Oakhill Secure Training Centre

Chalgrove Field
Oakhill
Milton Keynes
MK5 6AJ

Assurance inspection

Inspected under the secure training centres joint inspection framework

Information about this secure training centre

Oakhill Secure Training Centre is operated by G4S Care and Justice Services (G4S). The centre provides accommodation for up to 80 children, boys and girls, aged 12 to 19 years, who are serving a custodial sentence or who are remanded to custody by the courts. There were 60 children resident at the STC at the time of this inspection: 56 boys and 4 girls.

Education is provided on site in dedicated facilities by G4S. Healthcare services are provided by DrPA Secure. The commissioning of health services at this centre is the statutory responsibility of NHS England under the Health and Social Care Act 2012.

Inspection dates: 3 and 4 February 2026

Dates of last inspection: 21 to 25 July 2025

Judgement at last inspection: inadequate

Recent inspection history

Inspection date	Inspection type	Inspection judgement
September 2025	Monitoring	No Judgement
July 2025	Full	Inadequate
February 2025	Assurance	No Judgement
December 2024	Monitoring	No Judgement

Information about this inspection

At this inspection, the inspectors evaluated:

- the care of children and young people
- the safety of children and young people
- the effectiveness of leaders and managers.

Inspectors have looked closely at the experiences and progress of children and young people 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), and Section 80 of the Children Act 1989. His Majesty's Chief Inspector's power to inspect secure training centres is provided by Section 146 of the Education and Inspections Act 2006.

Joint inspections involving Ofsted, His Majesty's Inspectorate of Prisons (HMIP) and the Care Quality Commission (CQC) are permitted under paragraph 7 of Schedule 13 to the Education and Inspections Act 2006. This enables Ofsted's His Majesty's Chief Inspector to act jointly with other public authorities for the efficient and effective exercise of his functions.

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

Findings from the inspection

We did not identify any serious and/or widespread concerns in relation to the care or protection of children at this assurance inspection.

Leaders have made solid progress in prioritising and improving a number of critical areas of practice that impact on children's experiences, under the capable guidance of the interim director and deputy, and more recently the permanent director of Oakhill. The response to safeguarding concerns is now more robust, the culture in Oakhill is starting to move towards a more child-centred approach and effective action is being taken to improve the environment for children.

Assertive and timely action is now taken when there are concerns relating to staff behaviours, and concerns are now appropriately shared with the human resources (HR) team and the local authority designated officer (LADO), so children are safer. At the time of this visit, all staff on duty had received safeguarding training, and those not in work will receive this on their return. This is a significant improvement since the monitoring visit in September 2025. Leaders recognise many of the improvements are still very new and not embedded, and that there is still more to do. The centre still uses wrist holds during restraints, and handcuffing children as a restraint is routine.

Since the last inspection, leaders have prioritised transforming the culture in Oakhill. The senior leadership team has been refreshed and expanded with the recent introduction of a dedicated head of safeguarding and a new senior facilities management post. The improvement plan has been strengthened. Leaders have established a clear vision and service priorities which have been co-developed with staff and children. This is underpinned by shared goals and expected standards of behaviour through the recently implemented professional code of conduct for leaders.

The previous interim director had started to repair fractured relationships with the local authority, and the new permanent director is continuing this work. As a result, there is greater collaborative working, including regular independent oversight of safeguarding concerns. Leaders are starting to broaden their external safeguarding networks through attending the local children's safeguarding partnership.

There have been improvements to quality assurance arrangements. Youth Custody Service (YCS) monitors have strengthened their independent oversight of the centre. YCS specialists have been used to focus on specific service areas to test the quality and impact of practice. For example, safeguarding specialists have reviewed all historical concerns, together with the centre and local authority, so leaders are assured that those from before the inspection in September 2025 had been appropriately managed. In addition, YCS escalation processes relating to practice standards in the centre have been refined to support more robust challenge.

The implementation of a compliance matrix is providing leaders with a breadth of performance data. Regular performance meetings are helping leaders better understand

the narrative behind the data. They recognise there is more to do to be more curious in scrutinising specific areas of practice and closing the learning loop.

