

Aycliffe Secure Services

Durham County Council

Aycliffe Secure Centre, Copelaw, Aycliffe, Newton Aycliffe, County Durham DL5 6JB

Full inspection

Inspected under the social care common inspection framework

Information about this secure children's home

This secure children's home is operated by a local authority and is approved by the Department for Education to restrict children's liberty. The home cares for up to 34 children aged between 10 and 17 years across five houses. There were 23 children living in the home at the time of this inspection.

The home provides care for up to eight children placed by the Youth Custody Service and up to 26 children under section 25 of the Children Act 1989 who are placed by local authorities.

The admission of any child under section 25 of the Children Act 1989 who is under 13 years of age requires the approval of the Secretary of State.

The commissioning of health services in this home is the statutory responsibility of NHS England under the Health and Social Care Act 2012. Education is provided on site in dedicated facilities.

The manager of the home registered with Ofsted in January 2022.

Inspection dates: 28 to 30 January 2025

Overall experiences and progress of children and young people, taking into account	good
Children's education and learning	outstanding
Children's health	outstanding
How well children and young people are helped and protected	good
The effectiveness of leaders and managers	requires improvement to be good

The secure children's home provides effective services that meet the requirements for good.

Date of last inspection: 11 July 2023

Overall judgement at last inspection: good

Enforcement action since last inspection: none

Recent inspection history

Inspection date	Inspection type	Inspection judgement
11/07/2023	Full	Good
21/09/2022	Full	Good
03/11/2021	Interim	Sustained effectiveness
13/04/2021	Full	Outstanding

Inspection judgements

Overall experiences and progress of children and young people: good

Children said that they like living at the home and most have exceptionally good relationships with staff. They said that they enjoy spending time with staff and see the care and support that they receive to be positive. One child said, 'My key-working team have been my family for the last two years.'

Children take part in key-work and intervention sessions with staff that focus on offence-related work when appropriate, and adverse childhood experiences. These tailored sessions help children to understand their behaviours and the consequences of their actions, and this in turn supports their progress.

Children benefit from working with an effective multi-disciplinary team that meets fortnightly to discuss the children, their ongoing needs and vulnerabilities and how to respond to these continually and consistently. Feedback from other professionals, specifically about care planning, is extremely positive. Communication between staff across the home and children's social workers is regular and a two-way process. This helps to inform placement planning and next steps for the children.

Managers and staff ensure that children's complaints are taken seriously. There is a clear process for reviewing and investigating these and then feeding back to children. Concerns are escalated in accordance with policy processes, and external scrutiny is evident and clearly recorded.

Children are supported to have time with the people who are important to them. This helps children to maintain and repair family relationships.

The home is welcoming, clean and well presented. Children contribute to the decor with their artwork, and items they have made are on display. Staff encourage them to personalise their bedrooms. While some children choose not to, others have colourful wallpaper and memorabilia. This helps children to have a sense of pride in their personal space.

Children enjoy a range of activities that complement their formal education. These include the garden to table club, cookery sessions, zorbing, going to the gym and go-karting. These events and activities allow children to learn new hobbies and skills, which helps them to grow in confidence.

Admissions and discharges are exceptionally well planned and take account of children's individual circumstances and needs. For example, when children are about to move to the adult secure estate, consideration is given to identifying the appropriate prison environment for them. Children get to meet with officers from these establishments to help form initial relationships, which helps to reduce their anxieties.

Children's education and learning: outstanding

Children make very good progress from their starting points and are exceptionally proud of the progress they have made in education. They can confidently talk about what they have learned and how they learned it. Children take pride in their work and recognise the value of their education, often describing it as a positive distraction from all the other things they have to think about. Staff conduct a range of initial assessments for children within a few days of admission. The outcome of these assessments helps staff to identify children's educational starting points and gaps in knowledge. This information is used well. When children refuse to engage with these assessments, staff use their own in-class assessments and use this information to plan learning.

Education staff provide an exceptional education offer to the children and are very committed to improving and developing the education provision. They have continued to focus on improving the teaching of English and reading. They now have a whole-school approach, and the teaching strategies are clear in each session. For example, in physical education, children are encouraged to spell out tricky words and to decode them as part of the activities they are doing. All children are encouraged to read; they are taught how to read and decode information. Books and periodicals are readily available, and children are encouraged to take books back to their residential units to develop their reading for pleasure.

Teachers and instructors are highly qualified. They create a very calm and caring learning environment where children are welcomed into their lessons and understand the high expectations staff have of them. Teachers know the children very well and set work that is appropriate. Children feel respected and listened to and will often praise the staff for re-engaging them in learning. When the headteacher and visitors visit children in their lessons, the children remain focused and calm and are very respectful.

