



Rainsbrook secure training centre

Willoughby
Near Rugby
Warwickshire
CV23 8SY

Monitoring visit

Inspected under the secure training centres inspection framework

Information about this secure training centre

Rainsbrook secure training centre is operated by MTC. The centre provides accommodation for up to 87 children aged 12 to 17 years who are serving a custodial sentence or who are remanded to custody by the courts. There were 45 children resident at the time of the monitoring visit.

Education is provided on site in dedicated facilities by Novus. Healthcare services are provided by Northamptonshire Healthcare Foundation Trust under a contract with NHS England. NHS England has statutory responsibility for commissioning healthcare services at this centre under the Health and Social Care Act 2012.

Visit date: 10 December 2020

This monitoring visit

As a result of the findings of this monitoring visit, the joint inspectorates invoked the urgent notification process. This process is set out in the protocol between Her Majesty's Inspectorate of Prisons and the Ministry of Justice and included in the joint inspection framework for secure training centres.

Leaders and managers at Rainsbrook secure training centre are failing the children in their care. This monitoring visit found that some children are still being locked in their rooms for 23.5 hours a day for days or even weeks, despite assurances that this would be stopped, after the practice was highlighted by an assurance visit carried out on 26 to 29 October 2020. The main focus of this monitoring visit was to assess what action had been taken to address this shortcoming and to ensure children's safety and well-being. This monitoring visit was unannounced.

Findings of this visit evidence a lack of action by senior managers and significant deficiency in management grip, meaning practice at the centre continues to have a serious impact on the care, safety and well-being of children. At this visit, senior managers assured inspectors that the Reverse Cohort Unit (RCU) regime was modified following the

assurance visit. Small bubble arrangements had been devised meaning that children could spend a minimum of 4.5 hours each day out of their bedrooms, and a further two 30-minute periods of fresh air. When inspectors spoke with children, they said that on admission to the centre they were being locked in their bedrooms for 23.5 hours each day. Managers disputed these findings, advising inspectors that there was evidence to refute what the children had said. Inspectors reviewed the evidence provided and found that this supported the children's views. As a consequence of this very serious failure in leadership and management at the centre, the inspectorates invoked the urgent notification process; a letter was sent to the Secretary of State for Justice highlighting the continued serious failings at the STC. The letter to the Secretary of State was published on 18 December 2020.

At the assurance visit in October 2020, no progress had been made on the 19 recommendations made at the inspection in February 2020. Only one of these 19 recommendations was evidenced as being met at this visit. Restrictions concerning staff viewing children through shower viewing panels as a safeguarding measure are now sufficiently rigorous. Senior managers have updated an action plan regarding progress made on meeting the other 18 recommendations. The action plan is a detailed description of what has been done and does not show the impact for the care, well-being and safety of children. This means it is difficult to evaluate the extent of any substantive, enduring improvements of children's experiences at the centre.

During this visit, inspectors also reviewed the following areas:

- The impact of a recent outbreak of COVID-19 (coronavirus) in the centre resulting in 13 children becoming infected. The centre is determined as a COVID-19 outbreak site by Public Health England.
- This visit explored whether children were feeling safer. The last assurance visit reported playfights sometimes getting out of hand and that some children felt that on occasions custody care officers (CCOs) were swearing and banter went too far.
- Children's experiences of the daily regime.
- CCOs' awareness of children's support and risk reduction plans and the routine application of them to help keep children safe.

This visit found that children's daily experiences are bleak. Four children living on the RCU told inspectors that on admission to the centre they were confined to their rooms for 23.5 hours each day for at least seven days. They were offered 30 minutes of fresh air each day during this period. Five children on the RCU regime during the week preceding the visit were found to have had no, or only very short, periods out of their locked bedrooms. There had been an increase in time out of bedrooms over the two days prior to the visit. Children newly admitted to the RCU are promptly assessed remotely by a range of specialist workers.

