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HM Prison and Probation Service

Youth Custody Service

HMYOI Cookham Wood

HMIP Summary

October 2022

v0.1

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Background & Purpose

A request was made by Medway Council for a summary of HMYOI Cookham Wood's response to the inspection by Her Majesty's Inspectorate of Prisons in August 2021.

This document details both the initial response to the Inspection report, and progress against agreed actions.

Self-Assessment Report

At the time of an Inspection, the establishment is required to present a Self-Assessment Report (SAR), which summarises the current position and 'distance travelled' since the last inspection. Attached is the assessment from August 2021.

1. Vision (250 words maximum)

Since my arrival in October 2020 I have been clear with staff, children and partners that my vision is to have a community based approach, which will improve safety for everyone. This will be achieved by empowering landing communities, whilst delivering a regime and services that support evidence based approaches that are most appropriate to the children in our care. An Integrated Care approach will make the best use of the expertise within our partnerships, whilst investing in our staff will empower them to deliver the best child focused service.

Working in a responsive way creates an inclusive community where individuals are safe and enabled to engage and make positive changes to their lives. Developing people within an open learning culture creates an ethos of continuous improvement, understanding and people feel valued. Providing the right tools and knowledge to recognise, manage and address the risks and vulnerabilities of our children will create a culture that celebrates success, encourages positive behaviour and takes into consideration maturity levels and past experiences to provide an effective child focussed service.

We enter into a 3-year Strategic Plan, which includes a detailed Year 1 Business Plan.

In July 2021 we progressed to Stage 2 of the Exceptional Delivery Models. This will balance increased purposeful regime delivery with the maintenance of vital infection controls. This progression to stage 2 will allow us to safely increase meaningful and structured time out of room for children, whilst investing in staff. This investment is crucial, to support the effective community based approach.

2. Healthy Prison Tests (3000 words maximum)

Safety

Transport arrangements for children travelling to and from court have improved. Escort vehicles are now equipped with information/entertainment and the new fleet of vehicles provide a better environment for children. We have worked with the provider to ensure that children are not picked up any earlier than is required, so time waiting at court is reduced. Children now arrive with sufficient time to allow effective first night procedures to be conducted.

We have recently refurbished reception to give it a brighter and more welcoming feel. We have also combined our induction process with our reverse cohort unit to ensure we induct children whilst maintain infection control measures.

Encouraging children to behave positively and managing poor behaviour was made very difficult due to the pandemic, however as we progress in to stage two we are working towards a behaviour management strategy which will promote and reward good behaviour. We currently have a draft format and this will be implemented to support the launch of building our communities.

Whilst use of force at is primarily deployed as an immediate response to a prevent harm, there are elements of use of force that I have asked be focussed on for improvement. These include;

Incident management

The response to, and management of incidents remains a concern for me. Large numbers of staff responding to an incident is sometimes necessary in significant incidents. However, often these large numbers of staff are not necessary, and confuse incident management and sometimes provoke a heightened reaction from children. We are in the process of reviewing the alarm response, a safe system of work has been written and is in consultation with the staff union. This aims to reduce the number of staff responding to incidents, which not only reduces the potential for incident escalation but also maintains more staff in their designated work areas so will have less impact on the regime for other children. Effective incident management has been variable, with some work required in the Custodial Manager group to ensure they are confident and competent in this area.

In response, we have;

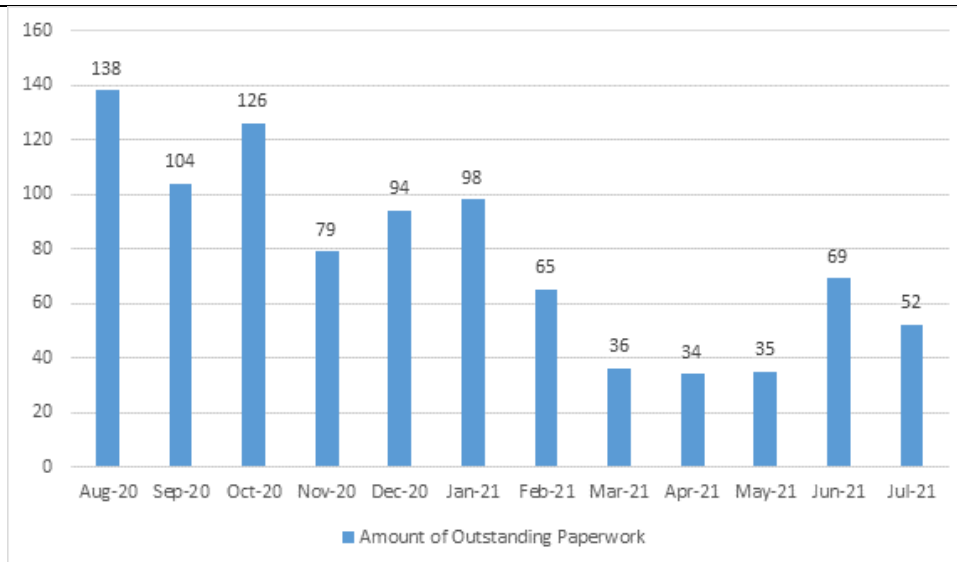
- Liaised with the National MMPR team to provide Incident Manager training to all Custodial Managers.
- Worked with individuals on a case by case basis through the local MMPR team.
- Provided advice and guidance, supported by the National MMPR team, regarding deploying force to resolve incidents where there is no immediate risk of harm (non-compliance incidents).

In addition to the regular Restraint Minimisation Forum, we have introduced a debrief process for all significant incidents. The purpose of this is to look for learning points with a view to preventing similar incidents and reducing use of force as a response. For those incidents where the highest level of force was used (pain inducing technique, or a serious injury or warning sign). An additional multidisciplinary review process has been implemented. I chair this and it is again focussed on lessons learned to reduce high risk incidents.

Positively, we are seeing more effective management of incidents. During the calendar year we have seen a significant number of incidents at height, with high numbers in January following on from similar numbers in December, steady numbers throughout the year and an elevation in June. The response to these incidents, shaped by incident manager training and lessons learned, have changed considerably and the response is now proportionate to the risk, and resolved in time without the recourse to deploying force.

Reporting and Recording

Use of MMPR recording and reporting is an improving picture, but we recognise that it still has distance to travel. Significant improvements have been made in the management of use of force report submissions, with late submissions being referred to line managers and heads of function to address. Numbers of outstanding reports owed are reduced, but there remains a portion that fall outside the 72-hour permissible timeframe. Staffing levels have been strained due to pandemic absences throughout this period, meaning that time for staff to complete paperwork has been difficult to facilitate when balancing a decent regime for children.

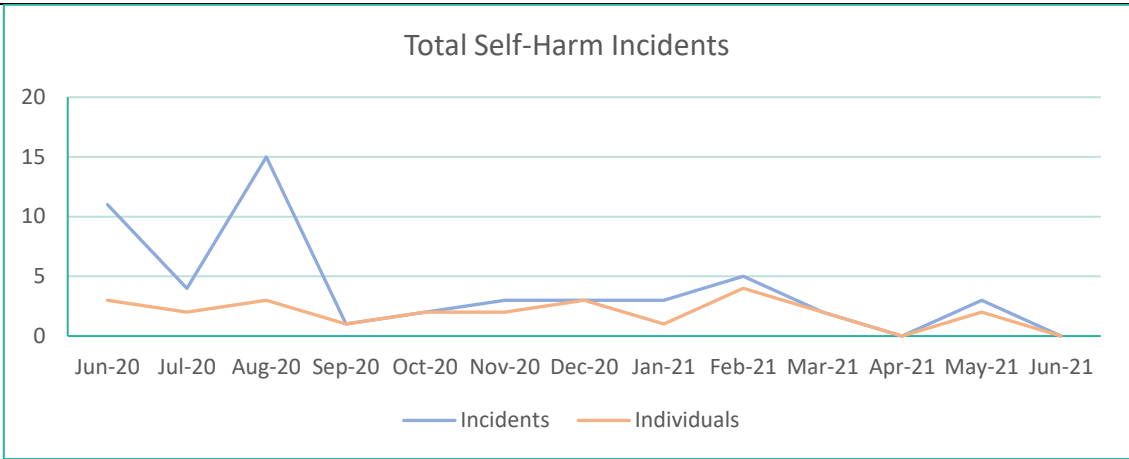


A structured business plan, aimed at delivering realistic, focussed change, is the building ground upon which the change will be delivered. Actions are reflected in the Safety Strategy and build towards a Cookham Wood that is clean, decent, and focussed on positive outcomes for children and staff.

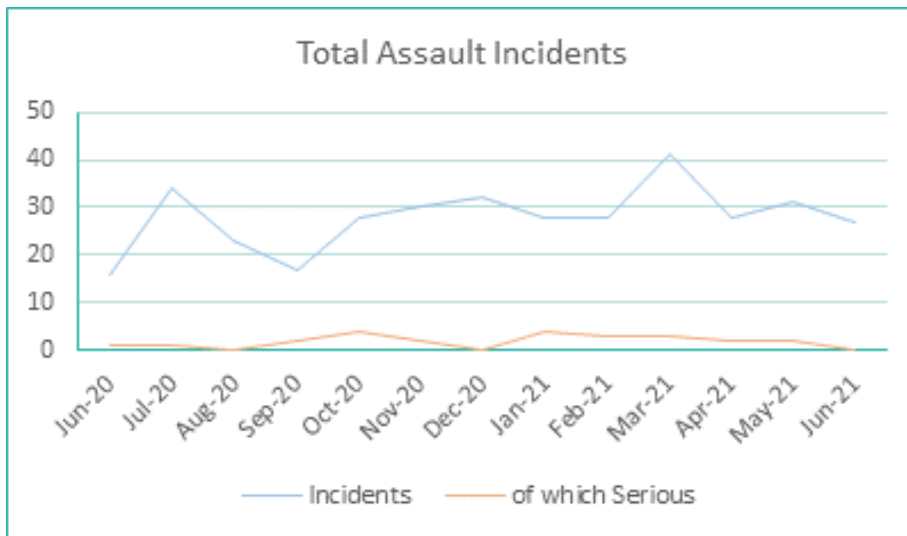
In terms of tangible outcomes we have;

- Custodial Managers are now based on their respective landings, taking control of the development of their community.
- We have made improvements to ensure our staff are consistently allocated to their communities.
- Re-established and engaged the Youth Council, now named the Junior Leaders Team.
- Invested in staff, establishing a wellbeing strategy, regular reflective practice, and consultation forums with senior leaders.
- Established staff training needs, to equip them to work effectively with young people.
- Restructured the Safeguarding strategy forum from quarterly to monthly to enable a higher level of scrutiny.
- Additional resource into the Safety function, providing more qualitative analysis of incidents to inform response strategies.
- Additional resource into the Conflict Resolution function, with the aim to proactively engage communities and promote the concepts of positive peace.
- Appointed a Head of Integrated Care to co-ordinate the strands of delivery into a workable, effective model, and hold delivery partners to account.
- A range of works projects are ongoing to provide an improved physical environment, including spaces to meet with young people for interventions and 1-1 sessions.
- Closed the Phoenix Unit, and are remodelling it into a day centre to engage those young people with most complex needs.

