hassockfield'. A second directors rule (DR 2002) requires staff to ensure that young people's rights as children in need, looked after children or young people eligible for services under the Children (Leaving Care) Act 2000 are actively safeguarded. These director's rules require staff in the centre to follow clear procedures to ensure appropriate outcomes for young people.
145. Evidence was seen on young people's files of the anti offending work being carried out, and of clear initiatives being pursued to resettle the young people. Young people are invited to sign a form that advises them of their right of access to their case record.
146. Data produced from a number of surveys carried out with young people are used to advise management planning. For example, survey results were seen seeking young people's views about how staff may make young people behave badly, and what makes young people behave well. Surveys related to food satisfaction are also carried out. Young people are invited to complete an exit questionnaire when they are discharged. Although this is a commendable initiative, the centre might find an exit interview to be more productive.
147. The centre has done a great deal of work on resettlement since the last inspection. A resettlement planning procedure is in place to ensure that planning for release takes place from the moment a young person arrives at the centre. The YJB identify six 'pathways' that need to be addressed if resettlement is to be managed appropriately. The six pathways are; accommodation, education, training/employment, health, substance misuse, families and finance.

148. Resettlement planning commences at the initial planning meeting. The six YJB 'pathway' areas are discussed using a specially designed pro forma which highlights each area. The plan is then discussed at every review meeting, and the respective roles and expectations of all of the key parties clarified.
149. Where a particular area is not being addressed appropriately, or if a local authority or YOT are not offering appropriate support, this is highlighted by the documents, and a strategy agreed to address it. There is substantial evidence of the centre pressing agencies who are not supporting young people appropriately to encourage them to comply. There is also evidence of the centre engaging the support of the Howard League for Penal Reform to ensure that young people's resettlement needs were met.
150. The assistant director (resettlement) and her team have reviewed the training given to members of the care team in key working young people. This has changed considerably since the introduction of TCI and 'Teen talk', and the staff induction training course has in turn been modified to ensure that appropriate training is provided. Members of the care team spoken with on the residential units say that they feel better prepared and more confident in their work with young people since the introduction of TCI and its associated training.
151. The young people receive some practical instruction in vocational skills in school at the centre, including some mechanics training. However, the range and opportunity to engage in vocational training could be further developed. Also, there is limited opportunity for the young people to learn and practise life skills as activities, including cooking, on the residential units. This is an area that could be developed further.

Physical Environment

152. Considerable efforts and investment continue to be made as part of the centre's intention to 'soften' the accommodation. There is ongoing repainting and redecorating across the site, and wall pictures and decorations are being changed to make them more homely and domestic. The institutional style fixed tables and seats on the units are being changed for more comfortable domestic tables and chairs, which are also durable and minimise security risks. The office accommodation on the units is being further adapted, and the large counter, which was known to staff and young people as the 'chip shop', has been removed. New carpeting and the removal of some of the grilles covering radiators is helping to soften the appearance of the living accommodation.
153. However, the healthcare centre had not been refurbished for some considerable time and this is in need of upgrade, particularly the young people's admission room.
154. The new house block building for young women, Minerva, was still presenting some problems for staff and young people. The air cooling system is not

working efficiently, the kitchen door bangs very loudly when closed, and there is a lack of natural light in the large middle section of the living unit.

155. A tour of the premises with the facilities manager and a member of the security team identified some areas around the building where there were potential security issues. One area of risk highlighted was in relation to access to a restricted area through the dining room and kitchen. This and other concerns were shared with managers who addressed them immediately.
156. An issue was also raised with the facilities manager about the safety of the poly carbonated mirrors in the young women's unit. He confirmed that this would be addressed.

Management

The provision is satisfactory.