The headteacher provides education staff with clear leadership and support, which staff value highly. The education staff offer a high level of support to each other; they meet at the end of each day and ask to share information about their day and children as well as celebrating successes. The information about children is passed to the residential staff, and any staff concerns are followed up by managers to ensure that any staff welfare issues are addressed rapidly. In addition to these meetings, staff have subject development meetings, and curriculum leaders meet with the headteacher. This allows them the opportunity to strengthen the knowledge-based curriculum. All education staff are committed and work in the best interest of the children.

Leaders have created a very positive learning environment where children have access to bright, engaging and well-resourced classrooms and workshops. The curriculum model is based on research that allows children to develop their knowledge at a granular level. The curriculum allows children to develop positive attitudes to learning.

Most children's attendance in education is very good and is often significantly more positive than their previous education setting. They benefit from individual support as

well as learning in small groups. Children demonstrate improved behaviours over time and become more resilient and all enjoy their lessons. Staff manage children's behaviour well. If children choose not to attend education, staff will visit them in their residential units and encourage them to attend learning. For example, in art, the teacher encouraged a child to attend by telling them that they would like to enter them for GCSE art. This resulted in the child positively engaging.

Children's health: outstanding

Children benefit from quick and easy access to a skilled and experienced healthcare team. The healthcare staff work creatively to quickly build positive relationships with children. They know the children well and focus their practice on listening to children to improve their health and well-being outcomes. This approach helps children to feel comfortable when discussing their health needs.

Children's health improves significantly following their admission to the home and taking account of their starting points. For example, one child was diagnosed with a medical condition soon after they arrived at the home and were able to quickly receive the treatment and support that they had not had in the past. Another child's physical and mental health have improved dramatically because of the interventions provided by the health team.

Healthcare leaders are actively involved in bespoke training for staff and participate in national and local area research. The healthcare staff regularly refresh their mandatory training and benefit from reflective supervision sessions and appraisals. Training is bespoke to the needs of the children. This ensures that staff have the skills to meet individual children's needs.

Children receive timely health assessments that determine their immediate and longer-term health needs. They benefit from quick access to primary health services, which are further enhanced by the commissioning of a sexual health service and a sensory room.

Medication is administered as prescribed. When errors have occurred, they have been quickly investigated and appropriate action has been taken, resulting in no impact on children's safety or well-being. However, there is a shortage of care staff members trained in medication administration, and existing staff who are trained are not having annual refresher training. Although this does not currently impact on children as staff rotas are devised to ensure that trained staff are available, leaders are aware of this, and plans are in place to address both issues.

The monitoring of the healthcare service by leaders and managers is effective and ensures that any shortfalls are identified and quickly addressed.

How well children and young people are helped and protected: good

Children said that they feel safe living in the home and can speak to staff and share their worries and fears with them. Staff sensitively work with children to calm their anxieties and promote their emotional well-being.

Staff are responsive to children's vulnerabilities and quickly gain a good understanding of each child's individual risks and the collective peer dynamics across the home. Risk assessments are regularly reviewed and include up-to-date information that clearly sets out what action staff need to take to support each individual child to minimise risks to their safety. Risk assessments also demonstrate the progress that children are making to reduce their own risks. This helps children to recognise their achievements.

Children generally engage well with staff, and staff respect and understand that there are times when children want to be alone. Most children have positive relationships with each other, and this breeds a relaxed and friendly atmosphere across the home. Nevertheless, there are times when some peer relationships between children are detrimental or harmful. In these situations, and to ensure everyone's safety, children need to spend time apart, either through choice or enforced separation. When this is necessary, staff do not always have clear plans to follow that describe children's routines, and on some occasions, this leads to inconsistent and confusing practice for children and staff.

Managed away practice is appropriate. However, staff do not always record whether the legal criteria for the use of this practice is met or continues to be met. This prevents children from fully understanding why staff are using this practice to manage their behaviours. The registered manager acknowledged that staff require additional training to address this shortfall.

Children begin to learn how to manage their own emotions and behaviours because staff support them to identify new ways to cope with their anxieties and frustrations. There are some occasions when staff need to physically restrain children to keep them and others safe and to protect them from harm. Staff ensure that records of these incidents are detailed and include actions taken to de-escalate these situations, and managers' quality assurance and oversight of this practice are thorough to identify any misuse.

The practice of searching children's bedrooms has become routine rather than a risk-led process. This creates an element of mistrust and potentially negatively impacts on children's usually positive relationships with staff.

Safeguarding concerns are managed well. The local authority designated officer said that they have no concerns with how the senior leadership team manages allegations and that it refers any concerns without delay and keeps them informed of developments during internal investigation. This multi-agency and collaborative approach helps to ensure that concerns are taken seriously and quickly addressed.