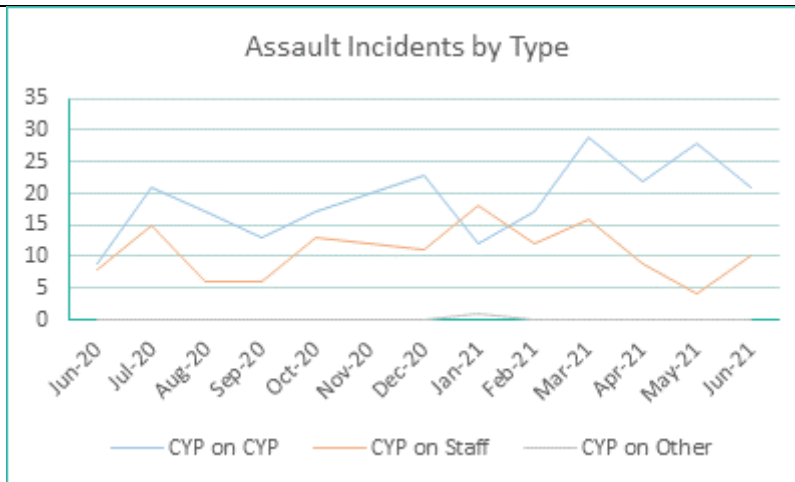
Self-harm remains low in the establishment and there are no children who are classified as prolific self-harmers. Most self-harm is of a low level and at the current time there are 4 open ACCT documents. We have very recently moved to the ACCT version 6 document.



We respond effectively to significant incidents and have implemented hot debriefs, re-launched conflict resolution and have a thorough overview at the daily meeting. I feel that further work is needed with regards to the lower level incidents and intimidation, and as a result have funded a new Head of Safety to work with the Head of Safe Guarding. This post will co-ordinate and investigate low level incidents and provide better support for victims, as well working with perpetrators to minimise the risk and improve safety for others.

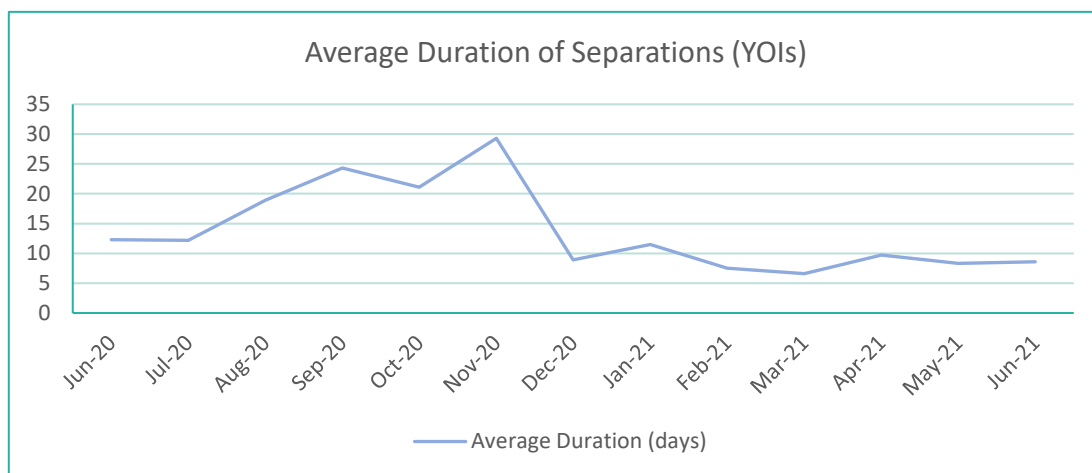


Local recorded data shown above indicates violent incidents are still too high but have fluctuated over the last year and now broadly remain at the same level. As we progress through stage two and further expand bubble sizes and the regime, there is the potential for heightened conflict within our communities which we feel we are now better equipped to manage more effectively. Focus groups with children have evidenced that they want to expand their regime bubbles as they also recognise the benefits attached to this.



Reducing violence and separation is intrinsically linked. Much of our separation comes from risk to or from others (Rule 49) and a significant portion of self-separation comes from children who are fearful of mixing with others. Strong communities, with decent and incentive driven regimes, will have significant impact on the willingness of children to engage and be part of.

I have placed a great deal of focus on reviewing separation in as timely a fashion as soon as possible so where it has proven necessary to separate a child, the duration of this is kept to an absolute minimum. The reduction in the length of separation is positive and is illustrated below;



Care

Staff and children relationships are a key element of our vision of community living. A large proportion of our staff have now either completed or undertaking the Youth Justice qualification that heavily focusses on how improved relationships have better outcomes for children. Since transition to stage 2 we have begun to establish community meetings on all landings, to further establish positive relationships within the communities.

Graffiti remains an issue and we have taken a large proportion of rooms out of action as we deemed them not decent for children to reside in, we have undertaken a programme of painting these. We are now working with the children to encourage them to not graffiti their rooms and where appropriate move in to refurbished accommodation. A programme of graffiti removal in shower cubicles has also begun and 50 have been completed to date. Children are issued clean clothing and bedding on a weekly basis and are able to access toiletries as required in addition to purchasing these items from the canteen should they wish to. Cleaning equipment and materials are available on each landing allowing children to keep their rooms clean.

Diversity and inclusion remains a concern for me and is one of my priorities. Following the recommendations of the last Inspection, a Diversity and Inclusion team were established supported by a Senior Psychologist. The D&I Policy has recently been re-launched and this is supported by an action plan.

Following a recently requested race thematic, DIRF's were raised as an area of concern. The system has been reviewed. DIRFs are available via hardcopy on each landing with a box to submit completed forms and are also electronically via the children's laptops.

However, positively we have completed and have planned the following initiatives and events:

- Black History Month event. Children and staff worked collaboratively to include all aspects that were important to them, this included food, culture, music, jewellery and books from the library.
- A Homophobia awareness session is booked for both children and staff this month, this being in response to the identified DIRF data trend that has been prominent over the last 2 months.
- This year, one of the larger events we are focusing on is "Youth Inclusion Month" during August. This will see us running a two-day event, Cookham Olympics, at the end of August run by children and staff together. This will include children setting up and scoring events as well as dining communally with staff.
- The D&I team attend each landing's community meetings, this is already underway within Cedar House, with the remaining communities due to take place during August.
- We are currently continuing to recruit D&I representatives, in addition to the four already in place, so that they can assist us with identifying and implementing changes where possible to ensure we are inclusive of all the diverse groups.

The Health and Wellbeing Team have continued to develop the integrated model of care across Cookham Wood with a series of new innovations and adaptations of practice to focus on the specific needs of the establishment. These have included:

- Our Speech and Language therapists are currently working alongside education to ensure children with potential speech and language communication needs receive a communication assessment and a 'Communicating With' document is produced.
- We have begun to establish a community network meeting, this is a space where alongside community and establishment professionals, parents are invited to be present and join conversations about the care and services provided to them and their children in our care.
- There are also plans for the Health and Wellbeing team Family Therapist and the Clinical Forensic Psychiatrist to facilitate 'Family Thinking' workshops.
- Our Occupational therapist with the head of catering has developed a cooking group to help build a sense of community which was initially delivered on A3 landing but there is now plans to roll out to other landings including Cedar.

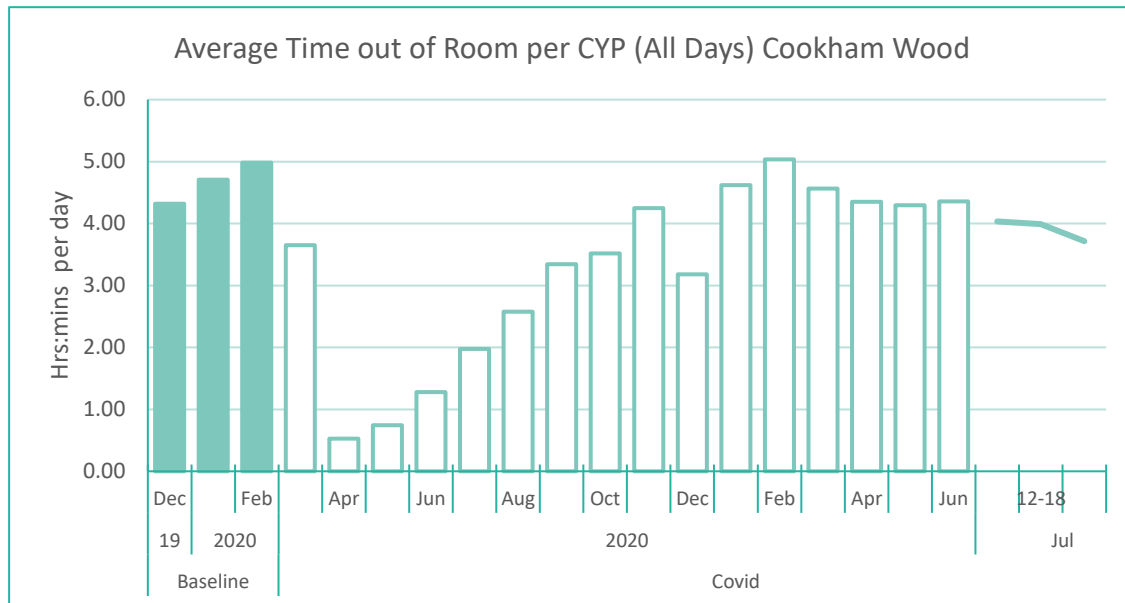
Access to room space continues to be an issue however, since my arrival we have utilised space within the lower education area to facilitate more one to one interviews. We have a number of additional work requests in progress to increase activity space across the site, which will hopefully be completed by the end of the financial year.

