

# Medway Secure Training Centre

Inspection report for Secure Training Centre

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<b>Inspection date</b>	30 September 2009
<b>Lead inspector</b>	Linda Christie
<b>Additional inspector(s)</b>	Ian Dickson

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

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## About this inspection

The purpose of inspection is to provide assurance to the Secretary of State that secure training centres (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 inspection was conducted in accordance with the Statutory Rules inspections of secure training centres 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.

This was a random unannounced inspection carried out in accordance with the service level agreement between the Youth Justice Board (YJB) and Ofsted. The standards used during the inspection were those agreed between the YJB and Ofsted.

The last full inspection was carried out in March 2009.

A team of social care inspectors spent two days on site reviewing standards and the impact of the service on young people.

## **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. Medway Secure Training Centre (STC) is managed by Rebound ECD Limited, which is part of the corporate G4S group.
2. Medway is situated in Rochester, Kent. It offers secure provision for young people aged from 12 to 17 years who meet the criteria for custodial sentence or secure remand.
3. The centre caters for up to 76 young people of both genders. During the inspection up to 52 young people were in residence. Young people live in house units, of which there are four in each of the three house blocks.

### Summary

#### **The overall quality rating is good.**

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

4. This was an interim unannounced inspection of the centre, intended to assess progress against recommendations made following the last inspection undertaken on 26 March 2009. All the standards included under the Every Child Matters outcome for staying safe were assessed. A site inspection also took place to review the quality of accommodation, security and building maintenance.
5. The centre continues to be managed by a committed and experienced senior management team, who work hard to ensure consistency of practice and delivery across all house blocks and departments. The senior management team provides stable and focused leadership for the centre and this is reflected in a calm, organised and positive atmosphere. The centre learns from practice, is reflective and uses feedback from all relevant stakeholders to improve services and outcomes for young people.
6. There are consistently improving and transparent behaviour management strategies which promote and influence positive relationships between young people and staff. Young people are generally very positive about their experience at Medway and those who raised issues during the inspection prompted managers or the Director to respond immediately to their concerns. This demonstrates a commitment to openness, honesty and a willingness to engage with young people and deal with any concerns.
7. Practice in relation to dealing with potential safeguarding matters is excellent. There are effective links with the local safeguarding team, with positive

outcomes resulting in a timely response if a concern is identified. The Director is actively involved with the Local Safeguarding Children Board, which creates the opportunity for wider consideration of safeguarding issues and closer working.

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

8. Efforts have been made to address the 15 recommendations made during the last key inspection. The four recommendations made to improve educational provision related to: the quality of teaching and learning, impact of behaviour in classrooms, rigour of lesson observations and improving the rigour of analysis. These were not reviewed as part of this inspection, although the Director's action plan reflected progress. These recommendations will be reviewed at the next key inspection.
9. Of the other 11 recommendations 10 have been met in full. The one recommendation remaining relates to the improvement of telephone access for parents wishing to contact their children at the centre. A major development and overhaul of the current telephone system is required before improvement will be achieved.
10. The three recommendations related to being healthy have been addressed with particular improvements in procedures for administering medication when young people are not co-operating, and ensuring response time for nursing staff is monitored. Issues related to General Practitioner (GP) access have not been completely resolved, but a positive alternative arrangement is now in place.
11. The two recommendations made under staying safe were met in full. Guidance and procedures related to the routine management of young people have been revised to include protocols for managing young people who are in the living units during education periods. The movements of groups of young people across the centre are now consistently more timely and without incident.
12. The two recommendations related to preparing young people for moving on have been addressed. The centre has developed an improved range of initiatives to offer young people independent living skills that are tailored to meet their needs. There are also good improvements in the practice and procedures related to the planning, preparation and resettlement of young people from the centre. There is a strong focus on ensuring that placing agencies are fully involved and held to account when it comes to planning and preparation for resettlement.
13. The issues raised in relation to the training of night care staff and the sharing of information with them has improved. There have also been improvements in the quality of communication between staff in the control room and staff across the site.

