

Report on an unannounced inspection of

# **HMYOI Werrington**

by HM Chief Inspector of Prisons

**13–24 February 2017**

This inspection was carried out with assistance from colleagues at the General Pharmaceutical Council and in partnership with the following bodies:



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# Contents

Introduction	5
Fact page	7
About this inspection and report	9
Summary	11
Section 1. Safety	19
Section 2. Respect	33
Section 3. Purposeful activity	45
Section 4. Resettlement	53
Section 5. Summary of recommendations and good practice	61
Section 6. Appendices	65
Appendix I: Inspection team	65
Appendix II: Progress on recommendations from the last report	67
Appendix III: Establishment population profile	73
Appendix IV: Summary of children and young people questionnaires and interviews	77

### **Glossary of terms**

We try to make our reports as clear as possible, but if you find terms that you do not know, please see the glossary in our 'Guide for writing inspection reports' on our website at: <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

# Introduction

Werrington is a small young offender institution (YOI) near Stoke-on-Trent that holds just under 130 boys aged 15 to 18. We last inspected Werrington in October 2015; in keeping with our approach to all facilities holding those under 18, we visit this establishment each inspection year. At our previous visit we reported our concerns about the safety of Werrington, although in all other respects outcomes were reasonably good or better. We also indicated our confidence that the management team would improve outcomes in safety. At this inspection our findings suggested that our optimism was justified, with the institution now being a safer place.

Although boys often arrived late, reception arrangements remained reasonably good and most boys felt safe on arrival. The institution had, however, identified the need to improve early risk assessment and risk management plans. Safeguarding and child protection arrangements remained sound, based on strong links with the local authority.

Our survey of young people indicated an improvement in their perceptions of safety. It was clear that managers and staff were working hard to reduce violence, which was evidencing some success. In this report, we describe the approach to violence reduction as coordinated and thoughtful, supported by the good use of intelligence and data as well as new approaches to conflict resolution. Along with the reduction in violence, force and segregation were being used less. It was encouraging that behaviour management initiatives were focused on motivating individual boys to behave well, rather than being based solely on sanctions as we so often see.

Overall, the quality of accommodation was adequate, although access to showers and telephones was limited and the cause of some friction. Relationships between staff and boys were improving and most engagement was good, although we did see some poor behaviour go unchallenged, and it was a concern that in our survey not enough boys thought they were treated with respect. The promotion of equality and diversity, in contrast, needed to be energised and is something we address in our main recommendations.

Time out of cell for boys was reasonable and most had good access to a well-planned curriculum in learning and skills. Our colleagues in Ofsted assessed provision at Werrington as good overall. Resettlement services remained similarly sound, with most boys getting a training plan, and boys were positive about the help they received from case workers. Release planning was generally satisfactory, although it was undermined by delays in securing accommodation prior to release dates.

Werrington, like other young offender institutions, faces some tough challenges and works with boys who can be very difficult. The institution, however, continues to do well. It was well led, with coherent, innovative plans and initiatives helping to create a much more positive ethos in the institution than we see elsewhere. The priorities for Werrington include further reductions in violence and work to sustain the resilience of the staff group so that they can build upon the progress they have made.

**Peter Clarke CVO OBE QPM**  
HM Chief Inspector of Prisons

May 2017



# Fact page

## Task of the establishment

Juvenile establishment for sentenced and remanded boys aged 15 to 18 years

## Establishment status (public or private, with name of contractor if private)

Public

## Region/department

Young people's estate

## Number held

116

## Certified normal accommodation

118

## Operational capacity

128

## Date of last full inspection

October 2015

## Brief history

The establishment opened in 1895 as an industrial school and was subsequently purchased by the Prison Commissioners in 1955. Two years later it opened as a senior detention centre. Following the implementation of the Criminal Justice Act 1982 it converted to a youth custody centre in 1985 and in 1988 became a dedicated juvenile centre (15-18 year olds) with secure accommodation for those serving a detention and training order. Young people serving extended sentences under Section 91 of the Criminal Justice Act and remanded young people are also held at Werrington.

## Short description of residential units

Doulton unit (A and B Wings): main accommodation unit

Denby unit (C Wing): the first night/induction and enhanced unit

Care and support unit: eight cells (segregation)

## Name of governor/director

Peter Gormley

## Escort contractor

GeoAmey

## Health service commissioner and providers

NHS England

Care UK: South Staffordshire and Shropshire NHS Foundation Trust

## Learning and skills providers

The Manchester College

Novus Foundation for Change

## Independent Monitoring Board chair

Pamela Pritchard



# About this inspection and report

A1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police custody.

A2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.

A3 All Inspectorate of Prisons reports include a summary of an establishment's performance against the model of a healthy prison. The four tests of a healthy prison are:

**Safety** children and young people, particularly the most vulnerable, are held safely

**Respect** children and young people are treated with respect for their human dignity

**Purposeful activity** children and young people are able, and expected, to engage in activity that is likely to benefit them

**Resettlement** children and young people are prepared for their release into the community and helped to reduce the likelihood of reoffending.

A4 Under each test, we make an assessment of outcomes for children and young people and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed nationally.

- **outcomes for children and young people are good against this healthy prison test.**  
There is no evidence that outcomes for children and young people are being adversely affected in any significant areas.
- **outcomes for children and young people are reasonably good against this healthy prison test.**  
There is evidence of adverse outcomes for children and young people in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
- **outcomes for children and young people are not sufficiently good against this healthy prison test.**  
There is evidence that outcomes for children and young people are being adversely affected in many areas or particularly in those areas of greatest importance to their well-being. Problems/concerns, if left unattended, are likely to become areas of serious concern.
- **outcomes for children and young people are poor against this healthy prison test.**

There is evidence that the outcomes for children and young people are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for children and young people. Immediate remedial action is required.

- A5 Our assessments might result in one of the following:
- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
  - **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for children and young people.
- A6 Five key sources of evidence are used by inspectors: observation; children and young people surveys; discussions with children and young people; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.
- A7 Since April 2013, all our inspections have been unannounced, other than in exceptional circumstances. This replaces the previous system of announced and unannounced full main inspections with full or short follow-ups to review progress. All our inspections now follow up recommendations from the last full inspection.
- A8 All inspections of prisons are conducted jointly with Ofsted or Estyn (Wales), the Care Quality Commission, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

## This report

- A9 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of children and young people and conditions in prisons*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.
- A10 Details of the inspection team and the establishment population profile can be found in Appendices I and IV respectively.
- A11 Findings from the survey of children and young people and a detailed description of the survey methodology can be found in Appendix V of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.<sup>1</sup>

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<sup>1</sup> The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

# Summary

## Safety

**S1** *Boys' experiences of their early days at Werrington were good. Effective partnership working with the local authority resulted in well developed safeguarding and child protection arrangements. Support for boys at risk of self-harm was generally good. Behaviour management procedures had improved significantly and were now appropriately focused on motivating positive behaviour with a range of immediate rewards and sanctions. Individual short-term reward plans were also in place for boys who required them. Levels of violence had reduced but were still too high and some violence was serious. The conflict resolution team was a positive initiative. Use of force and segregation had reduced, but some boys continued to spend long periods segregated. Substance misuse services were good. **Outcomes for children and young people were reasonably good against this healthy prison test.***

**S2** *At the last inspection in October 2015, we found that outcomes for children and young people in Werrington were not sufficiently good against this healthy prison test. We made 21 recommendations about safety. At this follow-up inspection we found that eight of the recommendations had been achieved, six had been partially achieved and seven had not been achieved.*

**S3** Some boys continued to arrive late in the evening, usually after long delays in court. In our survey, more boys said they were treated well in reception than at other young offender institutions. The reception experience remained very good, but we were concerned that many risk assessment management plans did not support effective risk management. Boys transferred to the induction unit promptly and received frequent overnight checks on the first night. In our survey, 82% of boys said they felt safe on their first night. The individual induction interviews were comprehensive, but boys were still not fully occupied during induction and spent long periods locked in their cells.

**S4** Safeguarding and child protection procedures remained sound and there were strong links with the local authority and safeguarding children board. The combined multi-agency safeguarding and health and bullying reduction plan meeting remained an effective forum for multidisciplinary discussion of the care of more complex or vulnerable boys. Child protection matters were referred promptly to the local authority and investigated appropriately. A quarterly review meeting with the local authority ensured that all referrals were closed at the end of the process.

**S5** The number of self-harm incidents and ACCTs<sup>2</sup> had reduced significantly since the last inspection. Boys on open ACCTs received good support. Several initiatives, including quality checks, staff awareness booklets and 'learning the lessons' bulletins had improved the quality of ACCT documents. However, many care maps were still weak and too many ACCT reviews were not multidisciplinary.

**S6** Our survey showed an improvement since the last inspection in responses about boys' perceptions of safety. A number of steps had been taken to reduce the likelihood of violence and levels of violence had decreased since the previous inspection. The introduction of conflict resolution undertaken by trained staff was an imaginative initiative to address the

<sup>2</sup> Assessment, care in custody and teamwork case management of boys at risk of suicide or self-harm.

levels of violence, with emerging evidence of its effectiveness. A coordinated and thoughtful approach was being taken to reducing the risk of violence: changes had been made to the regime and movements; intelligence was used well and information shared; and data were being more thoroughly analysed to understand the nature of the violence. Fights and assaults remained too frequent, sometimes involving multiple assailants and the use of improvised weapons. The identification of boys who bullied, or were suspected of being involved in bullying, was good but the quality of bullying reduction plan documentation needed improvement. Support for victims was reasonable, and far fewer boys chose to self-isolate than at the previous inspection.

- S7 Behaviour management procedures had been reviewed and now focused appropriately on motivating positive behaviour. The behaviour management scheme was well managed with the innovative use of merit awards which could be exchanged each week for a range of products. The positive ethos of behaviour management was welcome, but it was not applied consistently and we saw examples of poor behaviour which went unchallenged. Disciplinary hearings were carried out fairly. The number of adjudications awaiting action by the police was a concern, many involving serious incidents.
- S8 There was a good flow of intelligence into the security department and processes to ensure that actions were disseminated and completed by all departments were impressive. Management of 'keep apart' procedures and communication between departments to keep boys safe were also very good.
- S9 Use of force had reduced since our previous inspection and was lower than at comparable establishments. In many cases it was used to restrain and protect boys in fights and assaults. Incidents that we observed showed that force was applied appropriately. Supervision and monitoring arrangements were effective and appropriately challenged by the local safeguarding children board. Pain-inducing techniques continued to be used, which was inappropriate.
- S10 The use of segregation had reduced since our previous inspection and was restricted to boys who displayed very challenging behaviour. Focus on an enabling environment in segregation demonstrated the commitment by staff to manage boys effectively. The use of a traffic light system to manage the behaviour of segregated boys was appropriate but progression was difficult for some. We had concerns about the impact of prolonged periods of segregation on the wellbeing of a few boys. Procedures on residential units to highlight concerns about boys at risk of separation or self-isolation were appropriate.
- S11 The integration of substance use and mental health services was a very promising development. The highly skilled, multidisciplinary team delivered holistic, age-appropriate interventions which addressed many of the wider precursors to, and the results of, substance use.

## Respect

**S12** *Accommodation was adequate but access to showers and telephone calls required improvement. Relationships between staff and boys were generally appropriate and we saw examples of staff dealing with challenging situations in a patient, caring manner. However, poor behaviour was not consistently challenged. Consultation arrangements were now good. The food was unpopular but we found the quantity and quality of food to be reasonable. Servery management had improved significantly. Support for boys with protected characteristics required further improvement. Chaplaincy services remained good. The management of complaints was effective and health care provision was good. **Outcomes for children and young people were reasonably good against this healthy prison test.***

**S13** *At the last inspection in October 2015, we found that outcomes for children and young people in Werrington were reasonably good against this healthy prison test. We made 16 recommendations about respect.<sup>3</sup> At this follow-up inspection we found that nine of the recommendations had been achieved, four had been partially achieved and three had not been achieved.*

**S14** Most cells were adequate and boys had been encouraged to keep cells clean. The Vibe youth club was a good facility but the other two association rooms were not as well maintained or cleaned and lacked equipment. The design and layout of the units did not support effective practice and wings were too large, resulting in disruptive noise levels. There were very limited options to relocate boys when issues arose. Inconsistent access to showers and telephones created anxiety and conflict between staff and boys, which was avoidable. Arrangements for managing mail, property and clothing were good.

**S15** Interactions between boys and staff had improved since the last inspection and most were informal and polite. Residential staff were courteous and most staff made appropriate allowance for adolescent behaviour and individual needs. However, it remained the case that in our survey too few boys said that staff were respectful and we observed instances where poor behaviour was not challenged. All boys were allocated a personal officer, but there was some confusion about their roles and that of the custody support plan officers. The potential benefits of the custody support plan had not been realised. The residential forums had facilitated valuable consultation with the boys and had resulted in some improvements to the regime.