157. The STC has a one page statement of purpose, as required by the contract with the YJB and this is prominently displayed around the centre. Managers have also produced a more detailed statement of purpose, as recommended during a previous inspection. This is a detailed document that clearly states the objectives of the centre and the child care principles which underpin the work and inform practice and development. The statement is regularly reviewed and revised, with the latest version produced in June 2007. Copies of the statement are available in the reception area and in each of the living units.
158. Young people are given a very detailed and useful information book, which is presented in a user friendly format, as recommended during the last inspection. They are also shown a DVD telling them about the centre, which is shown to them during the admission procedure. The young women have a separate information booklet, setting out what they can expect during their time at the centre. However, the information pack given to a young person during the inspection was not the most recent version.
159. Young people's families also receive an information booklet, specifically designed to help them understand the work of the STC and what they should expect, including how to complain if they have a concern. This is usually sent to them by staff in the case management service.
160. The director and his management team have developed a clear strategic management plan for the centre that includes a number of areas for development or recommendations made by other stakeholders. Members of the senior management team are clear about their roles and responsibilities and the part the department for which they are responsible plays in the provision of the service as set out in the objectives for the centre. The focus of recent months has been to enable and ensure middle managers have the time available to fulfil their roles and responsibilities.
161. The house block managers in particular have recently experienced some changes in their duties and they have just received some clear targets they are expected to reach in their role. These include achieving an agreed level of supervision, staff appraisal, staff providing 'Teen-talk' sessions, staff meetings, monitoring of records, inspection of living unit, inductions for young people and staff attending case review meetings.
162. The role of team leaders is being reviewed; this is not yet completed. An additional three team leader posts have recently been created to allow for the role of deputy duty manager each day and evening shift periods. The aim is to free house block managers up from some of their duty manager responsibilities so they can spend more time on the units. It is early days but

staff were saying they now see more of their house block managers and generally feel better supported.

163. A meeting with the human resources manager (HR) confirmed that there has been a recent improvement in the frequency of formal supervision being provided for care staff. She said at the point of the inspection 70% of staff were being supervised. She said this is an improving picture since March 2007. The statistics made available confirmed that there has been an increase in frequency of supervision, but they did not verify the percentage achieved. Care staff spoken with said they are receiving supervision more regularly, but not all yet at the six weekly intervals, which is set out in the procedural guidance.
164. The HR manager received details of supervision sessions and carried out a quality assurance process with them. She also included details of all sessions on a database system and did some comparisons. However, she did not receive copies of the supervision notes for nursing staff. The healthcare manager said it was inappropriate for anyone who is not nursing trained to see these notes as they were clinical records. However, she said it would be appropriate to forward copies of the 'personal and professional' element of the supervision notes to HR for quality assurance checking.
165. House block managers are expected to meet every three months with their staff team. It is very difficult for teams to come together more frequently than this because of the shift patterns. Care staff have two days 'off shift' built in to their nine weekly shift cycle. They have an opportunity to meet as a 'shift', but that involves meeting with staff from different house blocks across the centre, not specific living units. Senior managers expect house block managers to meet with their 'full teams', or as many staff as possible, each quarter. This is a recent development and not all house block managers appeared to have achieved this target. Senior managers need to monitor practice in this respect.
166. Efforts have been made to improve the quality of communication across the centre. All staff arriving on shift attend a briefing meeting, during which they are advised of all matters they need to be aware of with young people or situations across the site. The assistant director (residential care), whenever possible attends the early morning briefing meeting. Notes are prepared from this and the senior management team meeting and are shared with staff across the site. There was evidence of improvement in relation to communication. Inspectors attended a range of briefing meetings, handovers and monitoring meetings during the inspection and the quality of the information shared was appropriate.
167. Managers confirmed that a project group will meet shortly to agree a process for consultation with staff across the centre on best practice principles relating to communication. The aim is to develop a clear strategy with implementation targets. Managers said this process has been delayed because Serco had recently carried out a survey with staff on communication and this process

needed to be concluded before the more specific issues to the STC can be addressed.