The provision of primary health care is good and remained effective during the pandemic. Children have regular access to GPs and dentists and there are no long waiting times for these.

Open Road provides the psychosocial substance misuse service. All children who enter the establishment receive some level of intervention, in the form of a brief intervention or more structured targeted programme. Children with identified needs are all provided with weekly scheduled 1-1 appointments and are allocated to specific programmes, tailored to their individual needs. Since September of last year Open Road have provided young people with resettlement support, both pre and post release, via the "Inside Out" project to support the coordination of an effective and seamless transition for children and young people from a prison environment into the community. I am aware that during the pandemic we have not been able to deliver a full range of substance misuse interventions therefore we are reviewing the current drug strategy to ensure it meets the needs of the establishment requirements as we transition in to stage two.

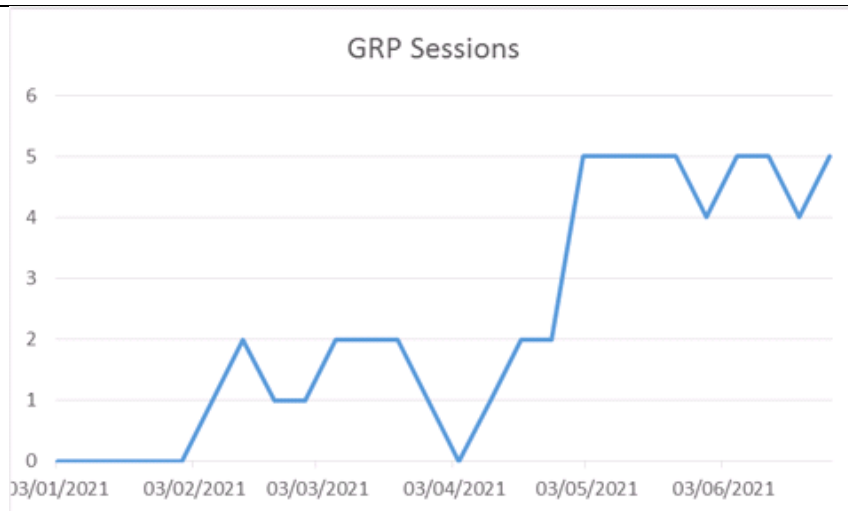
Purposeful activity

Having been very low at the start of the pandemic (averaging less than 1 hour per child per day), average time out of room has increased on a month-on-month basis until February of this year (with the exception of December 2020 due to a peak in staff absences which reached over 100 in this month). During February 2021 average time out of room reached 5hrs per child per day as illustrated below;



Due to the significant increase in staff training hours, community meetings and the number of GRP sessions, time out of room has plateaued at around an average of 4.3-4.5hrs per child per day. This investment in the staffing group is important to deliver the community focused approach.





Part of moving to stage two has allowed us to progress to allocating to education classes based on both need and career aspiration rather than allocation based upon location within the establishment. At the start of the pandemic it was not possible to allocate based on need/aspiration as restrictions meant that family bubbles could not be mixed; as we have moved through the various gateways we have moved to a model where all allocations are now based on this need/aspiration model with the result that the Fitness and Radio are entirely mixed classes with children from a variety of communities, while all other classes are moving towards this model of allocation. In addition to our “traditional” learning offer, a number of more bespoke learning opportunities have been on offer over the past year.

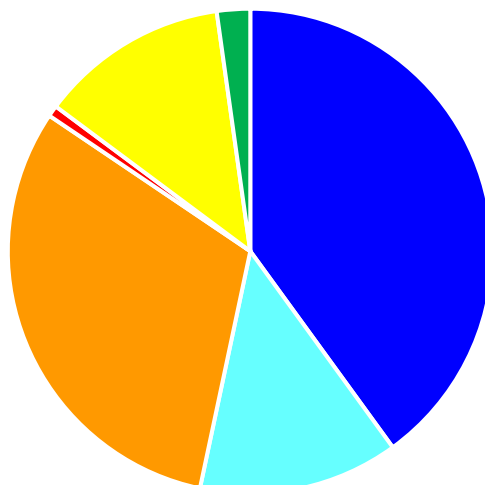
Please see Annexe 2 and 3 for more detailed overview from Novus

Resettlement

Social visits have been maintained throughout the pandemic and we were really excited to be involved as an early adopter site for full contact visits and because we now offer this service, we have seen an increase in families, friends and significant others visiting children.

All residential accommodation has in room telephony, mail services have continued throughout subject to any public protection measures. We are the first site within the YCS estate to offer all children in room technology, all children now have their own personal laptop which they can access a variety of services which includes an email account to maintain further contact with the outside world.

ROTL



■ Projects ■ Vocational & Other ■ Educational ■ Social ROR ■ Social RDR ■ Medical

There have been a total of 136 ROTLs in the last 12 months, below is the breakdown of these.

- *Projects* 54
- *Vocation and other* 18
- *Educational* 42
- *Social ROR* 1
- *Social ROR* 18
- *Medical* 3

Our resettlement department have worked with external agencies and families in difficult and unusual circumstances.

- *One example of this was when we held a family visit for a child whom had fled his birth country leaving his family behind. This child had not seen his family for a number of years and his mother and brother had arrived in the UK and we enabled them to have their first visit together.*
- *A second example of this was holding a visit for a child with his Mother and Grandmother so they could disclose that the Mother had been diagnosed with a serious illness and the course of treatment she had opted to have.*

The pandemic has meant we have had to adapt how review meetings are held; we have had to use various types of technology. We opened up physical review meetings as soon as it was safe to do so. Sentence plans and review notes are all now completed on the same document, this allows for continuity of information shared with external agencies and the child in our care. On each sentence plan under every target there is a section that allows us to identify how each target, assesses risk areas for that child, this allows the child to have better understanding of why they have been set a target. Sentence plans are then fully shared with the child and are quality assured on a monthly basis to ensure ongoing improvements can be made.

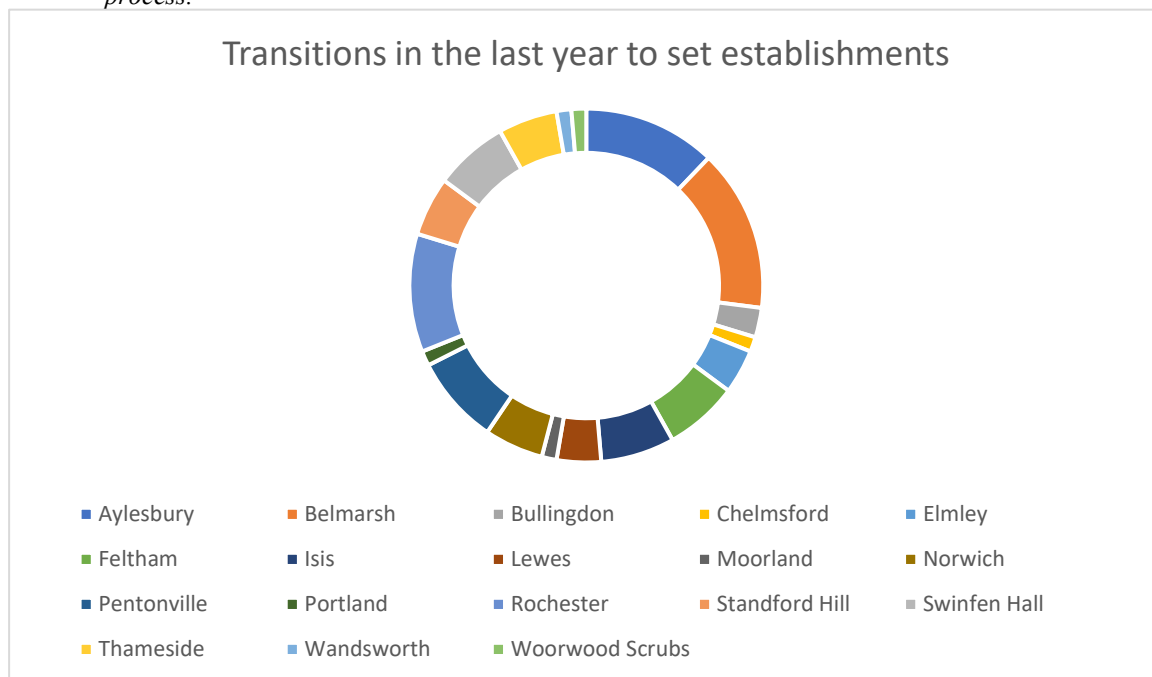
The Interdepartmental Risk Management Meeting is an improving picture on attendance from other departments, however this is still a matter we are trying to improve. We have had great success in gaining confirmed MAPPA levels for children prior to release which has been an ongoing concern for us. Information sharing and gathering has been improving between the agencies and departments to enabling us to manage the children on the IDRM.

Transition of children in to the adult estate continues to be a significant risk for us and something we continue to work through with the YCS and placements team however, we should celebrate the successful transition of 74 children in the last six months into the adult estate. This includes a group of boys we transitioned to HMP Stanford Hill, before their move we facilitated several pre visits to the establishment,

where they met with staff and prisoners. We have also implemented the following as part of our improved transition system:

- We have staff from the induction unit at HMP Isis visiting HMYOI Cookham Wood to better understand the differences between the estates, and how better to understand the change that children endure when moving into the adult estate.
- We have filmed the induction process as well as interviews with staff and the SLT at HMP Isis which is being edited to upload onto the children's laptops, so they can view the establishment prior to them moving.
- Work has started with the Howard League around Lifer Boards for indeterminate sentenced children. This will then enable work to be started on forums and bespoke sessions for this group. Within this we are also looking at recording a mock Parole Board for children to view on their in-room laptops, this will allow better understanding for the children who are going to face this process.