**S16** The management of meal times had improved and a few boys were eating together each night. The food was not popular but we found the quality and quantity to be reasonable.

**S17** The strategic management of diversity had improved from a low base since the previous inspection but still needed further improvement. Monthly diversity and equality action (DEAT) team meetings were attended by boys acting as diversity representatives. Attendance by senior managers was inconsistent and they did not fulfil their role of protected characteristic leads adequately. The establishment had introduced monthly monitoring data to inform discussion at DEAT meetings and some investigation had been undertaken into out-of-range data. Investigations into discrimination incidents were adequate and boys were challenged appropriately. Most incidents related to the use of inappropriate language and a work pack had recently been developed to address this. There was little consultation with minority groups and support for boys from some protected characteristic groups was limited, with no involvement from community groups. Faith provision and

<sup>3</sup> This included recommendations about the incentives and earned privileges scheme which, in our updated Expectations (Version 3, 2012), now appear under the healthy prison area of safety.

pastoral support remained very good. In our survey, 85% of Muslim boys said that their religious beliefs were respected.

- S18 Boys continued to be seen individually to discuss complaints before receiving a written response. This remained good practice. Most written responses were good. Legal questionnaires were completed by induction staff within 24 hours of arrival which helped to identify the support that boys might need. Issues concerning bail or other legal support were included in remand planning reviews.
- S19 Health care services were good and boys we spoke to were very satisfied with the quality of health care they had received. Partnership working and clinical governance were effective. Reception and subsequent health screening was comprehensive and completed within recommended timescales. There was an appropriate range of primary care services and age-appropriate screening programmes, with prompt access to most services. Effective medicine management procedures were embedded. Dental services were good, including short waiting times and oral health promotion. Inclusion, the multidisciplinary integrated mental health and substance use team, provided an age-appropriate and developing service.

## Purposeful activity

**S20** *Time out of cell remained reasonably good for most boys. They had better access to activities, enrichment and education than at other YOIs. Effective partnership working between the prison and education providers ensured that boys received a well planned curriculum. Leadership and management of learning and skills remained good. The allocation system was particularly effective and took account of the safety and resettlement needs of boys. Teaching was generally good, but behaviour management was inconsistent. Provision of vocational subjects was limited. Achievement levels were high in most areas but required some improvement in mathematics. Outreach provision was good but not resourced to meet demand. Library and PE provision remained good and access had improved. **Outcomes for children and young people were reasonably good against this healthy prison test.***

S21 *At the last inspection in October 2015, we found that outcomes for children and young people in Werrington were reasonably good against this healthy prison test. We made nine recommendations about purposeful activity. At this follow-up inspection we found that five of the recommendations had been achieved, two had been partially achieved and two had not been achieved.*

- S22 Most boys could have up to 11 hours out of cell but boys subject to keep apart or basic regimes could receive as little as five. Evening activities were appropriately timetabled to allow boys on the silver and gold levels of the incentive scheme to access them. Our roll checks identified that 18% of boys were locked up during the core day. While this was still too many, it was an improvement and better than we see at similar establishments.
- S23 Close partnership working between prison staff, Novus and Kinetic Youth enhanced the provision and helped to deliver well planned education and training. Despite some inconsistency, incentives were generally used effectively to encourage positive engagement and good behaviour. Good involvement in local community projects broadened the curriculum and enhanced the boys' social awareness. Equality, diversity and British values were promoted well in education. Self-assessment and quality improvement plans were broadly effective. Classes started late and finished early too often, reducing the time available for education and training courses.

- S24 The system for allocating boys to suitable activities was very effective and timely and ensured that security, safety and resettlement needs were well prioritised. Barista training provided a good range of learning opportunities and was a popular pathway. Work was purposeful and boys developed a good work ethic. Vocational training opportunities were limited and required further development to provide more pathway opportunities. The multi-skills facilities were poor.
- S25 Teaching and learning were good and boys engaged well in most courses. Additional support arrangements were very good and boys benefited from supervised reflective sessions and learning assistance in class. Outreach courses delivered on wings engaged boys in learning who would otherwise not have received any education. However, it did not cover the full curriculum and was not well enough resourced to meet demand. The more able boys were not challenged sufficiently to achieve their full potential. Individual target setting required improvement to promote progress.
- S26 The young people's council provided good opportunities for boys to comment on the provision and contribute to improving courses. Boys benefited from a broad range of enrichment activities. Good team working skills were developed in sessions led by Kinetic Youth. Most boys developed appropriate levels of English and mathematics. Most boys developed a positive attitude to learning. Some inappropriate behaviour and use of bad language was not challenged.
- S27 High achievement of short individual units motivated boys. Qualification success rates for most courses were high. A minority of mathematics courses had low qualification success rates.
- S28 The library was well managed and maintained and provided boys with a good range of appropriate resources. Access to the library had improved and was now good.
- S29 The gymnasium facility and resources were good and activities were well planned and delivered. Partnership working was good between PE and education staff and popular accredited sports courses were delivered. Sports field drainage problems were still an issue, although more use was being made of the facility during dry periods.

## Resettlement

- S30** *The strategic management of resettlement remained sound. All boys had a training plan and they were positive about the help they had received from case workers. Sentence planning targets were generic and did not adequately address the underlying issues relating to offending. Review meetings were managed well with contributions from key workers and boys. Public protection was broadly appropriate. Support for looked-after children from prison based social workers was good but this group continued to receive inconsistent support from local authorities. Release planning and resettlement pathways work was generally good but undermined in some cases by accommodation not being secured in enough time to meet the boys' needs. **Outcomes for children and young people were good against this healthy prison test.***
- S31 *At the last inspection in October 2015, we found that outcomes for children and young people in Werrington were good against this healthy prison test. We made 10 recommendations about resettlement. At this follow-up inspection we found that five of the recommendations had been achieved, one had been partially achieved and four had not been achieved.*

- S32 The strategic management of resettlement was good. Priorities were clear, focused and appropriate. Monthly reducing reoffending meetings were well attended and there was good focus on strategic planning. Good links had been established with three prisons to manage transitions when boys reached the age of 18.
- S33 Remand and sentence planning meetings and reviews were well managed, organised and attended. Sentence planning was appropriate, although most targets were too generic and rarely linked to issues of risk or reoffending. In our survey, significantly more boys than at the last inspection said they understood their planning targets and that their case worker had helped them prepare for release. Improved quality assurance and case work supervision had been introduced since our last inspection. These were positive initiatives but focused too much on process rather than quality and effectiveness. Release on temporary licence was used appropriately, but the number of boys using it for work experience was low. Support for the small number of indeterminate sentenced boys was appropriate.
- S34 Public protection arrangements were appropriate. However, we remained concerned about the delays in confirming the MAPPA management levels preventing effective release planning.
- S35 Prison-based support for looked-after children was good. The two social workers had good links with support in the community and escalated concerns when it was inadequate.
- S36 Review meetings leading up to release were well attended by case workers and community agencies, although attendance by staff from other departments in the prison was limited.
- S37 Support with finding accommodation was reasonable. No boys had been released with no fixed abode, although too often addresses were not confirmed until just before release which affected all aspects of resettlement planning. Finance, benefit and debt support was appropriate and boys could open bank accounts before release if they were over 18. Advice on debt remained limited.
- S38 The processes for planning and monitoring education, training and employment in prison and on release or transfer were effective and supportive. An employment and training week with guest speakers, employers and training providers had successfully promoted future opportunities. Use of the virtual campus<sup>4</sup> required improvement.
- S39 Pre-release and transfer arrangements relating to health care needs were good. Boys with mental health or substance use issues were managed appropriately.
- S40 There was still an appropriate focus on family support. At the time of induction, arrangements could be made for families to meet a number of agencies. Monthly family days were valued and supplemented by other initiatives such as celebrations of achievement which families and carers were invited to attend. There was sufficient access to visits. The visits facility needed refurbishment.
- S41 The range of accredited and non-accredited programmes were appropriate to the population. We remained concerned about the lack of provision for boys convicted of sexual offences.

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<sup>4</sup> Internet access for prisoners to community education, training and employment opportunities.

## Main concerns and recommendations

S42 **Concern:** Levels of violence at Werrington had decreased since the previous inspection but still remained too high.

**Recommendation:** Work should be undertaken to identify and provide the support needed to help Werrington (and other young offender institutions) to address and reduce the consistently high levels of violence while continuing to deliver a full, constructive regime to the boys in their care.

S43 **Concern:** The attention paid to the diverse needs of boys from protected characteristic groups was not adequate. Managers who had been assigned the lead on protected characteristic groups were not overtly championing their areas or working to improve outcomes for boys with protected characteristics.

**Recommendation:** All protected characteristic groups should have an identified lead who consults with the group regularly and uses their feedback to inform actions in the diversity action plan. Regular updates on each protected characteristic should be considered by the diversity and equality action team to inform an establishment-wide response to meeting the diverse needs of boys.



# Section 1. Safety

## Courts, escorts and transfers

### Expected outcomes:

**Children and young people transferring to and from the establishment are treated safely, decently and efficiently.**

- I.1 Too many boys continued to arrive at Werrington late in the evening, usually after long delays in court. In our survey, 24% of boys said they had travelled in vans with adults, which was unacceptable.
- I.2 Most escort vans that we looked at were clean and the prison continued to monitor cleanliness and raise issues with the escort contractor. Boys were not handcuffed on and off the vehicles at Werrington, which remained proportionate. The on-site video link facility had been used for 61 court appearances during the six months to January 2017.

### Recommendation

- I.3 **The escort contract should be reviewed to ensure that children do not have long delays at court once their case has finished and do not travel in escort vans with adults.**

## Early days in custody

### Expected outcomes:

**Children and young people are treated with respect and feel safe on their arrival into prison and for the first few days in custody. Children and young people's individual needs are identified and addressed, and they feel supported on their first night. During a young person's induction he/she is made aware of the establishment routines, how to access available services and how to cope with being in custody.**

- I.4 About five boys arrived from court or other establishments every week. The reception building was clean and remained an excellent, welcoming environment. In our survey, 82% of boys said they were treated well in reception against the comparator of 61%. Boys' experience of reception remained very good, including no routine strip-searching and good access to hot food, showers and telephone calls. All boys received booklets in reception which gave basic information about prison life.
- I.5 All first night procedures, including health screening, were completed in reception. Most first night risk assessments were completed in private and used information from Asset<sup>5</sup> assessments effectively. However, we were concerned that many risk assessment management plans (RAMs) still did not support effective risk management. RAMs that we examined often did not fully reflect the boy's perspective and presentation on arrival and many did not highlight current risks and how to manage them on the units. The prison quality assurance process had identified these issues and plans were in place to address them.

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<sup>5</sup> Youth Justice Board assessment documentation completed by youth offending teams.

- I.6** Boys transferred to the induction unit promptly. Unlike the previous inspection, we did not observe abuse shouted at new arrivals as they walked to the induction unit. Boys were located in clean cells which were adequately equipped and they received frequent checks during the first night. Boys who did not arrive with up-to-date ASSET assessments were observed regularly until this was addressed. In our survey, 82% of boys said they felt safe on their first night.
- I.7** The induction unit held up to 22 boys: at the time of the inspection half were new arrivals and half had transferred from the main unit on gold status (the enhanced level of the behaviour management scheme). The unit was no longer used to manage boys with difficult behaviour, although boys with additional vulnerability were occasionally located there under a time-limited management plan, which was appropriate. Many boys told us that the unit was the best in the prison, despite the occasional disruption caused by the segregation unit on the ground floor. Boys could achieve gold status during induction, which improved their experience on transfer to the main unit and encouraged positive behaviour.
- I.8** Induction began the day after arrival with a comprehensive individual interview followed by five days of planned activities. The induction was now monitored and most boys received all sessions. However, boys were still not fully occupied during induction and new arrivals spent long periods locked in their cells. This was sometimes exacerbated by staff shortages. Only 47% of boys in our survey said that induction covered everything they needed to know about the establishment.