The effectiveness of leaders and managers: requires improvement to be good

Managers use a wide range of monitoring systems and processes to quality assure children's progress, the care they receive and the operational development of the service. While some of these systems afford managers sufficient oversight of children's daily experiences, others do not help them to identify practice shortfalls. For example, when duty managers make decisions to manage children away from their peers, they do not consistently inform senior leaders of these decisions at the earliest point. This prevents senior leaders from reviewing staff practice at the time or taking account of children's immediate presenting risks to assure themselves that this action is proportionate and lawful. Furthermore, some records relating to incidents when children are managed away from their peers did not include sufficient information. There was a number of examples where these documents did not specify if managed away practice met, or continued to meet, the legal criteria for use, and management oversight has not identified this. The registered manager acknowledged these shortfalls and is working with other senior leaders to simplify reporting processes, increase oversight, and develop and deliver additional training for managers and staff across the service.

Leaders and managers are ambitious for children. They have created a therapeutic culture in the home where children's progress is the focus. Staff across the home, including education staff, care staff and the healthcare team, work together to achieve this goal. Managers ensure that the views of children and staff are central to the ongoing development of the service. This collaborative approach means that the service can continue to meet children's needs.

Senior leaders have developed new recruitment and retention processes. These have proved to be successful and have resulted in the appointment of 16 new staff. When new staff are waiting to start their roles, they are regularly invited to 'keep in touch' sessions with other staff. These sessions help new staff to gain a sense of the role, forge working relationships with their colleagues and feel part of the team.

Staff development remains a priority for managers. The introduction of an enhanced practitioner scheme encourages staff to develop the skills and knowledge in their choice of promotion pathways over a six-month period. Staff welcome this initiative, and this helps them to see future career prospects within the home. This further supports staff retention.

Leaders and managers work well with external agencies and have developed positive and effective relationships with other professionals. Managers and staff are strong advocates for children. These collaborative partnerships help to ensure that children are able to access the services and support that they need while living in the home and when they leave. A social worker said that care planning for a child's journey through the home was 'very thorough and appropriate' and that this added to the success of the placement.

What does the secure children's home need to do to improve?

Statutory requirements

This section sets out the actions that the registered person(s) must take to meet the Care Standards Act 2000, The Children's Homes (England) Regulations 2015 and the 'Guide to the Children's Homes Regulations, including the quality standards'. The registered person(s) must comply within the given timescales.

Requirement	Due date
The leadership and management standard is that the registered person enables, inspires and leads a culture in relation to the children's home that— helps children aspire to fulfil their potential; and promotes their welfare. In particular, the standard in paragraph (1) requires the registered person to— use monitoring and review systems to make continuous improvements in the quality of care provided in the home. (Regulation 13 (1)(a)(b) (2)(h)) In particular, the registered person must ensure that records relating to children being managed away from their peers clearly demonstrate that the legal criteria for the use of this practice is met.	28 March 2025

Recommendations

- The registered person should ensure that children are supported to understand how to build friendships with other children in the home. When children need time apart, this should be reviewed regularly, and there should be a clear plan in place to identify children's routine. ('Guide to the Children's Homes Regulations, including the quality standards', page 38, paragraph 8.7)
- The registered person should ensure that a child's bedroom is not generally entered without their permission. Usually, rooms should only be searched if the child has been informed or asked for their permission. Immediate searching may be necessary where there are reasonable grounds for believing that there is a risk to the child's or another person's safety or well-being. ('Guide to the Children's Homes Regulations, including the quality standards', page 16, paragraph 3.20)

- The registered person should ensure that there are effective suitable arrangements to manage and administer medication. In particular, that there are enough trained and competent staff to safely administer medication to children. ('Guide to the Children's Homes Regulations, including the quality standards', page 35, paragraph 7.15)

Information about this inspection

Inspectors have looked closely at the experiences and progress of children and young people, using the social care common inspection framework. This inspection was carried out under the Care Standards Act 2000 to assess the effectiveness of the service, how it meets the core functions of the service as set out in legislation, and to consider how well it complies with The Children's Homes (England) Regulations 2015 and the 'Guide to the Children's Homes Regulations, including the quality standards'.

Secure children's home details

Unique reference number: SC035648

Provision sub-type: Secure Unit

Registered provider: Durham County Council

Registered provider address: Council Offices, Green Lane, Spennymoor DL16 6JQ

Responsible individual: Martyn Stenton

Registered manager: Valerie Haigh

Inspectors

Gary Turney, Social Care Inspector, Ofsted

Cath Sikakana, Social Care Inspector, Ofsted

Gemma McDonnell, Social Care Inspector, Ofsted

Hayley Lomas, His Majesty's Inspector, Further Education and Skills, Ofsted

Sandra Smith, Children's Services Inspector, Care Quality Commission

Shaun Common, His Majesty's Inspector, Quality Assurance Manager, Ofsted

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