Pain-inducing techniques continue to be used as part of the centre's minimising and managing physical restraints (MMPR) programme, albeit at a significantly reduced rate. Although the existing MMPR syllabus does not define the use of wrist flexion or inverted wrist as a pain-inducing technique, this does not align with inspectorates' view that this technique can and does cause pain to children when used by staff. Leaders have taken action to promote safer alternatives from the syllabus. However, the continued use of such techniques is inappropriate. This practice does not align with safeguarding expectations or the promotion of safe, trauma-informed care. Credible solutions to progress the rollout of the new MMPR syllabus at pace have not been progressed.

While there has been a significant reduction in the use of pain-inducing techniques, the practice of handcuffing children is routine. This is a concern. There is insufficient oversight from leaders and managers to determine if this use is appropriate and proportionate, as no detailed analysis has been undertaken to understand this through quality assurance processes.

There are inconsistencies in the quality and approaches to the use of force. In stronger examples, staff actively de-escalate the incidents effectively. This contrasts with weaker practice where opportunities to de-escalate are not always used, or there is a poor application of MMPR techniques. In addition, debriefs to hear children's views, including understanding the triggers for assaults, are not consistently carried out. Although the strategic oversight of incidents has been strengthened, with all restraints being reviewed by the MMPR coordinator, not all shortfalls are being identified. This is limiting leaders' understanding of current practices and their ability to reinforce expectations, as well as address any weaknesses.

Oakhill leaders now take a more robust approach to safeguarding. The newly implemented tracking system monitors all safeguarding concerns, enabling leaders to promptly identify patterns, trends and any shortfalls. The LADO attends regular safeguarding meetings and provides external oversight and scrutiny, which is strengthening transparency and accountability. As a result, concerns are responded to appropriately and actions are clearly recorded and followed up. However, these systems are still not embedded.

Extended periods of separating children from their peers have not been used since the last inspection. Quality assurance oversight of incidents where children are separated from other children has improved. All incidents are subject to robust scrutiny, which is providing greater assurance that the use of separation is appropriate, proportionate and safeguarding children effectively. At the time of this visit, group separation was not being used.

Staffing levels in the education provision have improved. However, a notable proportion of staff are either newly appointed or still going through their induction. Leadership capacity has reduced because the headteacher no longer has the support of 2 assistant

headteachers or a deputy. To mitigate these gaps in the leadership team, leaders have recently commissioned an education consultant to provide professional support to the headteacher. Leaders are positive about the potential benefits of this partnership, which is expected to offer valuable external challenge and critical oversight. It is too early to evaluate the impact of this support.

The school improvement plan has been streamlined into a single centre-wide document, which is reviewed monthly with all heads of service. This approach enables leaders to maintain a clearer focus on priority actions and ensures that improvement activity is timebound. The school improvement partner provides additional guidance which aims to strengthen leaders' oversight. However, written guidance is not up to date and does not include the new introduction of the IT tablets or the recent changes in education staffing.

Children with education, health and care (EHC) plans report that they receive the help they need to learn well. They benefit from small class groups and speak positively about the in-class support available to them. Several children described how staff scribe for them during lessons, which they find particularly supportive. They explained that this assistance helps them maintain focus and contributes to their success in achieving qualifications in subjects such as mathematics, English, and hair and beauty. Children are proud of these achievements and have clear aspirations for their future.

Oakhill has significantly invested in IT tablets for all children to use in class. This represents a significant step forward in developing digital learning and has the potential to enhance children's engagement and progress. It is too early to determine the impact of this initiative.

Progress has been made by DrPA Secure, who are now providing safer healthcare to children. More staff are in place, governance structures have been improved, and leaders have greater oversight of the service. Further work is needed to ensure the provider is fully meeting all health and social care regulations, such as improving care plans, fully embedding auditing and ensuring records fully justify and reflect all clinical decision-making.

Children who self-harm are mostly well cared for. Safety and wellbeing plans are precise, well written and clearly set out the actions staff must take to minimise the risks of harm to the child. Children benefit from a well-coordinated multidisciplinary approach, so their mental health needs are fully explored to inform care planning.