## Recommendation

- I.9 Risk assessment management plans should be regularly reviewed and updated and should accurately reflect the boys' risks to other boys and staff and how to address this on the units.**

## Care and protection of children and young people

### Safeguarding

#### Expected outcomes:

**The establishment promotes the welfare of children and young people, particularly those most at risk, and protects them from all kinds of harm and neglect.**

- I.10** The well developed safeguarding structures that we previously reported on remained in place. There were very good links with the local authority and Staffordshire Safeguarding Children Board (SSCB). The comprehensive safeguarding strategy at Werrington had been reviewed in October 2016 and was linked appropriately to other policies. The safeguarding team included uniformed staff who led on suicide and self-harm prevention, bullying and violence reduction, managing and minimising physical restraint (MMPR) and equality and diversity. There were also two seconded social workers and dedicated administrative support. They worked well as a team, sharing information appropriately, and had good knowledge of the needs of boys at Werrington.
- I.11** Quarterly, monthly and weekly safeguarding meetings were held and the head of safeguarding attended quarterly meetings of the SSCB. Quarterly safeguarding meetings at Werrington were chaired by the head of safeguarding and included representatives from the local authority and the NSPCC. The meeting remained focused on the strategic management of safeguarding and attendance was largely appropriate. However, only security and chaplaincy

representatives had attended the October 2016 meeting with the safeguarding team, and the residential function had not attended any of the meetings in 2016. The local monthly safeguarding meeting was usually chaired by the head of safeguarding and focused on operational matters. Attendance was inconsistent, but minutes showed good discussion informed by analysis of data on areas such as bullying and violence, incidents of self-harm, use of force, and child protection referrals. More attention was given to bullying behaviour than was the case at the previous inspection.

- I.12** The weekly multi-agency safeguarding and health meetings focused on more vulnerable boys and now incorporated the bullying report plan meeting which had previously taken place separately. This facilitated a more holistic discussion of individual boys and the links between them. Any member of staff concerned about a boy's wellbeing could refer him to this meeting for discussion. There was multidisciplinary attendance and participants demonstrated good knowledge of the boys under discussion. Appropriate support was put in place for boys who needed it.

## Recommendation

- I.13** **Quarterly and monthly safeguarding meetings should be attended by representatives from all areas of the establishment who work with boys.**

## Child protection

### Expected outcomes:

**The establishment protects children and young people from maltreatment by adults or other children and young people.**

- I.14** Clear child protection procedures were in place. The policy had been reviewed in January 2017 and most staff had received child protection training. In addition to the training delivered across the young people's estate, the on-site social workers had given briefings to staff and the local authority designated officer (LADO) and Staffordshire police had run a child protection workshop for residential staff. Similar workshops were planned.
- I.15** During the previous six months, 16 child protection referrals had been submitted to the local authority for investigation or consultation. This was similar to the number at the previous inspection. Most referrals related to the use of force by staff. Referrals were generally made by the social workers seconded to Werrington. Members of the safeguarding team were aware of the procedures and initiated referrals promptly in the absence of the social workers. Relationships with the local authority were well established. Regular contact was maintained and the establishment took part in strategy meetings as appropriate. Four investigations involving the police were in place at the time of the inspection following referral of child protection concerns to the local authority. A quarterly meeting with the LADO and the manager of the Leek safeguarding team enabled a review of all open referrals and any closed since the previous meeting.

## Recommendation

- I.16** **All staff should undertake child protection training.** (Repeated recommendation I.25)

## Victims of bullying and intimidation

### Expected outcomes:

**Everyone feels safe from bullying and victimisation. Children and young people at risk/subject to victimisation are protected through active and fair systems known to staff, young people and visitors which inform all aspects of the regime.**

- I.17** The identification of bullying and victims had been strengthened since the previous inspection. An anti-bullying survey had been carried out with boys in November 2016. This had showed that being hit or kicked was the most common experience of bullying for boys.
- I.18** In our survey, 8% of boys said they had been threatened or intimidated by other boys at Werrington and just 1% said their canteen or property had been taken against 25% and 16% respectively at the previous inspection. Just over a third said they had felt unsafe at some time at Werrington compared with 56% at the previous inspection. More than a quarter of boys said they had been victimised at Werrington. The proportion of boys who said in our survey that shouting out of windows was a problem had decreased from 59% in 2015, but was still too high at 38%.
- I.19** The supervision of boys when they were unlocked was good and careful thought had been given to moving them around the site so that they felt safe while still able to access a normal regime (see paragraph I.60). Residential staff were alert to signs of bullying and used wing observation books and electronic case notes to record them. There was good information flow into and between the security and safeguarding teams.
- I.20** The needs of victims of bullying and violence, including boys who were self-isolating, were discussed at the weekly multi-agency safeguarding and health meetings and plans to support them were developed. The use of conflict resolution by trained staff was much improved (see paragraph I.61). The number of boys who self-isolated had reduced from about a quarter at the previous inspection to none at the time of this inspection.

## Suicide and self-harm prevention

### Expected outcomes:

**The establishment provides a safe and secure environment which reduces the risk of self-harm and suicide. Children and young people are identified at an early stage and given the necessary support. All staff are aware of and alert to vulnerability issues, are appropriately trained and have access to proper equipment and support.**

- I.21** The more vulnerable boys, including those at risk of suicide and self-harm, were discussed at the weekly safeguarding and health meetings. Broader strategy was discussed at the monthly safeguarding meeting, including trends on individual triggers for self-harm and suicide. Issues that were identified were now addressed more proactively, including an individual interview with each boy who used a ligature to explore the reasons and to offer support.
- I.22** There had been 42 incidents of self-harm during the previous six months compared with 62 at the previous inspection. Two boys had been responsible for 15 incidents (36%). No boy had required hospital treatment as a result.

- I.23** At the start of their shift, all staff collected a paper copy of the daily safeguarding register which covered all boys on open or recently closed ACCT<sup>6</sup> documents and support plans, including review dates. This aided effective communication.
- I.24** During the previous six months, 74 ACCT documents had been opened compared with 104 at the last inspection. The safeguarding team had produced written information to drive improvements in ACCT records, including identifying risks and triggers. Weekly bulletins outlined themes from reviews of documentation. The quality of daily entries had improved and most were now sufficiently detailed. However, the quality of care maps still varied and too many lacked clear timescales and comprehensive support options to address the identified need. Multidisciplinary attendance at ACCT reviews remained variable and health staff rarely attended the first case review. Management checks now took place, although they were not all included in the ACCT document which reduced their impact. We were told that this was being addressed. Support for boys on ACCTs was good and most boys were positive about the support they received.
- I.25** During the previous six months, 17 boys on an ACCT had been held in the segregation unit. Twelve had started a fire and were automatically located in the segregation unit and placed on an ACCT. Most ACCTs were closed quickly when boys denied any self-harm or suicide intent. We were not confident that the exceptional circumstances form was routinely completed.

## Recommendations

- I.26** **Health staff should consistently attend or contribute to the first ACCT case review.**
- I.27** **All care maps should include specific time-bound actions which provide enough support to address the identified needs and are regularly reviewed.**

## Behaviour management

### Expected outcomes:

**Children and young people live in a safe, well-ordered and motivational environment where their good behaviour is promoted and rewarded. Unacceptable behaviour is dealt with in an objective, fair and consistent manner.**

- I.28** The local behaviour management strategy had been revised since our previous inspection and now encompassed all key elements of behaviour management, including adjudications, violence reduction, bullying reduction plans, conflict resolution, segregation and the rewards and sanctions scheme. Boys were informed of the procedures during induction and the key elements were featured on information boards on residential units.
- I.29** The safeguarding department now had oversight of the behaviour management strategy which generated a cohesive approach to the management of poor and good behaviour. There was an appropriate focus on using motivational tools to encourage good behaviour, rather than relying on punitive measures. Staff used all elements of the strategy to focus on the needs of the individual and had gained confidence in developing individual targets to reward good behaviour or manage poor behaviour more effectively.

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<sup>6</sup> Assessment, care in custody and teamwork case management of boys at risk of suicide or self-harm.

- I.30** An innovative approach to encouraging positive behaviour had involved consultation with boys through the young people's council and a number of forums. This had led to the revision of the merit scheme (see paragraphs 1.35 and 3.8) which reinforced the developing ethos across the establishment that the absence of negative behaviour should be viewed positively and should be rewarded and encouraged. The scheme had only been in place since November 2016, but initial signs were encouraging. The establishment was able to demonstrate a reduction in adjudications, complaints, alarms and non-compliance since the introduction of the scheme.
- I.31** Despite the welcome improvements in behaviour management, a few low-level antisocial incidents still went unchallenged, and we observed some of these during the inspection. Some boys expressed concern in our interviews that positive merits were awarded inconsistently, although records and our observations indicated that most staff had developed an appropriate tolerance with boys displaying challenging behaviour.
- I.32** Most boys displaying poor behaviour continued to be managed on residential units. If they were returning from segregation, they had individual reintegration plans (see paragraph 1.81). We were told of options being considered for a progression unit to assist in reintegration and provide more intensive support to boys displaying the most challenging behaviour. Further development of the plans was likely to be affected by the limited accommodation available and the need for capital investment.

## Recommendation

- I.33** **Effective oversight of the management of behaviour should instil confidence in managers, staff and boys that all incidents of positive and negative behaviour are managed consistently.**

## Rewards and sanctions

### Expected outcomes:

**Children and young people are motivated by an incentives scheme which rewards effort and good behaviour and applies sanctions appropriately for poor behaviour. The scheme is applied fairly, transparently and consistently, and is motivational.**

- I.34** The local incentives scheme had been reviewed to reflect the revised behaviour management policy. The scheme continued to operate the three levels of bronze, silver and gold. About a third of boys were on the gold level, more than at our previous inspection, while 20% of boys were on bronze, less than we see in similar establishments. The scheme was now focused on the acknowledgement and reward of positive behaviour to try to break cycles of negative behaviour.
- I.35** The revised merit scheme contributed fundamentally to the success of the incentives scheme and was now an integral part of local policy (see paragraph 1.30). Rather than the previous use of merits and demerits solely to determine the boy's level on the incentives scheme, staff now clearly applied them to encourage boys to maintain positive behaviour.
- I.36** All members of staff were able to issue a merit or demerit. The merits were now complemented by a merit shop which had a small range of goods which boys could exchange their merits for, providing a more immediate reward for good behaviour. The scheme was enhanced by other initiatives such as weekly residential room checks. Boys started on the same level of points which were removed or awarded to encourage cleanliness and respect for personal possessions. Boys issued with a merit or demerit were given a paper copy

which, in the case of demerits, explained how negative behaviour could be improved. As an additional safeguard, the application of merits or demerits were validated by a P-Nomis (Prison Service IT system) entry and notification of the merit to a residential manager. The manager could use discretion not to award a demerit if it conflicted with the boy's overall management plan. The merit scheme was subject to a weekly audit check by residential managers.

- I.37** Despite the welcome use of the incentives scheme to encourage a positive ethos, only 43% of boys who responded to our survey said that the scheme encouraged them to change their behaviour. However, in addition to the merit system, we found reasonable differential between the levels of the incentives scheme. In addition to national policy, boys who had reached gold level could buy their own bedding, were provided with additional phone credit and could use an enhanced games room. They could still apply to live on the enhanced unit which, despite its proximity to the segregation unit, boys appreciated because the smaller unit had a calmer atmosphere. All boys on gold and silver were now able to use the youth club or the 'vibe' room operated by Kinetic Youth. Access operated on a rota to ensure any 'keep apart' issues were appropriately managed (see paragraph I.46).
- I.38** Boys on the bronze level of the incentives scheme had reduced time for association during the week but were still able to experience a reasonable regime and attend education. They were encouraged to earn merits to demonstrate improved behaviour. They were unable to use the merit shop, but could save earned merits to encourage progression to silver or gold level. Boys on bronze were reviewed each week and provided with a bronze level intervention package with individual targets to help them improve their behaviour. If a boy remained on bronze for over two weeks, consideration was given to a nominated case worker contacting his family to help him progress back to silver.
- I.39** The incentives scheme was explained to boys on induction and clearly displayed in appropriate format around the establishment. All boys arriving at Werrington progressed to gold level on completion of induction, provided there had been no negative behaviour.

### Good practice

- I.40** *The use of the merit scheme supplemented by a merit shop to encourage positive behaviour was an intuitive and welcome initiative.*

## Security and disciplinary procedures

### Expected outcomes:

**Security and good order are maintained through an attention to physical and procedural matters, including effective security intelligence as well as positive relationships between staff and children and young people. Disciplinary procedures are applied fairly and for good reason. Children and young people understand why they are being disciplined and can appeal against any sanctions imposed on them.**

- I.41** The approach to security remained proportionate. The supervision and control of movements to activities was more overt and restrictive than at the previous inspection which reflected the identification of hotspots of violence. These measures were appropriate and boys were safer as a result.
- I.42** All cell searching was intelligence led and there was no routine strip-searching.