168. All new residential care (custody officers) are expected to participate in a nine week Initial training course (ITC) prior to working with young people. The ITC has been completely reviewed and revised and the content made more appropriate to the preparation of new staff for working directly with young people. The course now includes five distinct but overlapping modules which include; behaviour management, keeping young people safe, understanding young people, changing behaviour and working the environment. The previous course had been largely unchanged for eight years. Managers said for the first time the new ITC programme provides clear messages about the philosophy and values that underpin the work of the centre.
169. The first newly revamped course started during the week of the inspection. Five staff are participating in this training. They spoke with an inspector on the fourth day of the training and said that although it was early days they found the sessions very interesting. Managers have arranged for Newcastle College to evaluate and accredit the new course. They anticipate that the evaluation process will begin at the end of the first course, continue with the second course with the third ITC being fully accredited.
170. The continuing investment in staff training is to be commended. The training in therapeutic crisis intervention (TCI) has been a costly process, with the 'training of trainers' and all staff across the centre who work directly with young people, including teaching staff. Managers chose this model of behaviour management as it provides a 'whole system' approach to managing children's behaviour and providing boundaries for expectations. The aim is to also provide a 'common language' for staff, linked to understanding young people's behaviours and developing strategies for dealing with the challenges they present. The majority of care staff have recently participated in refresher TCI training. Four of the TCI trainers have all recently concluded the third phase of their training, which is the 'post crisis debriefing' aspect of this method. They will then provide training and guidance for staff, commencing in August.
171. The shift patterns provide for all residential care staff to have two training days every nine weeks. Care staff are expected to attend a range of refresher training courses for mandatory training, such as PCC. Managers also plan developmental training sessions as part of this ongoing programme. They would like to have more time available to provide even further training for staff, in particular, additional methods to assist in direct work interventions with young people. Two other such packages are being considered, although the main restriction is the time available during the nine weekly two day training sessions, particularly because of the expectations of the contract with the YJB to provide refresher training.

172. Residential care staff also now have opportunities to obtain a National Vocational Qualification (NVQ) level three in health and social care. Seven staff are currently participating in this training provided by Newcastle College. The next group of staff will commence an NVQ level three course in 'youth justice'. The YJB expect custody staff to obtain this certificate. Five staff have been allocated to attend the next round of this training. Managers intend to allocate 12 staff to attend this course each year. Five managers are training to become assessors and the centre's training manager is an approved verifier.
173. The centre provides funding each year for a scholarship so that staff can obtain a professional social work qualification. Senior staff had been previously prioritised for this funding, but now care staff can apply. Staff spoken with were positive about this opportunity. The centre currently has eight qualified social work staff and a further eight are currently enrolled in the social work degree course. The training manager said he is shortly to initiate a 'training needs analysis' (TNA) for all staff, which will when completed inform the centre's training strategy.
174. The next objective for training is a management development programme. Senior managers have already approached Newcastle College and agreed an assessment tool to analyse the training needs and decide upon the first four modules of a package for all managers across the centre. Newcastle College have supported the STC in securing some funding for this training programme, in an effort to reduce the cost.
175. The majority of care staff spoken to by inspectors said they generally felt more valued and considered the role they play in the care of and service to the young people is now more consistently recognised. The investment in training and efforts to provide time for house block managers to spend more time on the living units and providing supervision have all contributed to staff feeling more positive about their role at the STC. Another positive development has been the support available from a group of 'peer supporters'. This is a small group of staff at the centre who have received some training to act as 'befrienders' to staff who might need someone to talk with, who is not a manager. They are not counsellors, but simply staff who might, within some defined parameters, provide a friendly 'ear' to a colleague who is under stress, either professionally or personally. The aim is to listen and direct staff to the most appropriate person or group to assist them, if necessary.
176. The human resources manager said she was generally pleased with progress to retain staff at the centre and reduce the turnover. However, the monthly rate for staff leaving the centre was 10% (18 staff) and this increased in May to 16% (27 staff). She said that the reasons for people leaving were understandable, including two staff for whom their work permits ran out. Five care staff had commenced their nine week training shortly before the inspection and there are no care staff vacancies, except for the three part-time support staff positions.

177. The human resources manager was also pleased to report that staff absence through sickness was still around 3% a month. She provided evidence that showed in January 2007 175 days were lost to sickness (3%) and this reduced in May to 127 days. All sickness is closely monitored and the procedure for meeting with staff and return to work interviews are closely monitored by human resources staff.
178. The issue of the numbers of care staff working directly with young people when in the living units has been an issue for some considerable time. Inspectors have commented during previous inspections on the agreed minimum level of staff across the site at any one time to meet contractual requirements as expected by the YJB. The centre had not been below the minimum level, which when met allows for no less than two care staff to be available to work with up to seven young people.
179. Senior managers had made efforts to ensure that the number of staff available on site during the busy early part of the evening is sufficient to ensure the objectives of service delivery are able to be met. A number of teaching staff work in the evenings up to 20.00. They provide a range of activities, or 'clubs' for young people. At least three staff from the 'resettlement team' work until 20.00 during weekdays. Also, senior managers have provided funding for up to five additional staff to work for five houses during the evening periods, to help with activities and free care staff up to carry out direct work interventions with young people.
180. The plan to increase the staffing complement by five part-time 'activities officers' has not worked out quite as planned. The director said the people generally applying for these posts have other full time jobs and have not been in a position to attend the full nine week training course, after which they can become fully certified 'custody officers'. Staff cannot work on their own with young people unless they have attended this training. Efforts have been made to provide the training on a modular basis, which has been agreed with the YJB. However this has taken a long time and these staff have not been able to be deployed in the flexible way it was envisaged they would.
181. A number of care staff spoken with said they thought the increased number of activities and clubs available to the young people are a really positive development. However they expressed concerns about being left with groups of young people on their own in the living units. Inspectors observed staff on their own with up to five young people at a time. The comments made by staff were shared with the senior management team. The director confirmed that it is unlikely that the current contract review process being undertaken with the YJB would result in additional funding for staff and this is a 'resource neutral' process.
182. The centre continued to struggle to attract staff from minority ethnic backgrounds. Two staff working at the STC in recent months had recently