Where children have known physical health conditions, they receive the healthcare they need. Staff ensure the required medications are prescribed and available to children. Appropriate monitoring of pre-existing conditions is in place and medical advice is promptly sought.

Children told the inspectors that they felt cared for, describing their experiences of living at Oakhill as positive. Children reported trusting relationships with staff, whom they described as approachable and supportive and providing what they need. Most

interactions observed between staff and children were warm and respectful, which is helping children to feel valued and listened to.

Leaders have prioritised improving children's surroundings. Children's living spaces have been redecorated, creating a warmer and more welcoming environment. Communal areas are clean and well maintained and enhanced with new decor and soft furnishings, while children's bedrooms are personalised to reflect their individual preferences. These improvements contribute to a positive atmosphere that supports children's wellbeing.

Most staff say they feel supported by leaders and managers. They report that the environment is now more homely for children and that practice around restrictive interventions has improved.

What needs to improve:

Recommendations

- Ensure the safeguarding of children by:
  - reviewing and confirming that the centre's policies and procedures reflect statutory guidance (Working Together to Safeguard Children 2023), and that they are understood by all staff and followed, leading to all safeguarding concerns being reported without delay to the internal safeguarding team, and that they are shared as appropriate without delay with HR and with the LADO and/or local authority children's services; and
  - ensuring that regular and accurate tracking is effective and that all actions are completed.
- If children are separated for extended periods, there must be a clear recorded justification for the ongoing use of separation, and when the legal criteria are no longer met, the separation must end.
- Cease immediately the use of inverted wrist holds as a method to physically restrain children.
- Improve the quality and impact of health support for children by:
  - ensuring that children's wide-ranging physical and mental health needs are understood and swiftly met;
  - ensuring that all health records are accurate, and appropriate information is shared across the centre to inform the care children receive;
  - ensuring that medicines are administered safely;
  - ensuring appropriate storage of specimens and samples; and
  - ensuring governance systems and structures promote a safe and well-led service for children.
- Establish and maintain a positive and proactive leadership culture. Leaders in all areas of the centre must have sufficient experience, skills, knowledge, credibility and, where appropriate, qualifications for the role they perform. Leaders should be visible to all staff across the centre, exhibit and set clear expectations of high standards of professional conduct and be role models for all staff at all levels. Governance and quality assurance mechanisms should support all improvement activity and test the effectiveness of practice such as MMPR, including the use of handcuffing children, as well as new policies and procedures.
- Senior leaders in the YCS should undertake a review of the roles, responsibilities and experience of the on-site monitors. To be effective, on-site monitors require sufficient experience, skills and knowledge in working with children and an understanding of their needs so as to hold the STC to account if it fails to provide good enough standards of care, safety and wellbeing for children.

- Improve the quality of education by:
  - reviewing the current curriculum so that it meets the needs of all children and its content is broad and ambitious, to enable children to learn as much as possible;
  - understanding children's ambitions and goals so they can be appropriately supported, including through accredited programmes;
  - ensuring that children with an EHC plan or with undiagnosed learning needs receive dedicated support to help them make the progress they are capable of.
- Improve the oversight of the incentives scheme to ensure it is implemented consistently by all staff and improve the scheme for girls so that they are not disadvantaged.
- Improve the cleanliness of children's units and the main kitchen.
- Review the length of time between children's meals so that children are suitably nourished, that they have adequate portions and that supplies to each house unit are appropriate to meet children's needs.
- Review monies taken from children and take action for this to be reconciled.
- Improve the range and breadth of activities for children.
- Ensure that children receive their full visit entitlement with their family and friends.
- Ensure that there is sufficient staffing on units and that rotas accurately reflect this, so that staff can appropriately care for children and they are not left vulnerable.
- Ensure that all staff have the appropriate up-to-date mandatory training, including in safeguarding children.
- Improve the culture within Oakhill so that it is child centred, and so that staff understand clearly the professional behaviours that are expected, including keeping information confidential about other staff and children. This should extend to all professionals who visit or work with children in Oakhill.

Secure training centre details

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