- I.43** The management of intelligence was impressive and enabled the security department to focus appropriately on the key risk of violence. The department had received over 3,000 intelligence reports (IRs) during the previous six months, which was far higher than comparable establishments and higher pro rata than some adult establishments with much larger populations.
- I.44** Despite the high level of intelligence flow, backlogs were minimal. Logs were analysed and actioned, often on the day received. Night managers carried out initial analysis for distribution to key areas before morning unlocks. More detailed analysis during the day was disseminated as required and data used to inform the monthly security objectives. Intelligence disseminated for further action was checked every fortnight to ensure that work had been completed. Outstanding issues were escalated to the security manager.
- I.45** A small team was responsible for oversight of these processes and further support was provided by an operations group. The security department had strengthened links with the residential units by creating security liaison officers who were well briefed on intelligence issues and boys posing threats of violence.
- I.46** Regular briefings by residential managers updated staff on issues of concern and boys who needed to be kept apart. Combined with conflict resolution and wider safeguarding work, this facilitated cohesive management of boys and the approach to reducing violence. A member of the security team attended activity allocation meetings to update staff on safety concerns in education and work areas.
- I.47** The monthly security meeting was usually chaired by the head of security and was well attended. The minutes did not always reflect the level of work that had been conducted on the prevailing risks.
- I.48** Any boys who were vulnerable to links with extremism were discussed at a separate meeting with support from external agencies and the Her Majesty's Prison and Probation Service (HMPPS) regional lead in this area. The regional police intelligence unit contributed to discussion on boys connected with gangs in the community.
- I.49** The availability of drugs was minimal but we were pleased to see evidence of a continuing vigilant approach to supply reduction.
- I.50** The drug strategy committee met quarterly and was well attended by departments across the establishment. A rolling, responsive supply reduction action plan was reviewed by the security committee and at each drug strategy meeting. The approach reflected awareness of developing risks like synthetic cannabinoids.
- I.51** The random positive mandatory drug testing (MDT) rate for the six months to December 2016 was low at 2.7%. In the same period, seven suspicion tests had been conducted with five positives – all for cannabis. There had been seven drug finds during this time.
- I.52** The number of boys who had been placed on adjudication had reduced since our previous inspection and was now lower than comparable prisons. An appropriate room was used and managers ensured that boys understood the proceedings and were offered use of an advocate at the outset. In our survey, 84% of boys said the adjudication process had been explained clearly to them.
- I.53** Minor reports were still held and were conducted by custodial managers. The number of minor reports was relatively low and some staff questioned their value given the focus on behaviour management and the use of the merit system (see paragraph I.35).

- I.54** A range of data were collated following adjudications and discussed at the segregation management and review group (see paragraph I.83). The group met quarterly to discuss the outcomes of disciplinary proceedings but analysis of other data, such as protected characteristics, was limited to ethnicity and required improvement. A regular quality assurance check of completed adjudications was conducted by the governor.
- I.55** A high number of outstanding adjudications had been referred to the police, some dating back over two years and unlikely to progress further. The establishment police intelligence officer now tracked all recent referrals and monitored the outcomes.

## Recommendation

- I.56** **Effective tracking of adjourned adjudications should be implemented and overseen by senior managers so that all charges are heard and concluded within a reasonable timescale, particularly referrals to external agencies.**

## Good practice

- I.57** *The collation, analysis and dissemination of intelligence took place immediately to inform decision making. This was supplemented by effective tracking of intelligence enabling a coordinated approach to reducing the high levels of violence.*

## Bullying and violence reduction

### Expected outcomes:

**Active and fair systems to prevent and respond to bullying behaviour are known to staff, children and young people and visitors.**

- I.58** The number of fights and assaults on staff and boys in the previous six months had decreased since our last inspection. There had been 69 assaults on boys and 50 fights. Some of the assaults involved multiple assailants attacking one boy or the use of improvised weapons. Most injuries were minor, although some had required sutures or x-ray in hospital. There had been 23 assaults on staff, some of which involved high levels of violence and injury.
- I.59** Boys who were involved in violence were either managed through the adjudications process or referral to the police. We were told it could be a lengthy process if a boy potentially faced further charges for an offence committed at Werrington.
- I.60** There had been a number of initiatives to reduce the levels of violence, including the introduction of body-worn cameras. Information sharing was good and staff were alert to potential conflict. Levels of use of force had decreased since the introduction of managing and minimising physical restraint (MMPR). When incidents took place, steps were taken to prevent the boys involved coming into contact with one another in education or evening activities. Boys in conflict were moved between landings and continued to have access to communal dining and evening association. Kinetic Youth delivered programmes to address bullying and violence reduction and drama groups enabled boys to increase their understanding of violence.
- I.61** There was emerging evidence that the introduction of a conflict resolution team was having a positive impact. The team of three trained senior officers conducted an interview with all boys involved in fights and assaults to assess their willingness to engage in conflict resolution. They also worked with boys who were in potential conflict with each other. In a few

instances conflict resolution had taken place between staff and boys. During the previous six months, 174 initial violence reduction interviews had taken place and 47 conflict resolution meetings had been completed. In four cases participants had gone on to fight again, but there had been no further violent incidents in the other 43 cases.

- I.62** During the previous six months, 86 boys had been placed on a bullying reduction plan. These boys were discussed at the weekly multi-agency safeguarding and health meeting and decisions were taken on whether more intervention was needed or a gradual reduction in their management. The quality of the plans that we looked at varied and the daily entries were not sufficiently detailed.

## Recommendation

- I.63** **Entries in bullying reduction plans should be completed by all staff working with a boy to give a comprehensive picture of his behaviour while subject to anti-bullying procedures.**

## Good practice

- I.64** *The introduction of a conflict resolution programme delivered by trained staff was an excellent initiative which showed early signs of a positive impact on reducing conflict between boys.*

## The use of force

### Expected outcomes:

**Force is used only as a last resort and if applied is used legitimately and safely by trained staff. The use of force is minimised through preventive strategies and alternative approaches and this is monitored through robust governance arrangements.**

- I.65** The MMPR programme had now been fully implemented. All incidents involving the use of force were overseen by the local safeguarding department where at least one manager was on duty during the unlock period to oversee and advise on incidents that occurred.
- I.66** The use of force had reduced over the previous six months from 221 at the previous inspection to 174 instances. Forty-nine of the incidents had involved the use of ratchet handcuffs to de-escalate the incident. Pain-inducing techniques had been used in 12 of the incidents which was not appropriate.
- I.67** The CCTV and body camera footage and documentation that we viewed demonstrated that force was used appropriately in most incidents, usually in reaction to a fight or assault. De-escalation techniques were evident and most boys were returned to their normal accommodation following an incident.
- I.68** Oversight of planned and spontaneous interventions was good. The MMPR coordinator team consisted of four staff overseen by the head of safeguarding who was responsible for the local restraint minimisation strategy. All planned interventions were recorded and the body-worn video cameras provided reassurance for staff and boys. MMPR staff ensured that records were completed and only 31 documents were outstanding at the time of the inspection, which is better than we see in comparable establishments.
- I.69** Incidents of force were reviewed promptly by the MMPR team and concerns were reported to the head of safeguarding with referral to the local safeguarding children board (LSCB) if

required. More detailed analysis took place at the weekly use of force minimisation meeting which was chaired by the head of safeguarding and attended by an MMRP coordinator and social workers. Areas of concern or best practice were disseminated appropriately. Any emerging trends were evaluated and used to develop local training.

- I.70** The use of MMRP was scrutinised at the quarterly safeguarding meeting. A further independent review was carried out each quarter by the Staffordshire Safeguarding Children Board (SSCB) which provided the establishment with a written report of their findings. Representatives of the SSCB had attended local MMRP staff training.
- I.71** Boys of particular concern or who had been restrained on more than one occasion continued to be reviewed at the multi-agency safeguarding and health meeting (see paragraph I.12) where additional interventions were identified to avoid further risk of restraint.
- I.72** Restraint handling plans were now in place for boys who had a medical condition which could be adversely affected by restraint. These plans were readily available around the prison, but many residential staff were not sure which boys had a handling plan. Some data on residential units were out of date.

## Recommendations

- I.73** **Pain-inducing techniques should not be used on boys.** (Repeated recommendation I.78)
- I.74** **All incidents involving use of force should be recorded, including audio.** (Repeated recommendation I.79)
- I.75** **All staff should be aware of boys subject to restraint handling plans. They should be familiar with the content of the plans to guide them during incidents.**

## Separation/removal from normal location

### Expected outcomes:

**Children and young people are only separated from their peers with the proper authorisation, safely, in line with their individual needs, for appropriate reasons and not as a punishment.**

- I.76** The use of segregation had reduced significantly since our previous inspection and was lower than we find in comparable establishments. Segregation was restricted to boys who displayed the most challenging behaviour on residential units. Average stays were relatively short but a few boys were separated for much longer. At the time of the inspection, one boy had been segregated for nearly three months.
- I.77** A policy dealing with all forms of separation had been developed during 2015 to guide staff on alternatives to segregation. The segregation unit was overseen by a senior manager. The operation of the unit was led by a custodial manager with a small group of staff who had the clear objective of helping boys to reintegrate as soon as it was practical and safe to do so. All the core segregation staff were now trained in mental health awareness, although staff from other areas were sometimes required to work in the unit.
- I.78** The unit itself was well equipped and boys could have at least a basic regime of telephone calls, exercise and showers each day. We observed some boys who had caused considerable disruption but, despite this, alternative arrangements were made to ensure that they could

access the regime safely. A range of outreach services were available for boys who could not leave the unit, including education, Kinetic Youth and mental health specialists. These services were limited for boys whose behaviour warranted a more restricted regime. Despite some positive initiatives, we were concerned about the effect of prolonged periods of segregation on young people.

- I.79** A ‘traffic light’ system operated for boys in the segregation unit. They all started the day on the green level with full access to the regime identified in their individual plan. If their behaviour deteriorated, the level could be reduced to amber or red with more controlled access to the regime. However, frequent changes of level provided incentives for boys to reflect on poor behaviour and to progress. Governance of the scheme was adequate.
- I.80** The basic regime and traffic light system were underpinned by regular good order review boards. The boards were multidisciplinary and chaired by a senior manager and the boy was encouraged to attend. On a number of occasions, health care staff did not attend review boards, which was not acceptable.
- I.81** The focus of the review boards was reintegration. Sensible targets were set and we saw examples of boys who were permitted wider access to the regime such as education or partial reintegration. A ‘time out’ card had been developed which a boy could show to staff if he felt he needed additional support and arrangements would be made to mitigate any risks. Records of review boards were focused, although documentation on the identification of risks during the first 24 hours of segregation was poor.
- I.82** The positive ethos in the segregation unit had led to the development of an action plan to achieve enabling environment accreditation<sup>7</sup>.
- I.83** Oversight of segregation procedures took place at the quarterly segregation management and review group. Attendance at the group had improved since the previous inspection, but it required a more strategic approach.
- I.84** It was rare for boys to choose to self-isolate on residential units for a significant time. Procedures were in place to identify boys who did not engage in their scheduled regime for more than an hour. Residential staff spoke to the boy to identify any immediate concerns. If self-isolation extended beyond 14 hours, senior managers were informed and an enhanced separation log was opened.

## Recommendations

- I.85 Risks and concerns identified when a boy is first segregated should be clearly documented and accessible to all staff.**
- I.86 The segregation and review group should ensure that there is sufficient analysis of data to identify any trends and patterns with the boys segregated.**

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<sup>7</sup> Enabling environment accreditation is awarded by the Royal College of Psychiatrists to establishments which demonstrate they are achieving an outstanding level of best practice in creating and sustaining a positive and effective social environment.

## Substance misuse

### Expected outcomes:

**Children and young people with drug and/or alcohol problems are identified at reception and receive effective treatment and support throughout their stay in custody.**

- I.87** Clinical services were delivered by Care UK and integrated psychosocial and mental health services by Inclusion, part of the South Staffordshire and Shropshire NHS Foundation Trust.
- I.88** The integration of substance use and mental health services was initiated in April 2016 at Werrington, the first young offender institution to deliver the model. This was a very promising development.
- I.89** The highly skilled, multidisciplinary team comprised a range of mental health professionals, substance use specialists, a learning disability nurse and a creative therapist. Case management responsibility was allocated according to each boy's needs as identified by the comprehensive health assessment tool (CHAT).
- I.90** Holistic, age-appropriate and targeted interventions addressed many of the precursors to and results of substance use. This contrasted with previous substance use interventions which focused on raising the awareness of all boys, regardless of their learning ability.
- I.91** We observed the team reflecting the physical and emotional needs of boys to deliver targeted interventions. These included low self-esteem, learning and communication difficulties, post-traumatic stress disorder, attention deficit hyperactivity disorder and anger. The aim of the model was to address these needs while also addressing mental health conditions and substance use.
- I.92** The integrated team had a caseload of 79 boys (65% of the population). Boys we spoke to said they found the interventions very helpful in gaining an insight into the attraction of drugs and alcohol. Others said that there was less stigma associated with seeing the Inclusion team rather than a 'mental health nurse'.
- I.93** The establishment was equipped to deliver clinical opiate substitution therapy, but the demand for it was extremely low. Only one boy had received such treatment during the previous 12 months.