Transitions in the last year to set establishments



Interventions programmes were suspended during the early days of the pandemic as restrictions put in place to limit the spread of the virus did not allow the mixing of children from different bubbles. As these restrictions have been relaxed we have been pro-active in restarting interventions.

An important piece of work that is ongoing is producing a more in-depth and holistic needs analysis, this work is being undertaken by interventions and psychology. When complete will form part of a whole establishment needs analysis which aims to bring interventions, education and resettlement all together in one establishment "whole approach" document.

A range of interventions of currently being delivered as illustrated below;

Month & Year	Sessions Booked	Sessions Attended	Sessions Unattended	Name of Intervention
June 2021	7	7	0	A>Z
June 2021	5	3	2	STAG
June 2021	74	56	18	FEELING IT

3. Main priorities for the next year (six maximum). For each priority please state:

- a) What is the priority?
- b) How do you know that this is a priority?
- c) How are you delivering this priority?
- d) How will you know you have succeeded?

Priority 1 Reducing Violence

Performance data (such as PMIT etc), survey results and feedback from child and staff forums indicates that violence remains a significant problem within the establishment.

Improved investigation and analysis of the causes of violence has allowed us to better understand the key drivers within the establishment and develop responses to it. We are reviewing and implementing an incentive-led Behaviour Management Strategy which embraces the principles of Building Bridges and supports our landing Communities. Children and staff will be consulted on this before publication. We will continue to train our staff to deliver quality CuSP sessions with children and begin regular delivery of these on a fortnightly basis during Q3 of the year. We will proactively use Conflict Resolution to avoid conflict and associated violence. We have already physically embedded the Conflict Resolution resource into the landing communities, to provide support and guidance to children, by re-siting them onto the main residential unit.

We will continue to regularly review both individual acts of violence and patterns of violence to identify key themes and trends so that our response to these can be appropriately tailored to meet the needs at that time; this will be achieved through Weekly Safety Meetings and accurate IRS reporting.

We will measure violence within the establishment and will recognise success as a decrease in the number, type and severity of violent incidents as well as improved measurement (through survey and questionnaire results etc) of wellbeing and decreased absence rates.

Priority 2 Creating Communities

A Community-based model is one of the central pillars of our vision. Increasing the number of children allocated to single activities will allow us to enhance the variety for each child, and the opportunity for them to engage which is part of our Vision to help children to make positive changes to their lives.

We are delivering this priority by implementing and rolling out Community Meetings across all areas of the establishment. We will use an opportunity for educational delivery across 4.5 days to provide fortnightly community meetings (fortnightly as from Q2) for each landing, inclusive of all children, staff and partners who work with them.

We recognise the importance of consistency of staffing in the creation of successful communities. To achieve this, landings will be “paired” and staff shared across each pairing. Custodial Managers will relocate to work in the light bays on each landing, to empower them to more efficiently lead their communities. Office type accommodation will be reviewed, and reallocated where appropriate, to maximise the opportunities for one-to-one work on the residential unit. We will re-purpose two rooms on each landing for use as an interview/group room, for both planned and ad-hoc use. We will also look to re-purpose one of the sports pitches as a small covered area, to provide additional opportunity for all weather sport. Providing opportunity for children to have meaningful Time Out of Room will continue to be prioritised.

We will measure success by the creation of thriving Communities in which staff have positive and effective working relationships with the children in their care (as measured through survey, questionnaire etc); staff and managers who work closely and routinely with colleagues from other disciplines (such as Health, Psychology etc) in clean, decent and well-maintained environments and where children are able to mix freely within their Community as well as between Communities when, for example, attending pathway-led education and other activities.

Priority 3 Investing in Staff

Training Needs Analysis indicates a high level of training need across a number of areas. A diverse, skilled and valued workforce helps develop leaders at all levels and a culture that encourages openness and honesty and a sense of pride and ownership.

We are delivering this priority by re-introducing Reflective Practice which has been inconsistent throughout the pandemic. This will be made available to all staff on a fortnightly basis. Work will be undertaken to ensure that the recruitment pipeline best reflects our needs through under-staffing and attrition. A POELT mentor has been appointed and will provide proactive support for all new starters.

The Training Needs Analysis has been completed to quantify how many hours of training are required to meet the backlog generated over the past year. Essential training (such as MMPPR, RPE, first aid etc) will be prioritised and delivered to all staff. Approximately 11,350 hours of essential training are required and a further 3120 hours are required for Unitas study time. Staff will be given the opportunity to formally discuss performance, development and progression at agreed times throughout the year using the SPDR process. A new profile will be implemented to best support delivery for 2021-22. This will take account of the staffing shortfalls, and the disparity previously identified by SIG. Pandemic related Annual Leave carried over from 2020-21 will be prioritised.

We will measure success through the creation of a diverse, skilled and valued workforce by ensuring that staff are able to access training opportunities which match the need of the children in our care, as well as those which provide development opportunities. We will ensure all staff are able to access additional forms of support, such as Reflective Practice, and ensure staff are supported to becoming experts in supporting and managing children and young people.

Priority 4 Embedding an Integrated Care Framework

The establishment Business Plan identifies that the need to embed an Integrated Care Framework into and across the establishment is a priority for the coming year as this will allow children to have their needs, risks and vulnerabilities effectively assessed and responded to, as well as recognising that a smaller number of children within our care come with additional complexities which require an additional level of support to help them achieve their full potential.

We are delivering this priority by undertaking an HMPPS-led review of the education curriculum, based on a learning needs analysis of the children. This will inform the pathways that will be delivered by the education provider. In addition to this an individual needs analysis will be completed for each child to ensure that their learning is bespoke to their needs and aspirations. This will be used the basis for a re-introduced HMPPS-led allocations board, which will ensure that pathways are relevant to the needs and choices of the child.

High quality sentence management communicates the needs, risks and vulnerabilities of each child and sequences how they will be met. Starting with case formulation and using information available on systems such as Asset, System1 and NOMIS, one plan that identifies needs, risks, vulnerabilities and actions will be developed for each child. We have set a local target for the completion of full formulations of 21-days and these will begin on the induction unit and continue onto the residential communities.

A new role, that of Head of Integrated Care, has been created and the post-holder appointed; this person will bring together and coordinate all work, especially around those most complex children, through processes such as separation and the Enhanced Support Team process.

We will measure success by having an education offer which meets the needs of children in our care, which they are able to access according to need and future aspirations rather than based on location within the establishment. All children will have a full formulation completed, within a 21-day target timeframe, and these formulations will be communicated to and understood by staff. The most complex children will be supported and have their needs met so that they are able to access the same level of regime and opportunity as their peers.

4. Progress against KCRs

KCR 1	<p>S46 – Managers should ensure that conflict resolution work is prioritised to reduce levels of violence at Cookham Wood.</p> <p>The drivers and profile of violence, and group related issues, shifted considerably with the onset of the COVID pandemic and associated regime changes. Focus at the onset of this period centred heavily on provision of a basic regime for children, with all staff (Conflict Resolution practitioners included) facilitating that delivery. The need for Conflict Resolution was significantly reduced due to lower levels of conflict, and alternative management options were available to manage this while utilising Conflict Resolution staff to enable the regime. As we move through the recovery roadmap a need for effective Conflict Resolution has been identified and built into the Cookham Wood Business Plan. This is however part of a larger plan to change culture and delivery approach at Cookham Wood. Caution must be taken in relying on CR to reduce violence, as by its very nature it is designed to repair harm and is therefore reactive - CR alone will not address the root causes of violence.</p> <p>That said, resource has recently been deployed in the Conflict Resolution team with a practitioner uplift of 50%, enabling the team to engage in the community-based approach with consistent staffing. Lessons learned from the Restorative Play initiative are being taken to inform Community Play – currently in its infancy but with similar principles, aimed at providing a proactive incentive program to build relationships, rather than rely solely on the reactive nature of conflict resolution.</p> <p>The profile of Conflict Resolution has been raised as the demand within the establishment has demonstrated a need. Actions taken include;</p> <ul style="list-style-type: none"> • Uplift of Conflict Resolution practitioners using redeployed Band 4 Supervising Officers. • Band 5 Custodial Manager assigned to the Conflict Resolution team, reporting to the Head of Integrated Care. This will link in with new facilities in the refurbished Phoenix Unit, and will include elements of Restorative and Community Play.
KCR 2	<p>S47 – Oversight of use of force should ensure that staff using MMPR are trained to do so and all safeguarding concerns are identified.</p> <p>The MMPR staffing team has retained a full complement of co-ordinators, enabling oversight processes and training delivery to remain effective.</p> <p>Training delivery, put on hold due to the COVID pandemic, saw a dramatic drop in MMPR “in date” trained staff. This has been rectified when infection control measures allowed, with a training plan in place to track effective recovery. This has been delayed due to staffing pressures (due mainly to pandemic absences and the requirement to deliver a decent and purposeful regime). Currently, we have 79% of operational staff in date for MMPR. Band 4 and 5 staff have also been trained in incident management procedures during the past year. Revised working practices, and a consistent team within the MMPR department, has reduced outstanding paperwork for use of force incidents, inclusive of MMPR co-ordinators conducting QA reviews of incidents and debrief interviews with young people. Any safeguarding concerns noted during these processes are highlighted to the safeguarding department for review and referral by the child protection co-ordinator.</p> <p>We have added layers of review for our higher level incidents in addition to the regular Restraint Minimisation Forum. This includes a cold debrief process for all serious or significant incidents. The purpose of this is to look for learning points with a view to preventing similar incidents and reducing use of force as a response. Also, for those incidents where the highest level of force was used (a pain inducing technique) or a significant risk to safety was highlighted (serious injury or warning sign) an additional review process has been implemented. This is chaired by the Governor, and is again focussed on lessons learned to reduce high risk incidents.</p> <p>Our current drive is focussed on providing effective incident management, ensuring force is used only when all other options have been exhausted, with support from the national MMPR team guiding custodial managers.</p>