The centre acknowledges that one of these children, a boy, was placed on an 'incorrect management plan' in RCU conditions due to miscommunications about his medical vulnerabilities. Between 26 November and 10 December 2020, this child had a total of four hours out of his room. When this was alerted to senior managers by inspectors, they said they would investigate this matter.

The centre does not have a separate RCU for girls. A newly admitted child was placed on a girls' residential unit with others who were no longer isolating. Consequently, she was confined to her bedroom for almost 23.5 hours each day for six days, to prevent the risk of spreading COVID-19 to other children. For two days there was no record of this child having any time out of her room, and for the following three days she had a maximum of 40 minutes. This extensive period of isolation ended the day before this monitoring visit. The impact of this practice means that girls are not treated the same as boys and are subject to more restrictive conditions.

Most children in the RCU have a spartan routine. Most remained in bed for much of the morning and spent the rest of their days watching TV or playing on games consoles. Education workpacks were provided to the children. Children also filled time talking to their families and friends on their phones in their rooms. Some children declined offers of 30 minutes fresh air periods as, at times, these were offered early morning. CCOs regularly checked and monitored children in their bedrooms at frequencies complying with their vulnerability plans. Records of exchanges with children are brief and perfunctory, with limited determined and sustained efforts to engage and motivate children.

Poor communications from managers to staff meant that staff are unclear about expectations. There is a failure by managers to check that staff understand guidance and procedure and are implementing it accordingly. As a result, some frontline staff were confused about the detail of the 'bubbling' arrangements for children in the RCU and the requirements of frequently updated management protocols. This resulted in them being uncertain about the timing and mixing of children coming out of their bedrooms. One child told an inspector, 'It was weird how the new lad could come out of his room and I had to stay in for a week.'

Senior managers were not aware of the regime that children were living under in the RCU. There is poor leadership demonstrated by failure in management oversight and grip. There is a disconnection between senior managers' instructions to staff and expectations of them, to what is then subsequently provided for children on residential units. Children seen during this visit were not experiencing any benefits of the improved RCU regime and some told inspectors they were bored.

The centre had an outbreak of COVID-19 which infected 13 children in November 2020. At the same time, in consultation and agreement with Public Health England, Polymerase chain reaction tests were introduced. As a result, the isolation period for children in the RCU was reduced from 14 days to an average of seven days. Tests are carried out with children on day one and day five. If these show a child does not have COVID-19, they can come out of the isolation period and join other children in the main living units. The substantial reduction in the RCU isolation period is a positive development, but this has not addressed the continuing damaging impact of children being locked in their rooms for 23.5 hours each day.

Children living on the main residential units can come out of their bedrooms for up to 12 hours each day. There are limited purposeful activities to engage them in communal areas, with some children saying they were bored. A small number of children reported that playfights occasionally escalate, resulting in them feeling unsafe. Children did not report any unacceptable behaviours by CCOs. Since the assurance visit, managers have pursued

appropriate measures concerning staff who were using inappropriate language and engaging in inappropriate banter.

Some CCOs were more successful in creating a calm, respectful environment. This was not consistently evident, however, and other CCOs exercised less assertive and confident control, resulting in noisy, boisterous behaviours persisting for too long. Some CCOs, therefore, lack the skills to ensure consistently calm, respectful and purposeful behaviours by children. This has not been fully addressed since the last inspection in February 2020.

Following the temporary suspension of face-to-face education after an outbreak of COVID-19 in the centre in November 2020, children were encouraged to complete workbooks in their living units. Children reported that they rarely received feedback on completed work and consequently they became disengaged. Evidence of children devoting three hours a day to education workpacks was limited.

Teachers had recently started limited individual face-to-face work with the main cohort of children on their living units. The noisy communal areas are not conducive settings for quiet, purposeful learning. Prior to the resumption of some personal contact with teachers, children completed workbooks for a number of weeks following the COVID-19 outbreak at the centre. Children told inspectors that they did not receive feedback on their work.