## Section 2. Respect

### Residential units

#### Expected outcomes:

**Children and young people live in a safe, clean and decent environment which is in a good state of repair and suitable for adolescents.**

- 2.1 The design and layout of the wings hindered effective practice. The prison had three wings across two units, Doulton and Denby. Most accommodation was on Doulton, which was split into two wings A and B. Both shared a central gate and exit point. If a boy was in conflict with another boy, it was difficult to separate or relocate them. Staff had to introduce a more restricted regime because of the constant difficulty of minimising contact by physical separation when moving boys around the prison.
- 2.2 The standard of accommodation was adequate and a programme of renewing the showers was in progress. Boys were no longer locked in showers together and now showered separately. Access to showers was limited.
- 2.3 Cells and communal areas were kept reasonably clean, with little graffiti. All cells had in-cell sanitation. Boys usually had access to cleaning materials to keep their cells clean and had been encouraged to take responsibility for this through the weekly cell inspection programme. Boys could earn merits and the cell of the week award.
- 2.4 Some communal areas were sparse, including the communal rooms. The kitchen and B wing youth clubs were well used, but lacked basic equipment.
- 2.5 All telephones were in working order and protected by privacy hoods, but access was a source of frustration for boys and staff. Our survey showed that 52% of boys were able to use the telephone every day against the comparator of 80%.
- 2.6 We observed particular problems with using the telephones on the exercise yards and boys complained about access to phones in the youth clubs. There was only one telephone in both these areas and demand was great. We saw one boy, who had been involved in a fight that day, becoming increasingly anxious while waiting to use the phone on the exercise yard. When it started to rain, he became obstructive and aggressive because he wanted to wait for his turn on the phone. Following skilful negotiation by a member of staff, he went inside and into his cell without incident.
- 2.7 Post was administered efficiently, and checks were made to ensure that legal confidential mail was treated appropriately.
- 2.8 The rules were not always prominently displayed on the units. Some posters were not written in age-appropriate language, including some that referred to prison service orders and instructions rather than explaining children's rights.
- 2.9 We examined records of the response to cell call bells which showed that they were quickly responded to.
- 2.10 The management of applications had improved since the last inspection and managers tracked response times. In our survey, 71% of boys said it was easy to make an application compared with 52% at the last inspection.

## Recommendations

- 2.11** Consideration should be given to improving the design of the wings to enable effective separation and access to a full regime.
- 2.12** All boys should be able to access a daily shower and telephone call.

## Relationships between staff and children and young people

### Expected outcomes:

**Children and young people are treated with care and fairness by all staff, and are expected, encouraged and enabled to take responsibility for their own actions and decisions. Staff set clear and fair boundaries. Staff have high expectations of all children and young people and help them to achieve their potential.**

- 2.13** Most of the relationships that we observed between staff and boys were positive and polite. More frequent consultation took place with boys which brought about change. We observed attempts to develop trust based on a good understanding of individual boys' needs. However, this was sometimes undermined by the actions of a few staff and in our survey too few boys said that staff treated them with respect.
- 2.14** We heard much less shouting from staff than at the last inspection and infrequent swearing. Most staff provided a positive role model for the boys.
- 2.15** We observed some low-level poor behaviour and swearing from boys which was not always challenged by staff, leaving boys with inconsistent messages about what was appropriate and acceptable behaviour.
- 2.16** In our survey, 49% of boys said they had met their personal officer in their first week against 21% at the last inspection. The custody support plan was being piloted, but the benefits of this had not yet been realised, in part because of staff shortages. Staff and boys were confused about the roles of the custody support plan officer and the personal officer, and neither scheme was applied consistently. We found some good examples of support to boys but these were intermittent.
- 2.17** Staff rarely wore name badges and some boys did not know who was working with them.

## Equality and diversity

### Expected outcomes:

**The establishment demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no child or young person is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The diverse needs of each young person are recognised and addressed: these include, but are not restricted to, race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues and sexual orientation.**

### Strategic management

- 2.18** The strategic management of equality had improved since the last inspection, although further improvement was needed. The equality policy had been reviewed in August 2016, but parts of it, for example the use of protected characteristic leads, were not being adhered to. A new equality officer had been appointed in summer 2016 and had initially focused on the management of discrimination incident report forms (DIRFs), appointment of diversity representatives, a review and update of the diversity action plan and completion of equality impact assessments. The equality officer had been redeployed to generic duties on occasions, but less frequently than we often find.
- 2.19** Diversity and equality action team (DEAT) meetings took place monthly, chaired by a senior manager. Since November 2016 boys' representatives had been included. Attendance by some senior managers was poor, a significant weakness as each was the lead for a protected characteristic. As a result, minority groups were not discussed in detail at DEAT meetings. The prison had started to produce monthly equality data to inform discussion at DEAT meetings and there was some evidence that areas requiring further discussion or investigation were identified from the data.
- 2.20** During the previous six months, 34 DIRFs had been submitted which was considerably less than the previous inspection. Most DIRFs concerned race and many involved use of racist language. Kinetic Youth had recently developed an equality and diversity intervention. Investigations into complaints were adequate and quality assurance by protected characteristic leads had led to further investigation in some cases when the initial response had not been adequate. There was no external quality assurance, although all DIRFs were reviewed at DEAT meetings. There was a clear procedure for monitoring the progress of each DIRF and issues with the timeliness of responses had been addressed.
- 2.21** There were five equality representatives, although release and transfer meant that most were new to the role. They were prepared for their role by Kinetic Youth who advised boys on equality issues and represented their views at meetings with the equality officer and at DEAT meetings. They checked that blank DIRF forms were available on units and had recently helped a boy to complete a DIRF. Work was continuing to upgrade the establishment's accreditation in Investors in Diversity but there was no consistent consultation with boys from protected characteristic groups, which was a weakness. Support for diversity from the education department was good and notable events were celebrated throughout the year. A wheelchair basketball game had been popular with boys, and a recent event 'Lessons in Hate' with three external speakers had been well received.

## Diverse needs

- 2.22** Staff in reception identified the protected characteristics of new arrivals and shared this information with the equality officer.
- 2.23** Just under half the population were from a black or minority ethnic background and their responses in our survey were broadly similar to white boys. However, they responded more negatively on having had a say in what would happen to them when they were released. The reasons for this were unclear, and there was no regular consultation with boys to explore such issues. In the establishment's bullying survey, more boys reported being called names about their race or colour than for any other reason. This required further investigation.
- 2.24** Six boys identified themselves as Gypsy, Romany or Traveller in our survey, and four were known to the equality officer. A meeting had taken place with them in January 2017 when no specific issues had been raised.
- 2.25** A quarter of the population were recorded as Muslim. Their responses in our survey were similar to boys of other, or no, faith with two exceptions. Muslim boys responded more positively about their religious beliefs being respected and more negatively about the canteen selling a wide enough range of items.
- 2.26** Fourteen boys had been identified as foreign nationals. Case workers provided them with support but independent legal advice about their immigration status was not readily available. Records that we examined demonstrated efforts by case workers to involve boys' youth offending teams and social workers in finding funding for the legal support they needed. The case work team was aware of the potential for foreign national boys to have been victims of trafficking but had not needed to refer any cases since the last inspection. Home Office immigration staff held regular surgeries and good records of these were maintained by case workers. Telephone interpreting was advertised on posters, although we were told it had not been required for several months. There was no senior manager protected characteristic lead for nationality. This was a missed opportunity to discuss this group regularly at DEAT meetings and to include it in the strategic management framework for diversity.
- 2.27** Forty-six boys had been identified by the establishment or had self identified as having learning difficulties. Werrington had achieved dyslexia friendly accreditation. The support provided for special educational needs remained very good and there was evidence of best practice in working with these boys being shared with other departments. Residential officers were aware of boys with medical or other needs who might require additional support. Staff were aware of personal emergency evacuation plans but there was none in place at the time of the inspection.
- 2.28** Few boys identified themselves as gay or bisexual. Support was available from the safeguarding team and there were some positive images of gay people around the prison. We heard fewer homophobic comments than is often the case in young offender institutions.

## Faith and religious activity

### Expected outcomes:

**All children and young people are able to practise their religion. The chaplaincy plays a full part in establishment life and contributes to young people's overall care, support and resettlement.**

- 2.29** Faith provision including pastoral support remained very good. In our survey, 85% of Muslim boys said their religious beliefs were respected. All faiths were catered for and the chapel facilities were good. One full-time Muslim chaplain and a team of part-time and sessional chaplains completed all daily duties, including visiting new arrivals and boys nearing release, participating in ACCT<sup>8</sup> and good order or discipline reviews and attending key prison meetings. A managing chaplain was being recruited.
- 2.30** Friday prayers, a Catholic mass on Saturday and an Anglican service on Sunday ran weekly. Boys still did not have to apply to attend corporate worship and attendance was good. A wide range of faith-based classes took place each week in the chapel. Awareness raising sessions on different faiths were delivered in education and all new staff received a session during their induction. Reflex, a community faith-based organisation, provided additional courses including 'Managing my emotions' and individual mentoring. All major religious festivals were celebrated. Reflex and individual chaplains provided information and contacts for boys to help them continue to practise their faith after release.

## Complaints

### Expected outcomes:

**Effective complaints procedures are in place for children and young people, which are easy to access and use and provide timely responses. Children and young people are provided with the help they need to make a complaint. Children and young people feel safe from repercussions when using these procedures and are aware of an appeal procedure.**

- 2.31** In our survey only 51% of boys said it was easy to make a complaint. However, we found complaint forms and information were easily accessible on all wings. An administrative officer emptied the locked complaint boxes each day. Barnardo's advocates helped boys to pursue complaints when required. It was positive that the number of children who said they had ever felt too scared to make a complaint had fallen to 6% compared to 22% at the previous inspection. During the six months to January 2017, 176 complaints had been received, 20% of which had been upheld. The most common themes for complaint were staff, residential issues and property.
- 2.32** Senior staff answered complaints and analysis of trends and patterns remained good. Boys continued to be seen individually to discuss their complaint before receiving a written response, which remained good practice. Written responses were courteous and most were timely and focused. Quality assurance procedures were robust: at least 10% of complaints were checked by the head of business services and all were cross-checked by safeguarding and a social worker to ensure that no child protection or safeguarding issues had been missed.

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<sup>8</sup> Assessment, care in custody and teamwork case management of boys at risk of suicide or self-harm.

## Good practice

- 2.33** Respondents to complaints met boys to discuss the complaint and explain the planned outcome. This contributed to more effective communication. The safeguarding team and social worker reinforced effective quality assurance and enhanced safety in the prison.

## Legal rights

### Expected outcomes:

**Children and young people are supported by the establishment staff to exercise their legal rights freely.**

- 2.34** A comprehensive legal services policy covered key responsibilities and available support.
- 2.35** Questionnaires were completed during induction to identify the legal status of boys, whether they were appealing against their sentence or needed advice about legal representation. Case workers were responsible for making support available and could facilitate calls to legal representatives. Leaflets were available on the Criminal Cases Review Commission.
- 2.36** Bail applications and other legal rights issues were incorporated into remand planning meetings with youth offending officers. Licence conditions were also discussed at release planning meetings.
- 2.37** Legal visits usually took place in the main visits hall, although four private rooms were available.

## Health services

### Expected outcomes:

**Children and young people are cared for by a health service that assesses and meets their health needs while in custody and which promotes continuity of health and social care on release. The standard of health service provided is equivalent to that which children and young people could expect to receive elsewhere in the community.**

- 2.38** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)<sup>9</sup> and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. The CQC found there were no breaches of the relevant regulations.

## Governance arrangements

- 2.39** NHS England had commissioned Care UK Limited to provide health services from April 2016. A range of sub-contracts included South Staffordshire and Shropshire NHS Foundation Trust (SSSFT) which provided an integrated mental health and psychosocial substance misuse service.
- 2.40** The Care UK strategic governance structures were embedded and clinical governance meetings were well attended. Local delivery board meetings to be held every two months

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<sup>9</sup> CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

had started in September 2016. They covered a range of joint working and operational areas. Working relationships between health providers and the establishment were very good and developing further with a new commissioner in post. A health needs assessment carried out in 2015 informed service delivery and plans were in place for a new assessment later in 2017.