## The effectiveness of the service

### Helping children to be healthy

#### The provision is good.

14. Good progress has been made in relation to contingency planning should a young person refuse to hand back prescribed medication they are administered under the supervision of a nurse. A clear protocol is now available for all nursing and care staff should such a situation arise again in the future.
15. Other action taken to address this concern is the relocating of the room used for the dispensing of medication. Young people are taken to a medical room in the sports hall, which is a more central location for the majority of the living units, where they are given their medication by a nurse. The reason for the change of location is to provide a more private environment for young people to have a discussion with a nurse without being overheard.
16. Another positive development is the expanding of the use of the 'in-possession' medication procedure for young people, who are allowed to hold certain prescribed medicines themselves. Since March 2009, 23 young people have agreed to comply with the protocol and hold their own medication, always non dangerous items. The centre is taking a well measured risk in allowing young people to hold some types of prescribed medication and appropriate checks and balances are in place. Young people benefit as they are empowered by the responsibility they have been given and only one young person has failed to comply since this procedure was introduced.
17. A concern was raised by young people during the last inspection that if they requested to see a nurse they often had to wait a long period of time before a member of the healthcare department came to speak with them. Good processes are now in place to ensure that any requests from young people to see nursing staff are given the priority required, while taking into account the other demands upon their time, such as dealing with new admissions. Records are kept of such requests and of all contact nursing staff have with young people. All requests and contact are carefully monitored, including reviewing the response time on each occasion.
18. Efforts have been made to ensure young people have regular access to a female GP, although the centre has not been successful in this respect. The local medical practice contracted to provide GP services to the centre do not have a female GP on the team and confirm they have been unable to appoint one, due to regional shortages. The centre has explored possible contracts elsewhere for medical assessment and interventions but has been unable to

identify a medical practice who could meet the contractual requirements.

19. The compromise reached with the medical practice is that senior practice nurses will attend the centre, if requested, as an alternative to the male GP. This is a satisfactory arrangement in the circumstances. The senior practice nurse is appropriately qualified and will carry out an initial medical assessment and make referrals to other specialist practitioners as necessary.



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

### The provision is good.

20. The centre monitors and reviews the use of 'removal from association' of young people very effectively to ensure that it is always used appropriately. Young people are not inappropriately locked or placed in their rooms during waking hours in contravention of Secure Training Centre Rules. All occasions when young people spend time in their rooms during waking hours are well recorded and closely monitored. Young people removed from association are observed and the observations recorded in appropriate detail.
21. The use of positive professional relationships between staff and young people is actively promoted by the centre and used very effectively to help young people avoid being sanctioned or being subject to other control measures.
22. The centre has very effective behaviour management policies and procedures. Staff maintain and promote good order and discipline well through skilled and thorough interpersonal work and supervision of young people. This is facilitated by clear guidance from managers related to the maintenance of good order and the appropriate management of behaviour.
23. There is varied and detailed information available to ensure that all young people are kept well informed of their rights and responsibilities. This information is available in different languages and formats for those young people of different abilities and learning, and for those for whom English is a second language. They have good access and assistance to understand the requirements of the regime at the centre and what is required of them.
24. Young people are actively supported to engage with staff positively and to address any of their behaviour that is identified as a problem for them or for others through a fair and consistent reward and sanction scheme.
25. The centre continues to improve and adapt the incentives and sanctions scheme to ensure it remains relevant and effective and young people willingly engage with it. The scheme is easily accessible, well publicised and known to young people, and available in written form. It is well monitored by management as part of the centre's quality assurance system to ensure that it is consistently and appropriately applied.
26. Young people are not restrained or sanctioned inappropriately. There are well established procedures in place to ensure that the use of these measures is minimal, appropriate and proportionate, and they are only used as a last resort. Behaviour management of young people is regularly reviewed and adapted by the centre's management in order to reduce the use of restraint,

sanction and removal from association. Data related to the use of these behavioural controls suggest that this review is working successfully.