Children’s support and vulnerability plans are readily accessible on living units to CCOs. Minimising and managing physical restraint plans are up to date, and vulnerability management plans are clear and sufficiently detailed. Case formulations and children’s histories are succinct, with informative summaries of their backgrounds.

When children move to a different unit there are delays in transferring their records. The quality of CCOs’ daily records and bedroom logs is poor. They are of limited value for staff and managers in understanding and monitoring children’s care and well-being.

Levels of violence in the centre remain largely unchanged since the assurance visit. However, assaults by children on staff have increased. Inspectors learned of a serious assault on two members of staff two days before the visit.

Recent Inspection History

Inspection date	Inspection type	Inspection judgement
26-29 October 2020	Assurance visit	Not applicable
17-21 February 2020	Inspection	Requires improvement to be good
2-12 October 2018	Inspection	Requires improvement to be good

What needs to improve:

Recommendations

- Immediately cease the standard practice of locking children in their bedrooms 23.5 hours a day on admission to the centre. The centre's plans about operational capability and children's personalised plans must support any decisions about children's care and any restrictions, including arrangements for placing children on close observations and children being provided with meaningful social contact.
- Put in place urgent arrangements to ensure that senior managers understand what is happening for children on a daily basis.
- Ensure that senior managers provide clear guidance for staff and they have in place arrangements to assure themselves that staff understand and are following the guidance.
- Take decisive actions to address the outstanding recommendations made at the last inspection in February 2020.
 - Ensure that the centre is adequately staffed so that children are always properly supervised.
 - Leaders and managers across the centre need to work together more effectively to quickly improve children's attendance and punctuality in education. Better support and challenge of children who refuse to attend education to maximise their learning time in the education unit are urgently required.
 - Leaders, managers and staff should implement effective measures to manage and improve children's poor and disruptive behaviours in education classrooms.
 - Improve the capabilities of frontline staff to consistently and confidently challenge children's poor behaviours, and to take immediate action when children are victimised by their peers.
 - Implement effective measures to reduce levels of violence across the centre to provide children with a safe and supportive environment.
 - Encourage and support all children to maintain reasonable standards of cleanliness and tidiness in their bedrooms.
 - Improve the governance of the use of force to ensure that any potential safeguarding concerns are promptly identified and pursued.
 - Ensure that all staff are aware of and have ready access to restraint-handling plans detailing children's medical conditions, and fully understand how the use of force may impact on these conditions.
 - Ensure that children are escorted to attend all their health appointments in the centre, and that their attendance to collect prescribed medicines is prompt and well supervised.
 - Deliver mandatory safeguarding and child protection refresher training within scheduled timeframes to ensure that CCOs have adequate knowledge to support

them in their roles.

- Review the reward and incentive scheme to ensure that it is equitable between boys and girls, and consistently applied, and that children can promptly access the rewards that they earn.
- Improve the quality of CCO observation records, including those relating to bullying, self-harm and security information, to ensure that managers have pertinent information to assess and control risks to children.
- All teaching staff should develop the necessary subject matter knowledge and teaching knowledge that enable them to deliver a high quality of education that fully engages children.
- Leaders, managers and staff should focus more on identifying children's starting points across a wider range of development areas, in addition to English and mathematics, and monitor their progress fully.
- Resettlement case workers should ensure that they do everything possible to secure the details of children's accommodation and licence conditions from responsible external agencies, well in advance of their release from the centre.
- All CCOs should receive regular recorded supervision and annual performance and development reviews following completion of their probation periods. These measures should actively support and challenge their direct work with children, promoting consistently high standards that increase children's trust and confidence in them.
- Significantly increase the range of enrichment activities, particularly for girls, and ensure that all children regularly engage in and benefit from them.
- Recruit to fill the vacancies in the education unit with suitably skilled and experienced teachers.

Information about this inspection

The purpose of this visit was to monitor the action taken and the progress made by the secure training centre since the assurance visit 26 to 29 October 2020.

The centre was inspected under the secure training centres inspection framework.

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

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