- 2.41** In our survey, 63% of boys who had used health services said the overall quality was good. Boys we spoke to were very satisfied with the quality of health provision.
- 2.42** Health staff attended the youth council and residential meetings and carried out patient surveys to obtain feedback from the boys. Lessons learnt from clinical incidents and feedback from regular infection control audits were shared at monthly staff meetings.
- 2.43** Health services were well led and the team provided responsive and child-focused care. Interactions that we observed were undertaken in a caring and nurturing manner.
- 2.44** Health staff were familiar with their safeguarding responsibilities and received appropriate safeguarding training. Consent to share medical information and the capacity to consent to treatment were routinely sought.
- 2.45** Health staff said they were well supported, although clinical supervision was not yet fully embedded in the primary care team. Mandatory training was well managed and professional development opportunities were excellent.
- 2.46** The small health care centre was clean and used efficiently. A range of eye-catching health promotion information was displayed in the bright waiting area. Clinical rooms complied with infection control requirements. Some services, including mental health and substance use, were delivered to boys on the wings. Access was sometimes hindered by unlock issues and attendance at other activities, but the team was flexible and worked around this.
- 2.47** There was a comprehensive range of policies, including on communicable diseases. Electronic clinical records that we sampled on SystmOne were good with clear progress notes and care plans.
- 2.48** No concerns or complaints had been submitted since the start of the Care UK contract. Health care complaint forms were accessible on residential units, but it was not clear how boys could submit them to health care in confidence. This was being addressed as a matter of urgency.
- 2.49** Appropriate emergency equipment was strategically sited and regularly checked. There was 24-hour nursing cover and health staff attended all emergencies. Arrangements were in place to ensure that first aid trained operational staff were on each shift. An ambulance was called promptly in an emergency.
- 2.50** Health staff attended the prison-wide health promotion action group and a health fair was held each year. Werrington was a smoke-free establishment, but only sentenced boys were offered nicotine replacement patches and not on the first night.
- 2.51** There was appropriate emphasis on continuity of age-appropriate immunisation and vaccination cover as well as blood-borne virus protection. However, there had been a delay in boys receiving the MenACWY vaccination for the five main groups of meningococcal bacteria, because of difficulties in obtaining the vaccine. This had been resolved and plans were in place to reduce the waiting list. Sexual health screening and treatment were offered and barrier protection was discussed and available from nurses. Telemedicine was in place but had not yet been used.

## Recommendations

- 2.52** The confidential health care complaints system should be well advertised and easily accessible to all boys.
- 2.53** All boys should have timely access to smoking cessation help and support.

## Delivery of care (physical health)

- 2.54** The dedicated health care room in reception provided a positive environment. Boys were assessed on arrival for immediate health needs by a registered nurse. They received a leaflet about health services, which was in a suitable format. Subsequent health screening, including physical health, mental health and neurodisability, was completed within the recommended timescales by skilful and experienced staff. Appropriate referrals were made.
- 2.55** Boys requested health services through pictorial applications which were collected each day. All movements to health care depended on the availability of escorting officers. This had occasionally delayed services, although dedicated officers had recently been allocated.
- 2.56** Health care and prison staff told us that the centralisation of medication administration had reduced the opportunities for boys to speak to nurses informally on the wings. This had also been identified as a concern by the youth council forum and ways to improve this were being explored.
- 2.57** GP clinics ran on Monday, Wednesday and Friday and routine appointments were made within two working days, which was good. An out-of-hours GP service was available for urgent appointments or they were facilitated on the day depending on clinical need.
- 2.58** An appropriate range of primary care services included access to an optician, podiatry and physiotherapy. Clinics were delivered with no undue delay. An appropriately trained lead nurse held a small caseload of boys with asthma. The few other boys with long-term conditions were managed by the GP and referred for specialist support where required.
- 2.59** Referrals to external hospital appointments occurred promptly and the process was well managed. Two boys could attend hospital appointments every day and these were rarely cancelled by the establishment. The few appointments that were cancelled were discussed at governance meetings.

## Pharmacy

- 2.60** Medicines were supplied promptly by Lloyd's pharmacy. They were stored appropriately and regular stock checks were made. Appropriate emergency stock was available.
- 2.61** Prescribing levels were low and age appropriate. Arrangements for the collection and administration of medicines were confidential and safe and undertaken in a helpful manner. Medicines were administered twice a day at appropriate times and boys on more frequent doses received them as required.
- 2.62** The in-possession policy allowed some boys to take appropriate responsibility for their medication, such as acne medication, inhalers and ointments, following a risk assessment. In-possession medication risk assessments continued to be completed each time medicines were re-prescribed.

- 2.63** A pharmacist visited the prison each month to attend the quality improvement and assurance meetings. Prescribing data were analysed and any medicine management incident was discussed. Boys could see the pharmacist for advice on request or referral from health care staff, although this had not been taken up.
- 2.64** An appropriate range of patient group directions<sup>10</sup> (PGDs) allowed nurses to administer specific medications without an individual prescription. However, the PGD for hepatitis B had expired and the GP had to prescribe this until it was renewed. There was a good range of medication for treating minor ailments which was appropriately recorded on SystemOne.

## Dentistry

- 2.65** Time for Teeth Limited provided a full range of NHS-equivalent services, including good oral health promotion. Boys had access to external orthodontic treatment when necessary. Dental screening was offered and booked promptly during induction. The average wait for routine appointments was under two weeks and no boys were on the waiting list at the time of the inspection. The dental team was flexible and worked around delays in boys arriving and saw additional boys if required.
- 2.66** Two dental sessions were delivered every two weeks by a dentist and dental nurse. Urgent dental care was prioritised. The primary care team dealt with any dental concerns between sessions and arranged community dental care if required.
- 2.67** The dental suite was modern and spacious. It met current infection control standards and had a separate decontamination room. Dental equipment was well maintained and serviced regularly. Dental waste was disposed of appropriately.

## Delivery of care (mental health)

- 2.68** Since April 2016, a new service model had been implemented by SSSFT to provide an integrated mental health and psychosocial substance misuse service called Inclusion. The emphasis was on providing a stepped model of care with a child and adolescent mental health service (CAMHS) focus to meet the needs of this age group. Managers and team members had worked hard to implement this change and we found that a good level of care was being provided by a skilled workforce.
- 2.69** The multidisciplinary team included a consultant forensic psychiatrist who delivered two sessions a month, clinical psychologist, a creative therapist, mental health nurses, a learning disability nurse and two psychosocial workers who had received additional mental health training. A speech and language therapist post was being advertised and a band 5 nurse was awaiting clearance.
- 2.70** There were established links with the Trust's wider mental health resources, including the senior nurse from the specialist CAMHS team who attended one day a week to provide staff supervision and support service development.
- 2.71** Mental health needs were identified during reception screening through the well embedded CHAT (comprehensive health assessment tool) and an open referral system. The range of treatments included increased access to psychological interventions, guided self help and

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<sup>10</sup> Authorise appropriate health care professionals to supply and administer prescription-only medicine.

individual brief solution therapy. Inclusion were seeing 27 boys with mental health conditions and there was a substance misuse caseload of 66, with 14 shared cases.

- 2.72** The team met the case workers regularly and attended the weekly multi-agency safeguarding and health meeting. ACCT reviews were attended for boys on their caseload and the physical health team attended other reviews. Not all first case reviews were multidisciplinary and this needed to be addressed (see recommendation 1.26).
- 2.73** All operational staff had completed training modules on emotional and mental wellbeing and 31% had completed CAMHS specific training developed by SSSFT. This was commendable.
- 2.74** During the six months from September 2016, there had been one transfer under the Mental Health Act to the regional forensic children and adolescent medium secure unit. This had taken place within the specified transfer timescales.

## Good practice

- 2.75** *Operational staff received a good level of specific age-related mental health awareness training. This helped to promote awareness of common mental health issues experienced by this age group and to make an effective response.*

## Catering

### Expected outcomes:

**Children and young people are offered varied meals to meet their individual requirements and food is prepared and served according to religious, cultural and prevailing food safety and hygiene regulations.**

- 2.76** The national young people's estate menu was in use and, although boys' perception of the food was poor, we found that portion size and quality were reasonable. The menu provided a daily choice of meals, including healthy options. The religious and dietary needs of boys were met.
- 2.77** Kitchens and serveries were cleaned to a high standard.
- 2.78** The chaotic serving of main meals witnessed at the last inspection had improved. Meal times were now calm, safe and well managed. Most boys were able to collect their meal from the serveries, but were not able to eat out of their cells each night because of the layout of the units and the need to keep some boys apart. They had the option to eat out together every other night, but few chose to do so. There were never more than 10 boys eating in the main area of the wing and many more chose to eat in their cells.
- 2.79** Effective consultation with boys had led to positive changes and they could now have a cooked breakfast at weekends. This provided a welcome change from the breakfast packs.

## Purchases

### Expected outcomes:

**Children and young people can purchase a suitable range of goods at reasonable prices to meet their diverse needs, and can do so safely.**

- 2.80** The canteen list met the needs of the boys. It was regularly reviewed and consultation with boys had led to changes in the range of products available. A weekly ordering system was in place and ordered goods arrived quickly. Boys new to the establishment received a pack of basic items and could order items during their first week.
- 2.81** Orders could be made from a catalogue.



## Section 3. Purposeful activity

### Time out of cell

#### Expected outcomes:

**Children and young people spend most of their time out of their cell, engaged in activities such as education, leisure and cultural pursuits, seven days a week.<sup>11</sup>**

- 3.1** The published core day allowed boys access to up to 12 hours out of cell during the week and 7.5 hours at weekends. Local data indicated an average of 7.65 hours out of cell for all boys on weekdays. We found that boys on the silver or gold regime with no keep apart issues had no more than 11 hours out of the cell during the week. For boys on the bronze regime this could be as little as five hours.
- 3.2** In our survey, 71% of boys said they could have association every day against the comparator of 52% and 46% at the previous inspection. There were scheduled open air exercise periods within the regime, but only 59% of boys said that they could access exercise each day.
- 3.3** During our roll checks we found 18% of boys locked up during core activity time. While this did not meet our expectations, it remained better than comparable establishments. Staff knew why boys did not attend aspects of the regime but this high percentage placed continued pressure on outreach work (see paragraph 3.6).

#### Recommendation

- 3.4 All boys should have access to 10 hours out of cell each day.** (Repeated recommendation 3.5)

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<sup>11</sup> Time out of cell, in addition to formal 'purposeful activity', includes any time children and young people are out of their cells to associate or use communal facilities to take showers or make telephone calls.

## Education, learning and skills

### Expected outcomes:

**All children and young people engage well in education, learning and skills that enable them to gain confidence and experience success. Expectations of children and young people are high. Children and young people are encouraged and enabled to make progress in their learning and their personal and social development to increase their employability and help them to be successful learners on their return to the wider community. Education, learning and skills are of high quality, provide sufficient challenge to children and young people and enable them to gain meaningful qualifications.**

**3.5** Ofsted<sup>12</sup> made the following assessments about the learning and skills and work provision:

**Overall effectiveness of learning and skills and work: Good**

*Outcomes for children and young people engaged in learning and skills and work activities: Good*

*Quality of learning and skills and work activities, including the quality of teaching, training, learning and assessment: Good*

*Personal development and behaviour: Good*

*Effectiveness of leadership and management of learning and skills and work activities: Good*

### Management of education and learning and skills

**3.6** Partnership working across the prison was good. Prison staff and the education provider Novus (part of The Manchester College) and Kinetic Youth (subcontracted by Novus), worked closely together to develop a suitable programme of education and skills. The requirement for boys to undertake 27 hours of education and three hours of PE a week was well planned and implemented. A well-balanced curriculum used planned learning pathways which boys selected from a wide range of topics. Kinetic Youth engaged well with boys to provide outreach courses on the wings. Coordination with the library and the PE department was effective. The education and vocational training provided by Novus was good.

**3.7** Staff turnover had been high, partly due to the challenging behaviour of some boys and the Novus performance management standards to provide good teaching and learning. Good standards of teaching and learning had been maintained by the development of staff performance. A decrease in the contracted number of boys at the prison meant that class cancellations were rare.

<sup>12</sup> Inspection of the provision of education and educational standards, as well as vocational training in YOIs for young people, is undertaken by the Office for Standards in Education Children's Services and Skills (Ofsted) working under the general direction of HM Inspectorate of Prisons. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.