KCR 3	<p>S48 – Children separated on Rule 49 should have their needs identified and met.</p> <p>The process of identifying and supporting children in isolation or that choose to minimise their social contact is outlined in the Separation Policy. Those children that isolate or do not engage are subject to oversight and management of an equivalent level to those children who are subject to Rule 49 separation. A record of contact and review is retained, and subject to quality assurance overseen by the Deputy Governor.</p> <p>All children separated have a reintegration plan which is reviewed as part of the weekly separation meeting, chaired by the Deputy Governor. Those with identified complexities are escalated to other support services, including Enhanced Support, at this forum.</p> <p>The Head of Function carries out a QA on all closed Rule 49 documents before handing it to the Deputy Governor for final oversight.</p> <p>The weekly R49 management team meeting tracks progress of all young people subject to separation to encourage a whole prison approach to managing separation and ensuring oversight sits at the appropriate level (Deputy Governor).</p> <p>The uplift in staffing as part of workforce reform has not seen the desired actual staffing levels, with recruitment and retention being points of concern. This, alongside new ways of working due to the COVID pandemic, have had significant impact on the training and availability of CuSP officers.</p> <p>Oversight and management of separated YPs has improved, with The Head of Admissions and Care being the responsible owner of Rule 49 and separation, with support from a designated Custodial Manager, both of whom take the operational lead for delivery and YP engagement. Consistency of reviews and target setting are benefits of this approach. Time out of room for separated children is monitored daily.</p> <p>There is a weekly Separation Management Team meeting, chaired at Deputy Governor level, giving a high level of assurance of the separation process.</p>
KCR 4	<p>S50 - The establishment should be well maintained, clean and graffiti free.</p> <p>The Governor and Head of Business Assurance attend monthly tripartite meetings with the facilities management provider, GFSL, to discuss all aspects of maintenance and building project work within the establishment. All communal areas are cleaned by contracted cleaners provided by the FM provider GFSL. During the pandemic, additional cleaning sessions have been procured within the Education and Visits areas in an attempt to prevent the potential spread of the virus. Additional, "deep-cleans" are sourced, via request to GFSL, and provided as necessary such as following the identification of a positive COVID-19 case in a specific area. The contracted deep-clean provider has been procured to provide this service on the day the service has been requested.</p> <p>Room painting continues and any room which contains significant levels of graffiti are identified as unsuitable for use until such time that they are repainted. Rooms are checked on a weekly basis by Custodial Managers to ensure that children are held appropriately and staff are alert to any concerns. These checks are documented and the check sheets include a note to report any necessary remedial actions required to bring the room up to an acceptable standard. Serveries are checked on a daily basis, prior to the serving of each meal, by designated Cleaning Officers and any request for additional or "deep" cleaning or repairs is made via the Planet FM application on the HMPPS IT platform. The Induction programme and booklet detail items of property and clothing children can access and have in their rooms. Children are issued clean clothing and bedding on a weekly basis and are able to access toiletries as required in addition to purchasing these items from the canteen should they wish to. Cleaning equipment and materials are available on each landing allowing children to keep their rooms clean. A programme of graffiti removal has been funded in the shower areas as this remains a problem; this involves sealing shower areas within rooms with a specialist product which cures hard which cannot be scratched nor written on. We are in the process of working with the children to move them back in to these rooms that have had the refurbishment.</p>
KCR 5	<p>3.15 - Prison and education leaders should ensure that children's allocation to learning pathways is determined by what best matches their aspirations or previous experience.</p>

	<p>On the return to face to face learning there was a clear focus on Personal and Social Development learning to underpin the approach to values and behaviour for learning. In planning the Occupational Studies learning as part of build back better, children have had the opportunity to gain awards, certificates and diplomas in a range of subjects that interest them and can support further study in the community and lead onto specialist learning.</p> <p>The interview carried out by the Engagement and Resettlement Team on a child's induction will include the identification and explanation of the pathways that are available at Cookham Wood. This includes impartial advice and guidance around career routes and training. Once agreed, this bespoke learning pathway will form the basis of formulation and will be synchronised with the interventions and vocational needs of each child. Prior learning and achievement is discussed and baseline assessments are completed to inform the next steps for English and maths pathways, which may be skills development, preparation for functional skills exams or City & Guilds unit development. The APB process is back in place and all children are allocated to learning that fits their learning journey and aspirations.</p>
KCR 6	<p>1.55 – Separated children should receive a regime that is equivalent to their non-separated peers.</p> <p>Since the last Inspection the Phoenix Unit, which was at that time operating as a CSU, has been closed and has undergone significant refurbishment with plans to re-open it as a more therapeutic area which includes a number of intervention rooms and an outside horticulture and animal husbandry area. It is planned that when this area re-open children will remain living on the main residential unit and attend the unit to take part in therapeutic sessions. At the current time any child who is separated, or who chooses to self-separate, remains located on the main residential unit with access to the same facilities as his non-separated peers. Any decision to restrict any element of the regime is only taken where there is a clear and identifiable risk to others and in such a case all efforts are made to ensure that the separated child is offered access to the activity from which they have been removed.</p>

HMIP Monitoring

To support the delivery of the HMIP actions and wider expectations, four Healthy Test Leads have been established to lead small teams of specialist staff to drive these actions forward. The leads are as follows:

- Care - Paul Johnson
- Purposeful Activity - Rachael Lewis
- Safety - Simon Lee
- Resettlement - Michael Rowett

The Healthy Test teams convene frequently, which provides information to a monthly HMIP meeting with each of the Healthy Test Leads.

HMIP Key Concerns & Recommendations

The following is a list of repeated and new concerns and recommendations in this report.

Key concern (1.36): The number of violent incidents was high. The response to this was invariably to keep children apart from each other, which had a negative impact on their regime and reinforced the violent behaviour. Staffing unavailability, lack of engagement and redeployment of specialist conflict resolution staff to support the regime compounded the problem.

Key recommendation: An effective violence reduction strategy, with a robust action plan, should be implemented to reduce the incidence of violence. (To the governor)

Key concern (1.37): Too much poor behaviour went unchallenged by staff. This included banging of doors, the blocking of observation panels and shouting out of doors and windows. Expectations about behaviour were not enforced robustly and there was an inconsistent approach to ensuring that even the most basic of standards were met. There was a lack of short- and long-term incentives to make sure that children who engaged could consistently progress and attain long-term goals, such as peer support roles, release on temporary licence (ROTL) and education outcomes.

Key recommendation: Consistent expectations of behaviour should be set and communicated to children. There should be clear pathways for children that properly incentivise education, rehabilitation work and prosocial behaviour. (To the governor)

Key concern (1.38): The arrangements for separating children did not safeguard children's well-being. Local managers had failed to prevent children from being subject to potentially harmful regimes for extended periods. Oversight arrangements did not enable managers to be better informed of the interactions, education or health care input that these children were receiving. Safeguards for separated children involved a large number of cursory checks, rather than meaningful and dynamic engagement.

Key recommendation: Leaders and managers should make sure that children subject to separation can access a regime that is equivalent to that of their non-separated peers. (To the governor)

Key concern (1.39, repeated recommendation S50): Extensive and offensive graffiti in cells, communal areas and exercise yards remained a significant problem and was emblematic of generally poor standards across the prison. During the inspection, children told us that graffiti was a 'normal' feature of the prison. Poor standards of cleanliness in cells and communal areas were not challenged effectively by staff and managers.

Key recommendation: The establishment should be well maintained, clean and free of graffiti. (To the governor)

Key concern (1.40): The promotion of equality and diversity remained weak. Equality monitoring data did not lead to actions or thorough investigations into disproportionate outcomes for some children in protected groups. Investigations into discrimination following receipt of incident report forms were poor and some did not take place at all.

Key recommendation: Leaders should make sure that all incidences of discrimination are identified, investigated and addressed. (To the governor)

Key concern (1.41): The well-resourced mental health services continued to struggle with accessing the children in confidential and therapeutic rooms with allocated officer escorts, resulting in frequently aborted appointments.

Key recommendation: Children should be able to access planned mental health care appointments in clinically appropriate and therapeutic environments. (To the governor)

Key concern (1.42): Time out of cell was too limited, at a daily average of about four and half hours on weekdays and two hours at weekends. Regime restrictions and controlled movement were responsible for many delays affecting the time available to children for education classes, work or recreation.

Key recommendation: Opportunities for children to spend time out of their cell in education or other constructive activities, including social time together, should be increased, particularly at the weekend. (To the governor)

Key concern (1.43): Children were not able to access enough hours or a broad enough range of face-to-face education, and many were justifiably frustrated that they had too few in-cell learning tasks to complete.

Key recommendation: Leaders should make sure that they maximise opportunities for children to study, including in-cell study. (To the governor)

Key concern (1.44): Leaders were not able to offer the subjects that they had planned as part of the curriculum because of shortages of teachers and prison officers. Too often, classes that were offered were delivered intermittently. As a result, not enough children developed their vocational, mathematics, English, and information and communications technology (ICT) skills at satisfactory rates.

Key recommendation: Leaders should make sure that the curriculum includes sufficient opportunities for children to develop vocational, mathematics, English and ICT skills. (To the governor)

Key concern (1.45): Too many children did not attend their allocated classes, or arrived late to lessons.

Key recommendation: Leaders across the prison should make sure that they work collaboratively to prioritise education and increase children’s attendance at classes. (To the governor)

Key concern (1.46): Children’s written work was, in many cases, of low quality. They wrote answers to theory-based questions that were partially incorrect. In a few cases, children did not take tasks seriously, and their answers to questions were of an inappropriate tone. Teachers usually marked this work as correct, without challenging the children to produce more detailed or accurate answers.

Key recommendation: Leaders should make sure that teachers provide children with constructive feedback that helps them to improve their work. (To the governor)

Key concern (1.47): Despite good in-person and remote visits provision, take-up was low. In addition, children faced long delays in getting telephone numbers approved and receiving letters from their family and friends.