27. All staff continue to receive effective and regular training in the use of restrictive physical intervention which is regularly refreshed to ensure that they remain competent and safe. The use of the approved form of restraint, 'physical control in care' (PCC) across the centre and by individual staff is carefully monitored to ensure it remains appropriate. The centre has made an explicit commitment to reduce the use of PCC and increase the use of good professional relationships to effect positive change in young people's behaviour, which is clearly understood by the staff team.
28. Within the requirements of maintaining security, the staff respect, promote and preserve the privacy and dignity of the young people.
29. Young people are very well protected from themselves and others through good risk assessment, planning and review. Effective admission and assessment procedures are in place that ensure newly admitted young people receive a systematic and comprehensive multidisciplinary risk assessment. These assessments are routinely reviewed and updated throughout a young person's stay at the centre.
30. The risk of suicide and self harm by young people is very well managed by the centre through very effective and explicit management strategies. These very effectively support young people identified as being at risk. These procedures routinely involve close consultation and participation with parents, social workers and youth offending team (YOT) workers, who are kept fully informed of developments related to the child.
31. Subject to any agreed restrictions, positive continuous contact with families and significant others is effectively promoted. They are notified of significant events that affect the young person and are invited to participate in assessment, planning and review.
32. There is a transparent and robust complaints procedure in place that provides young people with a range of opportunities to make complaints about their care. The procedure is highly explicit, easily accessible and free from discrimination or the risk of recrimination. It allows young people to make complaints without the need to involve or inform staff, and includes clear timescales by which they can expect a response. Although the procedure is intended to reassure young people that they can complain with confidence and they will be heard, occasional failure to meet acknowledgement deadlines reduces the positive impact.
33. The complaints procedure and outcomes of complaints are very rigorously monitored to ensure they are fair and young people are satisfied with the

outcome. Young people are advised that there is a right of appeal to the Director of the centre if they are unhappy with the outcome of any complaint they have made.

34. Young people are protected from potential abuse and enabled to share and receive support if they have any concerns through an easily accessible and effective advocacy service. They receive detailed information about the advocacy service and are aware that they can discuss their concerns in private with an independent person.
35. Young people at the centre are protected by well established and effective child protection and safeguarding procedures which conform to guidance in 'Working Together to Safeguard Children (2006)'. The procedures were drawn up in conjunction with the Local Safeguarding Children Board. There is a very good professional partnership between the centre and the local authority that ensures young people are kept safe.
36. The centre has an effective up to date anti-bullying policy and procedures which protect young people by offering a robust challenge to bullying behaviour. The incidence and potential for bullying are carefully monitored, recorded, regularly audited and reviewed.
37. There are highly explicit and transparent procedures in place to address bullying and where possible to resolve underlying conflict through the use of mediation and restorative justice interventions.
38. Safety and security systems and procedures are excellent. The centre has robust measures in place to ensure that young people, staff and the community at large are kept safe. Staff are well trained to manage security and there are well established and efficient security systems in place.
39. Thorough emergency and contingency plans are in place to protect young people and staff from hazards, fire and catastrophic incidents. These are agreed with the emergency services and local custodial centres. Although there is regular monthly desk top testing of these procedures, a full serious incident scenario has not been tested involving the other custodial centres on the same site that would form an important part of any emergency evacuations. Consideration is being given as to the most appropriate way to test these arrangements.
40. Excellent health and safety policies and procedures are well established and are diligently followed by staff who are well aware of their responsibilities in this respect. The centre has achieved the British Safety Council Five Star award, which included the Sword of Honour.

41. Young people are fully aware of the procedures for searching them and their belongings. These procedures are carried out sensitively and with respect, ensuring young persons' privacy and dignity is maintained. All staff are trained and familiar with the centre's stringent procedures which prevent any possible security breaches. They are kept informed of any significant event or identified risk which may result in a security breach.