- 3.8** Incentives were used well to reward good behaviour using a system of merits that could be exchanged for additional privileges such as PE or food treats from the 'merits shop' which had been set up to support the scheme (see paragraph 1.36). The focus was on encouraging good behaviour rather than punishing poor behaviour. Boys valued the merits and were careful not to lose them by behaving inappropriately.
- 3.9** The focus on inclusion across the prison was very effective. A very good strategy catered well for the high number of boys with special educational needs or behavioural and/or complex personal issues. Dedicated engagement and resettlement staff ensured that these boys were supported early in their sentence. A weekly register of boys' needs was circulated to staff across the prison to alert them to an individual's particular characteristics and suggested strategies to support and manage them.
- 3.10** Equality, diversity and British values were promoted very effectively across the learning and skills provision. Various topics, such as Black History Week, were regularly explored in lessons to enhance knowledge and understanding. Posters and leaflets were used well to explain and promote British values in classrooms and on practical courses.
- 3.11** Staff involved boys well in community projects such as the local scarecrow competition and the Queen's birthday, or Remembrance events such as the annual poppy appeal. This helped to broaden their curriculum and improve their social awareness. Boys took pride in making appropriate items for display in the community.
- 3.12** The impact of interruptions to learning caused by scheduled appointments and lapses in behaviour was effectively managed and minimised. Appointments, such as social visits, were restricted to specific times to minimise interruptions. Boys were collected from the wings and taken to education for each class attended and a similar process was used to return them, preventing bullying incidents en route. It took extra time to complete these movements, delaying the start of some lessons and bringing forward the end of lessons.
- 3.13** Self-assessment provided a thorough, evaluative and largely accurate view of all aspects of education and skills provision and included the views of boys and staff. Plans to improve the provision were appropriate, thoroughly reviewed and updated at quality improvement group meetings.

## Recommendation

- 3.14 The punctuality of boys arriving at and leaving education and training courses should be improved.**

## Provision of activities

- 3.15** The provision of activities was well planned to meet educational needs. A range of education, vocational and work-experience programmes known as pathways was provided from entry level 1 to level 2. Education programmes consisted of preparing to learn, art, skills building, music, radio, independent living, citizenship, personal wellbeing and personal effectiveness courses. Vocational training courses were delivered in Barista, cleaning, laundry, multi-skills and sports.
- 3.16** All pathways included a core of mathematics, information communication technology (ICT) and English, together with PE and sessions to develop boys' personal and work skills. There were enough places to meet the needs of all boys and the pathways offered a main topic

choice such as art, vocational training or music. Demand for places on vocational courses was high and exceeded the number of available places.

- 3.17** Outreach support work in the residential units provided a very effective short-term alternative for boys unable to participate fully in education and skills. Reviews of each boy receiving outreach were regular and thorough and ensured that boys joined or returned to pathway provision in a timely manner.
- 3.18** Multidisciplinary teams worked very effectively to allocate boys to education and skills. Staff used their knowledge and experience very well to make appropriate allocation decisions with a strong focus on boys' safety and the safety of others.
- 3.19** Short units with qualifications were provided for boys whose period at the establishment was brief. The development of English and mathematics in vocational areas was embedded into the programme.
- 3.20** Work-experience pathways such as cleaning and laundry acted as a useful stepping stone for a few boys to encourage them to join education or vocational training. Arrangements were in place to accredit the skills they acquired and to provide core subjects, apart from in laundry work. Although mathematics and English functional skills were available, the core curriculum was not covered in laundry work.
- 3.21** The training facilities and toilets in the multi-skills workshop were of a poor standard. There were not enough chairs for all boys to be seated during teaching sessions. A planned refurbishment had yet to be completed.

## Recommendations

- 3.22** **The curriculum should be fully covered in work experience pathways and skills accreditation should be available for boys working in the laundry.**
- 3.23** **Sufficient vocational training places should be available to meet demand.**
- 3.24** **The prison should complete the refurbishment of the multi-skills workshop and toilets, and appropriate seating should be provided for all boys during teaching sessions.**

## Quality of provision

- 3.25** Boys received an adequate induction to education, learning and skills provision. They participated well and were encouraged to ask questions to improve their understanding of what would happen to them while in the prison. A wide range of information was discussed to allow boys to identify the staff who could help them. Boys received an appropriate assessment of their English, mathematics and ICT skill levels. Timely information, advice and guidance were provided to boys about their next steps in training, education and employment.
- 3.26** Teaching, learning and assessment were good. Most boys participated in engaging and interesting lessons underpinned by the teachers' good planning. Activities were well designed to address multiple and complex needs. Boys undertook individual learning tasks which improved their confidence to participate in further learning. The quality of outreach courses on the wings was good for boys who did not attend formal education classes and they engaged well.

- 3.27** Teachers made effective use of small group, individual and project work to help boys develop their interpersonal skills. For example, in a music class a boy wrote and produced a radio advertisement. He presented his work to the class and successfully improved the sound quality using the feedback that he received.
- 3.28** Additional support arrangements were very effective. Teachers and learning support practitioners (LSPs) used their understanding of individual boys' needs to remove barriers to learning. Boys with dyslexia were particularly well supported to achieve their potential. LSPs provided support in class to help boys progress. However, in a few cases the teacher had not clearly defined and managed the LSP's intervention and it was less effective. Boys greatly benefited from supervised, reflective periods to address inappropriate behaviour and facilitate their re-integration into classroom sessions. A few boys provided useful informal mentoring to their peers.
- 3.29** Teachers ensured that boys developed the English and mathematics skills needed to progress in their chosen pathway. The rate at which most boys improved their speaking and listening skills was good and helped them participate more effectively in class. For example, boys undertaking a functional mathematics task successfully worked together to ensure they gained a better understanding of applying statistical measures.
- 3.30** Teachers and LSPs provided boys with verbal encouragement and written feedback to help them improve their skills. However, in a few cases, targets were imprecise or too brief to promote their achievement. Personal targets, for example to address the use of inappropriate language or behaviour, were not routinely set and monitored.
- 3.31** The standard of vocational amenities for Barista training was good. This contributed to the high standards observed in the production of food and beverages. Good, individual coaching helped the boys to apply their theory studies well to a wide range of commercially realistic situations.

## Recommendations

- 3.32** **Teachers should manage closely the work of learning support practitioners to ensure that boys are fully supported.**
- 3.33** **All boys should benefit from effective target setting which improves their behaviour and educational attainment.**

## Personal development and behaviour

- 3.34** Boys participated in a broad range of enrichment activities which developed their personal and social skills. For example, during anti-bullying week, boys produced a video using a range of curriculum areas. The topic was effectively referred to during subsequent class work and enhanced boys' understanding of the impact of bullying on the victim and perpetrator. Boys gained a good appreciation of British values through participation in national events, including making and selling poppies for Remembrance Sunday commemorations.
- 3.35** Kinetic Youth workers delivered sessions in which boys made strides in developing their personal skills, including team working. They quickly learnt to value each other's views and experiences. For example, discussions on gambling enabled them to acquire a more realistic appreciation of the impact of placing bets.

- 3.36** Most boys developed a positive attitude to learning which helped to raise their self-esteem and motivation. They showed respect for each other and their teachers. Boys enjoyed attending classes and developing new skills which contributed to the progress made by most learners. For example, boys working in the laundry and residential wings developed a good work ethic and responsible attitude to completing their tasks.
- 3.37** A young people's council provided an opportunity for boys to comment on courses and any other concerns they had. Wing representatives met senior managers regularly to discuss areas of importance to them and the establishment, particularly safety, bullying and violence, and diversity. Minutes were taken of the meetings and feedback was shared with boys on the wings.
- 3.38** Behaviour in a few classes needed improvement. On a few occasions, teachers did not consistently apply the strategies designed to improve classroom behaviour. Inexperienced teachers used the removal of earned privileges awards as punishment for poor behaviour, but not always in a timely and consistent manner. Punctuality was erratic because of the demands of the regime. Interruptions to classes were minimised.

## Recommendation

- 3.39 Teachers should apply the removal of boys' earned privileges merits consistently to ensure that behaviour in all classes is of a high standard.**

## Education and vocational achievements

- 3.40** Success rates for qualifications in most courses were high. Short unitised qualifications motivated boys to continue with courses and gave boys with a short sentence the opportunity to achieve positive outcomes. A few courses had low qualification success rates, although fewer boys attended and one or two failures affected achievement percentages significantly.
- 3.41** Most boys made expected or better progress from their starting points. In the work experience pathway, they developed practical skills which enabled them to work independently. Boys undertaking Barista training exhibited a very high standard of customer care skills and safe use of beverage and cooking implements which enhanced their employability. Art was generally of an acceptable or good standard and artwork of an exceptionally high standard had been recognised through national awards. Boys developed appropriate independent living skills, for example using recipes which promoted healthy living.
- 3.42** Teachers used feedback and progress reviews appropriately to monitor boys' progress. However, they did not exploit the results of initial assessments consistently enough to identify boys who could make better than expected progress. The more able boys were not always challenged or stretched adequately.

## Recommendations

- 3.43 Success rates in qualifications should be improved in a few courses so that they are consistently high on all courses.**
- 3.44 All boys should have sufficiently demanding learning experiences to achieve their full potential.**

## Library

- 3.45** Staffordshire County Council delivered the library service, which they managed effectively. A part-time librarian, supervisor and two part-time library assistants staffed the library. It was well maintained and provided a welcoming and spacious environment for users.
- 3.46** All boys received an appropriate induction before using the library. Access was good with a high proportion of boys regularly borrowing items. The rate of cancellation of library sessions was particularly low. Prisoners in the segregation unit had access to an adequate range of resources on request.
- 3.47** The library was well stocked and used the inter-library loan scheme appropriately to meet the needs of the population. A good range of reference and easy-read books, novels with pictures and foreign language texts were available. An adequate range of newspapers and magazines were offered. Resources supported education courses effectively and included texts for boys to enhance their knowledge beyond the limits of taught sessions. The rate of book losses was very low.
- 3.48** Two computers provided learning material and games of interest to the boys, including driving test theory, touch typing, chess and draughts. Library staff promoted the development of reading skills by, for example, participation in the 'Six Book Challenge' and workshops delivered by published authors. A few boys were involved in the 'Story Book Dads'<sup>13</sup> scheme which had restarted.

## Physical education and healthy living

### Expected outcomes:

**All children and young people understand the importance of healthy living, and are encouraged and enabled to participate in and enjoy physical education in safety, regardless of their ability. The programme of activities is inclusive and well planned. It is varied and includes indoor and outdoor activities.**

- 3.49** PE facilities and indoor resources were good. A large sports hall was used for activities such as football, badminton and volley ball. A cardiovascular and weight-training room attached to the sports hall was suitably equipped and well used. An outdoor football pitch was under-used in wet weather because of poor drainage.
- 3.50** Six qualified PE instructors provided boys with good instruction and support. Induction to the facilities was comprehensive. PE staff provided boys with suitable programmes to improve their fitness and health. Links with health care staff were effective and staff promoted health, fitness and healthy living appropriately.
- 3.51** PE and Novus staff delivered and assessed boys for the Duke of Edinburgh bronze award which was popular with boys. The use of free weights was appropriately controlled and balanced with cardiovascular exercise sessions.
- 3.52** Boys following education pathways had good access to PE facilities. Experienced PE staff worked with Novus staff to deliver popular and successful accredited sports studies and level 2 sports leader courses. However, no formal observation of the PE staff who were teaching was carried out to evaluate and improve lessons.

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<sup>13</sup> Project for prisoners to record stories for their children.

- 3.53** A high proportion of boys used the gym regularly and participated in a wide range of recreational PE activities in the evenings and at weekends. PE instructors provided short accredited sports awards and fitness programmes in the gym to motivate and improve the ability of boys.
- 3.54** Participation in the North Staffordshire football leagues allowed boys to engage effectively in competitive sport and develop useful personal and team skills. However, scheduled league games sometimes had to be cancelled in wet weather because of the poor drainage on the football pitch.