Key recommendation: Children should receive support to enable them to maintain contact with their family and friends in the community. (To the governor)

Key concern (1.48): We found several areas where there was an absence of adequate risk management. ROTL risk assessments were not sufficiently robust; they failed to acknowledge any potential risk of harm posed by the child. MAPPA management levels were not routinely confirmed before release, and contributions to MAPPA meetings were variable. Case workers had no formal training in risk management.

Key recommendation: Risk management processes, including ROTL and public protection, should identify and action risks adequately. (To the governor)

Recommendation (4.52): A memorandum of understanding should be developed with the local authority and social care provider, to make sure that arrangements are in place if a child needs social care. (To the governor)

Recommendation (4.72): Medicines should be administered in line with national standards and at times which facilitate optimum therapeutic effect.

Agreed Actions

Below is a list of the agreed actions in response to the KCR's, and an update on each.

Key recommendation: An effective violence reduction strategy, with a robust action plan, should be implemented to reduce the incidence of violence.

Action	Update
The Head of Safety along with key stakeholders and children will devise a safer community strategy that will have a clear emphasis on violence reduction, separation, anti-bullying and victim support. The strategy will be supported by an action plan that will include time bounded actions and named responsible owners. The action plan will be reviewed and updated at the monthly safety strategy meeting, utilising current data from the I2 database management information tool, and weekly safety meetings.	A 5P's strategy is now in place, and is discussed at the revised monthly strategic meeting. This is supported by an action plan to track progress against agreed actions. The i2 system is now installed at Cookham Wood, and training has been provided to the Safety and Security teams.
HMYOI Cookham Wood will increase staff levels in the safety department, to include a full-time head of function, custodial manager, four prison officers and two analysts. The team will analyse the drivers of violence and self-harm, support staff in reducing such incidents and help to improve the recording mechanisms. They will develop Core support teams for each community who will receive input from specialist staff.	There is now a full time Head of Safety, a CM, 4 Officers and two analysts.
Safer community peer representatives will be identified, trained and supported by the safety team to help with delivering the Safer Community Strategy.	There has been not yet been progress in identifying Peer Representatives to support the delivery of the Safer Community Strategy.
The introduction of a new community play model in line with the previous initiative of restorative play will aim to support our communities in reducing the number of violent incidents.	The preferred provider for this initiative is unable to provide this service, this specific avenue of violence reduction is not being pursued at this time. Alternatives (such as the previously used Restorative Play model) are still being progressed within the framework of COVID recovery.

Key Recommendation (i): Consistent expectations of behaviour should be set and communicated to children

Action	Update
A new Rewarding Positive Behaviour (RPB) policy will be implemented by the Head of Residence with a clear focus on promoting positive behaviour. The RPB policy will empower staff to give instant rewards for good behaviour and the ability to challenge low level poor behaviour, through an instant sanction process. Standards of behaviour	A new RPB was published in August 2022, and is under review of its impact and efficacy. Whilst CuSP is not yet delivered to all children, Community Meetings are being held on a weekly basis, and a forthcoming change to the weekly planned regime will

will be clearly set out in the Behaviour Management Strategy (BMS), and communicated to Children through the Induction process, regular one to one meetings with a designated officer or Custody Support Plan (CuSP) officer, and through regular community meetings.	protect time for these to take place every week.
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Key Recommendation (ii): There should be clear pathways for children that properly incentivise education, rehabilitation work and prosocial behaviour.

Action	Update
The Safer Community Strategy will encourage participation in community living and full engagement with education and sentence planning, through clear pathways that incentivise Children to engage in these areas as they progress through their time in custody.	

Key recommendation: Leaders and managers should make sure that children subject to separation can access a regime that is equivalent to that of their non-separated peers.

Action	Update
The Head of Safety will implement new separation paperwork in line with national guidance, that will include assurance checks on the regime offered and delivered to Children who are separated. Assurance checks will be completed daily by the Safeguarding Team, weekly by the Governor and Deputy Governor and on a bi-monthly basis by the Central Team.	The new separation management tool and log has been implemented across all YCS sites. Assurance checks of the separation documents are completed by the safety team 24 hours after opening and then every 7 days thereafter. These checks are meaningful, and are fed back to Head of Safety and any issues are challenged at the appropriate level.
A re-integration plan and support mechanisms will be formulated at the outset of each Child being separated, that will be shared with them. These plans include education provision and access to interventions. Children who elect to self-isolate will be offered a regime that reflects their need for self-isolation, that will support them to reintegrate within their peer group.	A care plan is opened as part of the separation process. This now includes a more specific re-integration plan that can be shared with the child. Actions are shared verbally during the review. Self-separation documents have been reviewed to encourage planning and support, and standardisation of these has been agreed through the duty Governor group. All cases are now discussed at the ESS delivery meeting on a Monday morning to be considered for support and EST. Work is underway to enrich the regime of those boys who are separated.
Weekly meetings will be held to discuss all Children who are separated or self-isolating, that has an agenda item to discuss the level of regime each Child has received.	Each child separating is discussed at the ESS meeting with those under the phoenix unit being considered specifically for their regime needs.
Reviews of separated Children will take place based on their needs and risks that will	Reviews are done around the individual and not a generalised process. Needs and risks

aim to move the Child back to a community-based regime as soon as safely possible.	are considered as part of the review and in most cases EST. Moving back to mixing safely is a priority and is demonstrated in recent cases
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Key recommendation: The establishment should be well maintained, clean and free of graffiti.

Action	Update
HMYOI Cookham Wood has begun a local refurbishment of all living accommodation, one landing at a time, which will continue throughout the financial year.	A2 landing has been refurbished, and work on B1 is nearing completion. It is anticipated that A3 will begin renovation in November 2022.
The Heads of Residence undertakes a weekly inspection of the site with our Government Facility Services Limited (GFSL) partners that identifies any issues that need attention, these findings then form part of the works action plan.	A weekly walk about inspection now takes place each week and is complemented by a weekly meeting with the Regional Estates Manager. The Tripartite meeting has now resumed and is being used to establish and track progress against key repairs and projects.
A system will be implemented which will improve access to cleaning materials for children in their communities. Consideration will also be given for a domestic period to be time tabled into the Children's regime.	Young people have access to cleaning equipment on an adhoc basis on request. Friday afternoon periods have been identified as Community Time and include community meetings and domestic period.
Monthly assurance checks will be completed by Senior Managers on the condition of Children's rooms and communal areas to ensure they are well maintained, clean and free of graffiti, with findings reported back to the Heads of Residence and added to the works action plan. Daily Accommodation Fabric Checks and room condition checks are conducted by community staff, which will address low standards of cleanliness with appropriate supportive action, and also reward Children for maintaining a clean and healthy environment. These standards are underpinned within the BMS.	Monthly assurance checks have now been implemented and completed by senior leaders. Any issues or concerns highlighted from these checks are shared with heads of residence. Ongoing work continues with the refurbishment of landings. The Alpha 2 landing is now complete with Bravo 1 landing underway. The RPB policy was first implemented in Dec 2021, with a reviewed policy relaunched in August 2022, following consultation with staff, partners and young people.

Key recommendation: Leaders should make sure that all incidences of discrimination are identified, investigated and addressed.

Action	Update
All Discrimination Incident Report Forms (DIRF's) will be quality assured by the Deputy Governor to ensure that all incidents of discrimination are thoroughly investigated, within prescribed timescales, and that the person submitting the DIRF is spoken to and receives a response. HMYOI Cookham Wood will seek external Quality Assurance of the process from the local community.	The Head of Diversity completes an assurance check of all DIRFs, and a new partnership with the Zahid Mubarek Trust will deliver independent analysis of responses.

<p>HMYOI Cookham Wood will employ a new band six Diversity and Inclusion (D&I) Lead, who will be supported by two full time D&I officers. A review of the Regime Management Plan (RMP) will ensure that D&I officers are redeployed less frequently, and only as a last resort. The D&I team will analyse local data and identify any disproportionate treatment that will be shared with the relevant functional head to address, who will report their findings or concerns back to the D&I Team. The D&I lead will implement a live action plan from these findings which will be monitored at the D&I meeting.</p>	<p>Band 6 now in post and is working to address all the actions within Lammy, OSAG and HMIP action plans.</p> <p>The Equality Action Team meetings are now taking place and will establish and investigate incidents of disproportionality. These are then discussed at the monthly strategic meeting, along with progress against actions.</p>
<p>HMYOI Cookham Woods Equality Strategy will be reviewed to ensure that it identifies and analyses a wide range of data, and that time bound action points are identified and allocated from this data. The strategy will outline how the needs of all groups are identified, addressed and Protected Characteristics (PC) are promoted through educational and celebratory events.</p>	<p>The Equality Policy has been drafted and supported by the national D&I team. This will be published in October.</p>
<p>The D&I meeting will meet monthly with reviewed Terms of Reference, supported by a new agenda and will be chaired by the Deputy Governor. Children will be identified as D&I peer representatives who will actively contribute findings and trends to the meeting.</p>	<p>The monthly strategic meeting is now taking place, with full attendance by the SLT, and chaired by the Governor. This meeting is supported by a monthly Equality Action Team meeting, which more deeply examines disproportionality.</p> <p>Work is underway to identify D&I representatives amongst the young people.</p>
<p>PC leads will hold forums with Children from each PC on a needs-led basis, but at least quarterly. The meetings will have a standard agenda with a supporting action plan with each PC lead evidencing how they are promoting D&I throughout the prison. Photographic notices identifying PC Leads will be published to staff and Children.</p>	<p>There are identified PC leads in place, who are displayed on photographic notices around the establishment. A re-launch meeting, including awareness training, for PC leads was held in October 2022, and will be ratified at November's strategic meeting. It is anticipated that pro-active work by PC leads will begin in November 2022.</p>
<p>A quarterly survey for Children and Staff will be completed with a resulting action plan with time bound actions.</p>	<p>The first of a series of D&I questionnaires was published to the young people in Q1 2022, however received limited response. The new D&I Advisor is working with the young people to create a more effective survey, which can lead to actions that will improve outcomes.</p>

Key recommendation: Children should be able to access planned mental health care appointments in clinically appropriate and therapeutic environments.