been required to leave as their work permits had expired and they had been unable to have them renewed. Senior managers are aware of the importance of providing a diverse workforce and they along with the diversity manager and the HR manager are committed to ensure this objective stays firmly in focus.

183. There is evidence of the efforts made by Hassockfield STC to be a 'learning organisation' and to be reflective in all aspects of practice and service delivery.
184. The collection and analysis of quality performance information is still being developed. A range of data is collected by a number of staff across the centre. This is analysed up to a point and shared with senior managers. In the main the process is about comparing monthly data with the previous month's data, or with the same month in the previous year. Statistics for each annual period are also reviewed and compared. This is useful up to a point, but does not provide a multi-dimensional picture for the STC to fully understand the impact of its work with young people, or the factors that prevent them from achieving particular objectives.
185. The director and his team are fully aware that this is still an issue they want to address and improve. They have once again made a significant investment in a database that will provide very useful information on all incidents occurring at the centre. Just One Safe Secure Log (JOSSL) is an electronic recording and reporting system for all incidents occurring at the centre. The JOSSL system is still being established. A decision was made to input information on all incidents occurring since 1 April 2007. The health and safety manager was currently inputting this information and this is a time consuming task. He was hopeful of having some assistance in the near future. The report for April was produced and sent to the YJB data analysis section, and the other reports were to follow.
186. This system, once fully operational, can and will provide a wide range of data for managers, the YJB and any other stakeholders in relation to incidents, including the use of PCC and single separation. If used across the secure children's custody estate, this system has also been designed to collate and analyse information 'globally' held, including making some comparisons and highlighting trends. The health and safety manager said this system will prove invaluable when the centre is asked to produce information for 'parliamentary questions', a request they receive fairly frequently.
187. Although any potential child protection matters are not recorded on the JOSSL system specifically as CP issues, this could provide a useful monitoring tool for managers.
188. The deputy director confirmed that to assist the centre in its objective to develop the quality of performance management information and the impact on service delivery, they have decided to apply for the 'International standard for quality management ISO 9001' certification. This is an internationally

recognised standard for the quality management of businesses. The deputy director said that accreditation with this organisation is difficult to achieve. They expect an organisation to show evidence of a level of commitment to its customers and a willingness to improving efficiency. Organisations applying for ISO 9001 certification have to undergo a rigorous independent external audit of their management information systems.

189. All of the external providers and stakeholders told inspectors that they felt the work of the STC is positive and their individual experience is of a positive approach with managers and staff keen to fully involve them.
190. The external line manager to the STC has been involved with the establishment for almost three years. Managers once again described him as supportive and confirmed that he has a regular presence at the centre. When interviewed the external manager confirmed that his priority during recent months has been to ensure both emotional and practical support has been available for all staff at the centre, particularly those involved with the recent inquest.