## **Helping children achieve well and enjoy what they do**

### **Education**

**The provision was not judged.**

## **Helping children achieve well and enjoy what they do**

### **Welfare**

**The provision was not judged.**

## Helping children make a positive contribution

### The provision is outstanding.

42. All aspects of the positive contribution outcome area were inspected in full during the last key inspection in March 2009. The judgement for this outcome area was judged as outstanding and there is nothing to suggest that there have been any failings in relation to these standards.
43. The only recommendation made under this outcome area was related to the need to improve telephone access to ensure parents and significant others can speak with young people without undue delays. This was as a result of young people and their parents raising concerns about the length of time it takes to get through to the centre, particularly during the evening periods.
44. The telephone system has not been upgraded since the centre opened 11 years ago. The centre has reviewed the possibilities for an improved telephone system and has recently identified one that can meet all the requirements and resolve the current difficulties. There is however, a significant cost to replacing the telephone system across the site and the next step is for managers to identify the funding.
45. Steps have been taken to address this recommendation, but it is not yet fully implemented and is therefore repeated.

## Helping children achieve economic wellbeing

### The provision is good.

46. The centre has introduced a range of initiatives to ensure that young people receive an appropriate programme to prepare them for the next stage of education, training or employment. These include practical help with budgeting including opening bank accounts, participation in the Duke of Edinburgh's award and the centre's own 'UR2Feet' resettlement project. A life skills booklet is also being developed with the involvement of young people.
47. The centre's resettlement team is engaging suitable young people with work experience opportunities in the community, for example the YMCA. This is to support them to enter the future world of employment.
48. There are explicit policies and procedures to ensure that resettlement issues are addressed at the initial planning meeting and at each subsequent review to ensure that they remain relevant and any identified needs are addressed.
49. The centre has detailed protocols to identify the role of the workers engaging with young people and supporting them with their resettlement needs. The post release supervisor is encouraged to be fully involved in the development, review and revision of the young person's plans from the point of initial review. This is to ensure that arrangements are in place for the young person to return to full time education, further education, training or work as appropriate upon their release.
50. There are robust strategies in place at the centre to encourage home local authorities to meet their legal obligations towards young people. These use a series of letters and communications with the authority at increasing levels of seniority to remind them of their responsibilities.



## Management

### The provision is good.

51. Leadership and management at the centre are good. The Director of the centre and his senior management team continue to maintain a clear focus on the aspects of service and practice they wish to develop.
52. Two of the recommendations made at the last inspection related to the night care team. Night staff were not consistently and appropriately briefed prior to taking over responsibility for the site overnight.
53. Managers have made significant changes to the night care team rota. All night staff have received a three month notice of change in their contracts and from the week following the inspection they will work to a different shift pattern.
54. The new rota has been designed to allow time for a formal handover with all night staff. It is anticipated that the new shift patterns will also enhance the opportunities for other meetings. Steps have already been taken to improve communication between the day and night staff on duty. There is evidence of adequate improvements in this respect.
55. The availability and quality of training at the centre are very good, but staff in the night care team have not been provided with as many opportunities as other staff to participate in developmental training. They have attended the mandatory training sessions; for example refresher PCC and first aid. However, the new rota provides for six training days throughout the year for night care staff. There is evidence that additional development opportunities have already been provided. Two night care staff have shadowed residential service managers and duty operations managers, in order to understand their roles with a view to promotional prospects in the future.
56. A concern was identified during the last inspection about the interactions between staff in the control room, care teams and managers. Staff in the control room are responsible for directing movements across the site and they communicate with other staff via radios. Young people can overhear communications between these staff groups and during the last inspection were critical of the abruptness of comments from control room staff. Managers have taken appropriate action to address these concerns. A thorough review has been undertaken of the role of staff in the control room. Clear guidance has been provided to staff working in this area, which includes expectations of behaviour and targets for delivery of the service. Control room staff have received training and are now fully aware of what is expected in terms of communication across the radios and when answering telephones outside of office hours.
57. Young people said they felt that most of the control room staff were very good and polite in their manner, although some reported that at times control

staff can still be a little curt in their responses. Managers have systems in place to deal with any practice issues.

## Recommendations

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

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| ▪ ensure that all complaints received from young people are acknowledged in writing within one day in accordance with the complaints procedure (Staying safe - Standard 26) |
| ▪ improve telephone access to the centre to ensure parents and significant others can speak with young people without undue delays (Positive contribution - Standard 19)    |