Action	Update
<p>A newly refurbished outreach centre will provide physical spaces and bespoke staffing to improve mental health intervention</p>	<p>The repurposed phoenix unit operational, delivering a limited service to a small number of young people. Staffing group is</p>

<p>access, for those Children assessed to have the greatest need. This will be managed within the function of Enhanced Support Services.</p>	<p>in place, providing a bespoke care service to children identified with the highest level of complex care requirements.</p> <p>The phoenix unit provides;</p> <ul style="list-style-type: none"> • 2 1 to 1 meeting rooms • 1 exercise room • 1 sensory room • 1 small group room • 1 large group room • 1 assisted daily living suite • 1 gardens area (under construction) <p>Additionally, 2 rooms in the education building have been allocated for use by the complex care group, which will include mental health appointments</p>
<p>The ongoing refurbishment of the living accommodation will include the conversion of two living accommodation rooms on each landing into interview room. These rooms will allow core support teams to facilitate meetings, inclusive of mental health appointments, within their own communities.</p>	<p>Work has completed on A2 landing and work nearing completion on B1. Work has well underway converting on all residential landings to convert two accommodation rooms into meeting rooms, enabling access to children within their own communities, negating the need for movement and delay in reaching appointments.</p>
<p>An increase in staffing numbers will reduce the need for redeployment and the impact on appropriately staffed spaces to facilitate mental health appointments. Additionally, the Regime Management Plan will be reviewed and will take into account the need to appropriately staff areas of the prison that accommodate designated intervention and health appointment rooms.</p>	<p>The Regime Management Plan has now been published and is in use and is structured to deliver the maximum opportunity for young people to maximise their engagement with the regime.</p>

Key recommendation: Opportunities for children to spend time out of their cell in education or other constructive activities, including social time together, should be increased, particularly at the weekend.

Action	Update
<p>HMYOI Cookham Wood will review their staffing profile, Regime Management Plan, Behaviour Management Strategies and education timetables to increase the amount of time Children can spend out of their rooms engaged in education, constructive activities, physical recreation and social time, including at the weekend. As Covid-19 restrictions ease all Children will be offered 15 hours in education, 3 hours face to face community learning and 3 hours of physical activity per week. Increasing time out of room is a key priority for the Senior Management Team, however, this is subject to available staff resources, continued behaviour management risk factors and any future National/Local Covid-19 Restrictions.</p>	<p>The RMP is now complete and has been published. The new education timetable has launched, with an offer of 24+3 hours per child, per week.</p> <p>A local Terms of Reference was undertaken to identify barriers to delivering time out of room at weekends was undertaken (See ToR document). Recommendations were;</p> <ol style="list-style-type: none"> 1. Canteen delivery should be scheduled for a different day to enable it to be distributed on a weekday. This has been actioned and now delivery occurs on Friday. 2. Kit change should be scheduled for a period when community staff can better control and monitor the exchange. There is no necessity for young people to be

	<p>secured while kit change is being carried out, so it could be done within association period or community time.</p> <p>3. Staff should be profiled to their community and the regime on that landing should be managed locally, with limited cross deployment. Staffing levels and profile make this operationally difficult at present. An adjustment of the weekend profiles will lessen the morning / afternoon disparity to deliver more consistent staffing.</p> <p>4. A team of staff distinct from community staff should be profiled and tasked to provide a regime for separated young people. Consideration will need to be given to the spaces they use to achieve this. This is being actioned at the next staff review, with phoenix group expanding to deliver the regime for complex young people. Links to 7.6 action 1.</p> <p>5. The RMP should be reviewed to ensure all activities are accounted for. This has been actioned.</p> <p>6. Staff punctuality should be addressed. This has been actioned and is ongoing.</p> <p>7. Operational briefing to be standardised to minimise impact on available time. This is being actioned via a Human Factors initiative.</p>
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Key recommendation: Leaders should make sure that they maximise opportunities for children to study, including in-cell study.

Action	Update
<p>All Children will be offered 15 hours classroom-based education and 3 hours face to face community learning every week. In addition to this each Child will have weekly homework set in line with their allocated subjects. This will be time bound, marked and include feedback, that is tracked and reported on at the Quality Improvement Group (QIG) and Performance Review Meetings (PRM).</p>	<p>The education offer is now 24hours plus 3 hours PE. This provides greater structure to the core day and have more children accessing more education throughout the day, this will remove community learning but will provide greater access to pathways and a more structured education timetable.</p> <p>In addition each landing has an allocation of 3 hours of Community Learning. Groups are also allocated to a Relationship and Sexual Health Programme in rotation across the year.</p> <p>The homework strategy has improved the consistency of the offer of in room learning. This is recorded on a homework tracker.</p> <p>Through individual support meetings, the Engagement & Resettlement team and identify areas of interest and provide employability support, such as, setting in room learning for the Construction Skills</p>

	<p>Certification Scheme to help prepare children for their test.</p> <p>Targets relating to the homework are set by the teachers and the work is returned to class for marking and feedback. This is audited by the Novus management team, through deep dives and through YCS scrutiny.</p> <p>Through targeted recruitment, teacher and trainer vacancies have reduced. This has led to the Barista pathway reopening and a new Animal Care pathway is in place as a result of Learner Voice and a successful pilot.</p> <p>In room learning (Homework) is set after every session and boys are required to return the work the next session with feedback. Early feedback from boys suggests they aren't receiving in room work or they don't engage with it. A newly implemented education rewards programme is now live (from 07/03) celebrating student of the week, most improved and group of the week this is in its early stages but will take into consideration both learning in class and also in room.</p> <p>Meeting held with Library Manager and Education and will continue monthly to ensure a collaborative working relationship. SC has been tasked with running a survey to gain YP voice on what they would like to be able to access through the along with an events programme outlining events, guest speakers etc. From the survey the library provider will be required to update the current provision available, it's been highlighted to SC that a number of books are very outdated and not relevant to the current pathways and interests of boys. Education provider tasked with providing resource requests to the library to furnish boys with appropriate learning materials which will be available both in the library to support homework but also in the class</p>
<p>Learning resources will made be available on the In-Room laptops. The content will be diverse and not limited to the subjects delivered in education. The focus will be on learning, although educational games and other resources will also be a feature.</p>	<p>All children have access to an in-room device where a range of learning resources and information relating to current learning and career options is available. All children have access to an in-room device where a range of learning resources and information</p>

	<p>relating to current learning and career options is available.</p> <p>Education provider has been tasked with providing online learning resource through in room tech, this has been previously provided but later removed through Novus request due to branding issues.</p>
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Key recommendation: Leaders should make sure that the curriculum includes sufficient opportunities for children to develop vocational, mathematics, English and ICT skills.

Action	Update
<p>A needs analysis will be completed in December 2021 to determine if the provision currently on offer meets the need of the Children at HMYOI Cookham Wood. The needs analysis will be an ongoing process/live document so need can be assessed in real time as required. The curriculum be updated on completion of the needs analysis and delivered through the existing provision, where this is not possible, HMYOI Cookham Wood will explore the possibilities of outsourcing the requirement.</p>	<p>The Needs analysis is an ongoing piece of work. As a result of establishment led focus group, children consistently ask for increased access to sport and music. Novus are working with both Sports Connect and external music partners to increase access to unaccredited learning.</p>
<p>HMYOI Cookham Wood will ensure that the education provider achieves and maintains sufficient staffing to run all 21 education pathways including Maths, English, IT and all vocational pathways. Scrutiny of this will be delivered at the Performance Review Meeting (PRM) where HMYOI Cookham Wood will continue to monitor shortfalls and escalate any identified issues to the contract manager.</p>	<p>Through targeted recruitment, teacher and trainer vacancies have reduced to 9%. This has led to the Barista pathway reopening and a new Animal Care pathway is in place as a result of Learner Voice and a successful pilot.</p> <p>Through planned CPD, the Novus management team have worked with the English, maths and IT specialist teachers to plan projects with pathway teachers that meet the success criteria for each level of functional skill.</p>
<p>HMYOI Cookham Wood will review the Regime Management Plan to ensure there are sufficient staff available, so all Children will be offered 15 hours classroom-based education and 3 hours face to face community learning every week.</p>	<p>The RMP is now complete and has been published. The new education timetable has been launched, with delivery of 24+3 hours per child, per week.</p>

Key recommendation: Leaders across the prison should make sure that they work collaboratively to prioritise education and increase children's attendance at classes.