Recommendations

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

- review practice and develop policy and procedural guidance controlled drug administration and recording, in consultation with the local pharmacist (Being healthy - Standards 3, 4)
- review the practices in the healthcare centre in relation to the availability of homely remedies and provide clear procedural guidance (Being healthy - Standards 3, 4)
- consider how best to hold policy and procedural guidance related to healthcare service, including ensuring an up to date file, with a clear index indicating the contents (Being healthy - Standard 3)
- ensure that the healthcare plans and subsequent programmes for young people include advice and support on healthy eating and exercise programmes (Being healthy - Standard 1)
- review the tuck shop items available to young people and promote and encourage healthy lifestyle options. He should also ensure all young people have access to reasonable drinking water (Being healthy - Standard 1)
- make the appropriate arrangements for an independent review to be undertaken of the practices and procedures of the healthcare service at the centre. This should be carried out on a regular basis, and a report of the findings submitted to the Youth Justice Board (Being healthy - Standard 3)
- discuss and agree with the local safeguarding children's board an appropriate process for reviewing all referrals to the local team, including those that do not result in strategy meetings, but are subject to management action or clarification (Staying safe - Standard 15)
- review the management of children's behaviour in the classrooms (Staying safe - Standards 3, 7)
- ensure that the definition of and recording of single separation, including elective separation, is addressed as a matter of priority (Staying safe - Standard 6)
- review the procedures for the prevention and detection of contraband, ensuring that procedures and practice are robust (Staying safe - Standard 1)
- ensure that young people are invited to make a written comment of their views after an incident of restrictive physical intervention, as part of the life space interview process (Staying safe - Standard 19)
- ensure that the detection, prevention and response to bullying remains a high priority (Staying safe - Standard 15)
- ensure staff are provided with clear guidance and support to prevent and respond appropriately to young people fighting with each other (Staying safe - Standards 7, 15)
- encourage teaching staff to make greater use of ICT and the learning resource centre to support the curriculum (Enjoying and achieving - Standard 3)
- ensure that teaching and care staff deal more effectively with the challenging

behaviour of young people in lessons (Enjoying and achieving - Standard 3)
<ul style="list-style-type: none"> • implement strategies to respond more effectively to the individual and additional learning needs of young people (Enjoying and achieving - Standard 3)
<ul style="list-style-type: none"> • make every effort to improve the quality of the teaching accommodation in the 'academic' area (Enjoying and achieving - Standard 3)
<ul style="list-style-type: none"> • provide more formal training opportunities for residential care staff working in classroom settings (Enjoying and achieving - Standard 3)
<ul style="list-style-type: none"> • ensure that young people and visitors have access to and understand the centre's 'Equal opportunities' policy. This should be written in a user friendly format (Enjoying and achieving - Standard 2)
<ul style="list-style-type: none"> • review the initial admission process to ensure young people are not kept too long before they are able to relax and settle in (Enjoying and achieving - Standard 2)
<ul style="list-style-type: none"> • consider an increase in books, magazines and games available to enhance young people's time on the house units (Enjoying and achieving - Standard 4)
<ul style="list-style-type: none"> • ensure that individual plans and targets for young people include leisure and enrichment opportunities, particularly for those young people who regularly opt out of leisure and enrichment activities (Enjoying and achieving - Standards 4, 6)
<ul style="list-style-type: none"> • further enhance the activities and enrichment programmes available to young people, by way of a staff skills analysis (Enjoying and achieving - Standards 4, 6)
<ul style="list-style-type: none"> • consider sharing the monthly report produced on young people's progress with their parents or carers. The decision to share these reports should be agreed with all significant parties, including the young person (Positive contribution - Standards 9, 12, 15)
<ul style="list-style-type: none"> • ensure that every effort is made to fully engage with parents and carers and invite them to be actively involved as much as possible in planning for their children (Positive contribution - Standards 9, 12, 15)
<ul style="list-style-type: none"> • review the range of vocational and life skills training available to young people in preparation for independent living and ensure this is further developed (Achieving economic wellbeing - Standards 1, 2)
<ul style="list-style-type: none"> • consider enhancing the process already in place for obtaining young people's views on their time at the STC by including exit interviews as part of the procedure (Achieving economic wellbeing - Standards 1, 2)
<ul style="list-style-type: none"> • should ensure that the issues in relation to the building raised with relevant staff during the inspection, including the refurbishment of the admission room, are addressed as soon as possible (Achieving economic wellbeing - Standard 3)
<ul style="list-style-type: none"> • provide all young people with the most up to date version of the information booklets, when they are admitted to the centre (Management - Standard 7)
<ul style="list-style-type: none"> • ensure that the quality assurance checking of supervision records by the human resources department for care staff is extended to all staff across the centre, including nursing staff (Management - Standards 11, 16)
<ul style="list-style-type: none"> • ensure that all house block managers provide opportunities for their staff to meet as a team, as set out in policy guidance (Management - Standard 12)