Action	Update
<p>Residential managers will drive adherence to the regime start and finish times. This will be assured by the assurance team and reported monthly to the Senior Leadership Team (SLT) for action where required. Managers responsible for Custody Support Plans (CuSP) and Behaviour Management</p>	<p>A greater level of recording is monitored now through daily figures reported to morning meetings covering Capacity and additional capacity Attendance Non-Attendance including individuals names</p>

<p>Strategies (BMS) attend the Activities Planning Board where issues with scheduling appointments, identified needs from CuSP, Interventions and Health and Wellbeing are discussed.</p>	<p>Community Learning attendance overview</p> <p>Movement times are monitored through daily briefing reporting, but work continues to be on going to ensure greater level of supervision from CM's both in education and on their community. The 24hr +3 hr timetable is live for the mainstream boys, the complex and transition boys will have appointments and interventions scheduled into a bespoke plan to enable mainstream to access a greater level of education</p>
<p>When a Child refuses to attend education, they will have a face to face visit with either an Education Engagement and Resettlement worker or personal tutor on the same day as the refusal, to explore the reasons why they did not attend and look for solutions to resolve their issue. A record of this conversation will be recorded on the National Offender Management Information System (NOMIS). Prison Officer landing staff will encourage all Children to attend education prior to any refusal being logged, to try and resolve any issues they may have preventing them from doing so. Where this is not possible the escalation process above will apply with a copy of the NOMIS entry sent to the designated CuSP Officer.</p>	<p>Engagement & Resettlement (E&R), the Novus Duty Manager & a representative of Res visit each child that refuses to attend their planned learning session. Wherever possible children are encouraged to attend. If the child continues to refuse, the team put a support plan in place to encourage attendance. The result of discussions are recorded on an E&R contact log and on Nomis.</p>
<p>When a Child refuses to attend education a support plan will be put in place, with an entry added to NOMIS detailing the plan. Persistent non attendees and Children not engaging with their support plans may need to be managed through the BMS.</p>	<p>E&R take responsibility for Nomis entries and implementing a support plan. The team will communicate with CUSP officers and persistent refusals will be escalated through the Integrated Care meeting or Rule 49 meeting as appropriate.</p>
<p>Attendance will be collaboratively driven through joined up working by all staff, and attendance at Education will be Incentivised through the Rewarding Positive Behaviour (RPB) strategy.</p>	<p>The Novus incentives and rewards have been reviewed to align with the RPB. The regular rewards are given for student of the week, group of the week and most improved learner. Joint working to plan landing of the wee is to be agreed. Children have been consulted about the education rewards. Evidence: Learner Voice on rewards, rewards criteria</p> <p>The rewards programme is now in place and in its early stages – achievements celebrated are student of the week / most improved / group of the week all winners are rewarded with a choice of 3 things.</p>
<p>Children will be presented with certificates for educational accreditations by a minimum of a Governor grade. This will be at</p>	<p>Certificates are awarded by the Head of Education or by Governors. Where children have achieved group learning, awards events are planned where</p>

<p>designated events, where possible, families will be invited to join in the celebration.</p>	<p>children receive certificates, prizes and photos are taken.</p> <p>Attendance by SLT members to presentations has been facilitated however at short notice, education provider asked to provide a timetable of events to ensure better attendance not only from SLT members. Family members have not yet been invited into celebrations through education, but education have supported with recent family days.</p>
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Key recommendation: Leaders should make sure that teachers provide children with constructive feedback that helps them to improve their work.

Action	Update
<p>The Head of Education will implement an improvement plan which consists of training, Quality Assurance (QA), learning walks and a weekly progress/data meeting to allow progress to be reviewed at management level.</p>	<p>All teachers have completed a training programme of 6 elements of developmental feedback and effective marking and scaffolding learning. This has been followed with a face to face session with the YCS HOLS. The marking policy has been reviewed and rolled out with teachers and Learning Support. Structured feedback has been implemented through the use of a formatted feedback stamp which encourages teachers to address the key elements of effective feedback. Exercise books have been implemented for English and maths courses. Regular audits of marked work from each teacher is audited by managers. Observation though learning walks is completed by managers and YCS colleagues.</p> <p>CPD for target setting has helped to improve progress from starting points. Regular weekly and 6 weekly cycles of audits are in place and show an improvement of target setting.</p> <p>Daily QA being facilitated by LSM and weekly QA walks are scheduled with deputy education manager with reports fed back.</p>
<p>Assurance of all educational standards will be undertaken by the Learning and Skills Manager (LSM), assurance team, Youth Custody Service (YCS) LSM and the Head of Reducing Reoffending. An additional QA process will be introduced to ensure that all teachers track every Child's progress consistently and thoroughly. Any identified issues will be presented in writing to the education manager, that will be discussed at the Performance Review Meeting (PRM) and</p>	<p>Regular targeted assurance activity is completed by the LSM and YCS HOLS. Feedback of the audit is provided to the Governor and reviewed as part of the PRM process. Ongoing issues are escalated to the CRM.</p> <p>Daily QA being facilitated by LSM and weekly QA walks are scheduled with deputy education manager with reports fed back.</p>

escalated to contracts managers where necessary.	
The YCS Head of Learning and Skills will supply a QA training package to the establishment LSM and Activities Manager to help them quality assure education delivery, so outcomes can be fed back and scrutinised through the PRM and Quality Improvement Group meetings. This will be followed up and under pinned with face to face meetings between YCS Head of Learning and Skills, the education provider Local LSM and the Activities manager.	The YCS HOLS is providing regular QA feedback to both NOVUS and the Head of Reducing Reoffending. These findings are available for the PRM and QIG meetings.

Key recommendation: Children should receive support to enable them to maintain contact with their family and friends in the community.

Action	Update
The Personal Identification Number (PIN) policy will be reviewed to ensure that any contacts which aren't approved by Youth Offending Teams (YOT's) will be followed up by the Resettlement team, to ensure that applications are processed contemporaneously. A clear escalation process will be included, to create rigor in the system.	The Pin Phone policy has been completed and circulated to YOTs. There is a clear escalation process in place.
HMYOI Cookham Wood will introduce a pin number log to ensure the submission of pin requests by Children are being monitored by the Resettlement team, so requests to YOT's can be tracked and they can be held to account where necessary.	The log is in place and an escalation process developed and introduced. Should a child's telephone numbers not be cleared by the relevant YOT when submitted this will be challenged by the child's Caseworker at the 7-day point. This will be escalated to the Casework Custodial Manager at 14 days and the Head of Function at the 21 day point. Should telephone numbers remain uncleared after 30-days, this will be brought to the attention of the Deputy Governor to raise as a concern with the relevant YOT.
HMYOI Cookham Wood will review the correspondence processes for Children, ensuring there are adequate numbers of suitably trained staff allocated the task of processing the mail each day, so it is received promptly. Resourcing of this task will be appropriately prioritised to ensure that wherever possible, mail is delivered on the day it is received.	Recruitment of OSGs continues, and vacancies are being filled with agency staff to provide adequate support for trained staff to routinely facilitate mail services.
To help improve the provision and maintain contact with families HMYOI Cookham Wood will: <ul style="list-style-type: none"> • Carry out a review of visits, including a Secure Video Calls/Social Visits survey that will be sent to Children and families to establish how the service can best support the needs of children and their families. 	Review completed December 2021; this included surveying children and families/visitors. The play area has been opened and used during family day visits and will continue to be available as suggested. Alternative accommodation will be available for the use of Purple Visits, upon the completion of the two extra

<ul style="list-style-type: none"> • Relocate the Secure Video Calls provision to provide a more confidential space away from busier areas of the establishment. • Introduce the use of the outside play area for social visits, family days and family therapy sessions. 	interview rooms on each landing.
Review the local Release on Temporary Licence (ROTL) policy to enhance community visits and family ties ROTL.	The use of ROTL has been overhauled, with boys now gaining access to meaningful ROTL opportunities in the community. These include a 16 week placement at Sports Connect, where two boys attend 3 days per week, and a family day hosted by the same partner, where patriarchal figures in the boys' lives were celebrated.

Key recommendation: Risk management processes, including ROTL and public protection, should identify and action risks adequately.

Action	Update
The ROTL risk assessment and local policy will be reviewed and adapted to identify risks both in the community and in custody. Quality Assurance checks for ROTL risk assessments will be completed by the Deputy Governor to ensure they are adequate, and of a good standard	The ROTL risk assessments have been amended to take into account the risks. All risk assessments are countersigned by the Deputy Governor. The ROTL policy has been re-drafted and includes the process of QA completed by the Deputy
Public Protection Team meetings will convene weekly with the introduction of a new local log to identify any escalation issues and ensure that 6- and 2-month checks are completed for all Multi-Agency Public Protection Arrangements (MAPPAs) Children prior to being released. These checks will be tracked and monitored through the monthly Public Protection Strategic meeting. Caseworkers will receive training with support from the YCS central Public Protection Lead, in the absence of formal training.	Public Protection Team meetings take place weekly, and a log has been introduced to track the completion of 6- and 2-month checks on all children identified as being eligible for MAPPAs arrangements. Completion of these checks is monitored through the monthly Public Protection Strategic meeting. The weekly PPT meeting has evolved into a weekly "health check" of PP cases by the HoF and PP co-ordinator; actions are followed up upon at the following week's meeting. The HoF has secured MAPPAs-training, to be delivered to establishment staff by Kent MAPP staff, in the absence of HMPPS training.
The Public Protection Meeting Terms of Reference and agenda will be reviewed, and a quorum established to improve attendance and impact, which will be driven by the meeting Chair, with any issues reported through the Monthly Performance & Assurance Report.	The Terms of Reference and agenda of the Public Protection Meeting have been reviewed and introduced. These identify a quorum required to attend the Public Protection Meeting. The Head of Function is able to report any concerns regarding attendance, or any other aspect of the meeting, using the MAPPAs.

Recommendation (4.52): A memorandum of understanding should be developed with the local authority and social care provider, to make sure that arrangements are in place if a child needs social care.

Action	Update
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A new Memorandum of Understanding (MoU) will be written and implemented in conjunction with Oxleas NHS Foundation Trust and the Local Authority Social Care provider to meet the needs of the Children within our care.	Peter Gates has approached Medway Council and is progressing agreement on the MOU for Cookham Wood.
A Local Authority Designated Social Worker will be redeployed within the establishment to ensure that the social care needs of the Children are met from the outset and throughout their stay in conjunction with the MoU.	A DSW has been allocated to the Resettlement Function, working to the Head of Function, as part of the SLA.

Recommendation (4.72): Medicines should be administered in line with national standards and at times which facilitate optimum therapeutic effect.

Action	Update
A working group has been assembled to review the Regime Management Plan (RMP). They will review resources required to administer medication at times conducive to provide optimum therapeutic effect, which will be built into the revised RMP.	RMP review completed, with medication distribution placed within the highest priority staffing section across all areas of the day, enabling medication to be distributed according to optimum therapeutic effect.
The Pharmacy lead will devise and implement a local Management of Medicine policy with a supporting assurance framework which ensures that Children's medication is administered accordingly and at the correct times.	Primary care contracts changed on 1/4/22 from Oxleas to CNWL, however the control of pharmacies remains with Oxleas. Evidence of the Managing Meds policy will be supplied by the Head of Healthcare

Annexes to the Report:

- Annexe a – Terms of reference**
- Annexe b - Purposeful Activity**
- Annexe 3 - June Assurance Report**
- Annexe 4 – Complaints Analysis**