### Recommendations

- 3.55** **Observations of teaching by PE staff should be carried out to provide them with quality improvement opportunities and further development.**
- 3.56** **The drainage in the outdoor field should be rectified to ensure that full use is made of the facilities.** (Repeated recommendation 3.49)

## Section 4. Resettlement

### Pre-release and resettlement

#### Expected outcomes:

**Planning for a child or young person's release or transfer starts on their arrival at the establishment. Resettlement underpins the work of the whole establishment, supported by strategic partnerships in the community and informed by assessment of young people's risk and need. Ongoing planning ensures a seamless transition into the community.**

- 4.1** Resettlement was organised strategically through the reducing reoffending function. A comprehensive, up-to-date policy outlined the range of work undertaken, including case management. The needs analysis had not been updated since our last inspection, but it remained relevant to the current population.
- 4.2** Quarterly reducing reoffending meetings were appropriately constituted and well attended from across the establishment. Each area, including pathways, was reviewed and the detailed action plan updated accordingly. Departments worked well together and it was clear that development plans were well understood by functional managers and that developments were appropriately integrated.
- 4.3** Good links had been developed with community youth offending teams (YOTs) and in most cases information sharing was timely and comprehensive. The prison contacted YOTs approximately three months after boys had been released to obtain feedback on outcomes. Response rates were generally good and information received helped to identify what boys had found useful. Case workers often attended initial review meetings in the community after boys had been released.
- 4.4** The case work team consisted of directly employed civilians from a range of backgrounds and former officers. Although some of the officer case workers were redeployed sometimes because of staff shortages, this did not appear to have a detrimental impact on case work. A duty case worker saw all newly arrived boys the day after arrival to discuss their needs and explain how case work was managed. Subsequent allocation primarily reflected caseload numbers. Caseloads averaged about 20 and were manageable. One of the case workers had responsibility for boys from Wales, but there was no other specialism in the department. In our survey, 99% of boys who said they had a training, sentence or remand plan said they had a case worker and 51% said that something had happened to them while at Werrington to make them less likely to offend in the future.
- 4.5** Release on temporary licence (ROTL) continued to be used appropriately, primarily for work experience and town visits. During the previous six months, 18 boys had successfully undertaken 156 ROTL events (compared with 22 boys and 226 events in the six months before that).
- 4.6** Early release and home detention curfew (HDC) arrangements were appropriate. Reviews were timely and decision-making processes appeared fair. Boys were informed of the appeal process for early release. During the previous three months, 27% of boys who had been considered had been successful.

## Training planning and remand management

### Expected outcomes:

**All children and young people have a training or remand management plan which is based on an individual assessment of risk and need. Relevant staff work collaboratively with children and young people and their parents or carers in drawing up and reviewing their plans. The plans are reviewed regularly and implemented throughout and after young people's time in custody to ensure a smooth transition to the community.**

- 4.7** Training planning and remand management meetings were well organised and were usually attended by YOT workers and often by family members. Staff from other departments rarely attended such meetings. Written information was provided inconsistently. Attempts to improve attendance had not succeeded, primarily because of staff shortages. Nevertheless, meetings that we observed were conducted appropriately with good attempts to engage boys in discussion about their behaviour and future plans.
- 4.8** All the cases that we reviewed had a plan, most of which were appropriate. In our survey, 87% of boys who said they had a plan said they had been involved in its development and 98% (compared with 77% at the last inspection) said they understood the targets set. Despite this, many of the targets were too generic, often not varying from one plan to the next. Examples of this included 'achieve gold or silver IEP status', 'keep in contact with my family', or 'actively engage in review meetings'. These targets were appropriate as outcomes, but did not reflect how boys could overcome barriers to achieving them. Case workers clearly had a good knowledge of the boys they were responsible for but did not always understand the underlying behaviour and criminogenic factors leading to their offending.
- 4.9** It was encouraging that quality assurance had been introduced since the last inspection, together with regular case work supervision for all case workers. However, such initiatives focused too much on auditing cases to ensure that documents were completed on time, review meetings took place and boys were seen regularly. Greater emphasis was needed on the quality of work, the focus of engagement and helping boys to achieve. All case workers saw the boys they were responsible for each month outside the formal review meetings. This was again a positive initiative but too often focused on general or practical concerns rather than reinforcing positive behaviour or learning from offending behaviour programmes.
- 4.10** Arrangements for transition to the adult estate for boys approaching their 18th birthday were generally good. Good links had been established with prisons they were most likely to move to (Aylesbury, Deerbolt and Swinfen Hall). There was a good range of information on each of these prisons. A weekly update was circulated of boys due to move in the next six months and case workers took responsibility for the boys on their caseloads.

### Recommendations

- 4.11** Training planning and remand management meetings should include staff who regularly work with boys so that all relevant activity is captured in their remand or training plans.
- 4.12** Training plan targets should focus on criminogenic factors and the behaviours underpinning the offending of boys.
- 4.13** Case worker contact with boys should focus on reinforcing positive behaviour and helping boys to develop the necessary skills to overcome barriers to progress. Quality assurance and supervision of case workers should focus on these issues.

## Public protection

- 4.14** The public protection manual was comprehensive. Initial screening procedures undertaken when boys first arrived were appropriate and information gathered was shared with YOT workers.
- 4.15** The monthly risk management team meeting reviewed a range of cases, including those subject to child protection restrictions and boys with harassment or restraining orders (10 and seven respectively at the time of the inspection). They made decisions about levels of mail and telephone monitoring. All boys due for release under MAPPA (multi-agency public protection arrangements) within the next three months were also reviewed and information updated and shared with YOT workers. The team's work was generally good but its effectiveness in managing risk was undermined by very poor attendance at meetings.
- 4.16** The prison still struggled on occasions to obtain confirmation from YOTs on the MAPPA management level that boys would have on release. In some cases, confirmation was not received in time to implement effective reviews and plans before release.

## Recommendations

- 4.17** **The monthly risk management meeting should be attended by representatives from all key departments and by staff who work with the boys under review.**
- 4.18** **The management level in MAPPA cases should be confirmed six months before the boy's release date, or at the earliest possible date for those serving shorter sentences.** (Repeated recommendation 4.19)

## Indeterminate sentence young people

- 4.19** At the time of the inspection, one boy was serving an indeterminate sentence and two boys on remand were potentially facing an indeterminate sentence. The head of case work was experienced in working with indeterminate sentenced boys and took the lead in the prison. Appropriate training had been scheduled for staff at Werrington and Wetherby YOIs in April 2017.
- 4.20** The prison was not set up to manage indeterminate prisoners, and in most cases these boys did not stay very long. A multi-agency lifer risk assessment panel had recently been convened at Werrington.

## Looked-after children

- 4.21** Werrington had managed 176 looked-after children in the previous 12 months. In our survey, 45% of respondents said they had been in local authority care. Arrangements to identify boys who were looked after and to obtain information were undertaken by one of the two social workers at the prison.
- 4.22** Looked-after children review meetings were undertaken appropriately. In our survey, 59% of boys who said they had a social worker said they had been visited by them since they had been at Werrington and 50% said they had a say in what would happen to them when they were released.

- 4.23** The prison social workers liaised with community social workers and ensured that appropriate levels of contact were maintained with boys. This included ensuring that pocket money was paid.

## Reintegration planning

### Expected outcomes:

**Children and young people's resettlement needs are addressed prior to release. An effective multi-agency response is used to meet the specific needs of each individual young person in order to maximise the likelihood of successful reintegration into the community.**

- 4.24** Release planning meetings usually took place between two weeks and a month before release. Plans for release were discussed and, in some cases, licence conditions were outlined. Plans that we reviewed were comprehensive. In some cases, YOT workers collected boys from the prison on the day of release in the absence of a parent or other responsible adult.
- 4.25** Practical arrangements for the release of boys were reasonable. We were told that stored clothes could be washed before release if required. Basic clothing was provided if boys did not have suitable clothes to leave in.

## Accommodation

- 4.26** In our survey, about a quarter of boys said they thought they would have problems finding accommodation on release and that they knew who to speak to at the prison for help with finding accommodation. YOTs or the responsible local authority took the lead in identifying suitable accommodation and in most cases boys went back to live with their families. In some cases that we reviewed, YOTs worked closely with families to negotiate a return to the family home for boys.
- 4.27** Accommodation was a central feature of all case reviews, especially when finding a suitable place was likely to be a problem. In most cases where local authorities had to find addresses for boys, decisions were made only a few days before release. We saw one example of a boy who was told the day before his release and we were told of two occasions in the previous six months when an address was not secured until the day of release.
- 4.28** Some boys we spoke to were unsettled by not knowing where they were going to live and expressed concern about how they could plan for the future not knowing where they would be. Attempts were made to escalate individual cases, but many staff at Werrington and YOT workers expressed serious concerns about this problem.

## Recommendation

- 4.29 All boys should be provided with a suitable address in good time for their release.**

## Education, training and employment

- 4.30** Processes for planning and monitoring education, training and employment in the prison and on release or transfer were effective and supportive. Personal learning and skills plans identified support needs, learning pathways and resettlement goals. Staff regularly reviewed and updated the learning and skills plans and provided good information, advice and guidance on potential next steps. Pre-release training, such as interview techniques, producing CVs and preparation for further education, training or work, was carried out adequately before release or transfer.
- 4.31** A successful employment and training week, involving guest speakers, employers and training providers working in the prison, had been well received by boys. The week concluded with a well-attended employment fair promoting future options and employment opportunities. The event proved so successful that plans to repeat it were well advanced.
- 4.32** Although use of the 'virtual campus'<sup>14</sup> for resettlement courses had improved since the last inspection, it was not being used well enough for all job search activities.
- 4.33** ROTL was being used for boys to gain work experience, although the numbers were low.

## Recommendations

- 4.34** **The establishment should ensure that all boys are able to use the virtual campus to research employment opportunities.** (Repeated recommendation 4.37)
- 4.35** **The number of boys using ROTL for work experience should be increased.**

## Health care

- 4.36** All boys were seen on transfer or release to identify outstanding health needs. They were offered health promotion advice, including barrier protection, and were given a discharge summary for their GP with relevant health information, including immunisation history. Boys on medication were given a week's supply or a prescription.
- 4.37** Inclusion team members attended final detention and training order (DTO) reviews when release plans were discussed. This was commendable. They also liaised with community child and adolescent mental health services to ensure continuity of care.

## Drugs and alcohol

- 4.38** The Inclusion team had good links with YOTs and other community agencies to arrange support for boys with substance use needs after release.
- 4.39** Inclusion team files showed that boys' release plans were effectively shared at final DTO reviews before release.

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<sup>14</sup> Internet access for prisoners to community education, training and employment opportunities.

## Finance, benefit and debt

- 4.40** About a quarter of boys in our survey said they thought they would have problems with money and finance when they were released. The independent living skills course delivered by the education department incorporated aspects of budget management and financial awareness. Boys could now open bank accounts before release if they were over 18 and the prison operated a savings scheme for any boy who was interested.
- 4.41** Although the prison needs analysis suggested that debt was not a substantial concern, it was disappointing that there was no support available for boys who did have concerns. Boys who had outstanding court fines were not routinely supported to have the fines lodged on arrival at the prison.
- 4.42** Since the last inspection, an intervention to support boys with gambling problems had been developed. Youth workers undertook individual work and a programme of support and guidance was being introduced through GamCare (a national support organisation for those with gambling problems).

## Recommendations

- 4.43 Advice and guidance on debt should be offered to boys.**
- 4.44 The prison should support boys to lodge outstanding court fines where appropriate.**

## Children, families and contact with the outside world

- 4.45** Arrangements for maintaining family contact started during induction. Induction visits for families to meet a range of departments which would be managing boys remained good practice. The Building Bridges course run by the Prison Advice and Care Trust (PACT) at the time of the previous inspection had lapsed following a review of its cost effectiveness, but Storybook Dads and a parenting course were now in place and overseen by the library and PACT.
- 4.46** Monthly family visits supported by PACT were well integrated with regular themed events for families to enjoy together. The visits took place in the Barista with light refreshments provided to offer a more relaxed environment. They were open to all boys regardless of their level of privileges. Work with the Unlock drama group and Geese Theatre had been staged and families invited to watch the productions.
- 4.47** 'Prison voicemail' was now being used, a service for families to leave messages at a small cost. The messages could be received by boys using their prison phone account and they could leave messages in return.
- 4.48** Social visits continued to be offered two hours a day, six days a week and bookings could now be made on line. The visitors' centre was small but welcoming. However, the visits room was not conducive for families, particularly with small children. Light refreshments were available from a small kiosk in the visits room and drinks were available when the kiosk was closed, which was rare. In our survey, 37% of boys said they received one or more visits each week. A few boys were on closed visits at the time of the inspection, but these were reviewed regularly and were only used following incidents related to visits.

## Recommendation

**4.49** The visits hall should be refurbished and made more welcoming for families.

## Attitudes, thinking and behaviour

**4.50** Since the last inspection, a number of accredited programmes had been introduced. The prison now offered JETS (juvenile enhanced thinking skills), STAG (starving the anger gremlin), an anger management programme, and the A2Z motivational programme and one-to-one package. In April 2017 it was planned to start the anger replacement therapy course which was in the process of accreditation for the young people's estate. The range of courses was appropriate to the population.

**4.51** One-to-one work was undertaken by the small team of one senior and three trainee forensic psychologists in the prison. Although case workers had received awareness training on these programmes and attended post-course review meetings, there was no evidence that they routinely incorporated reinforcement of learning from the programmes into their work with boys.

**4.52** Some individual work was undertaken with boys who had been convicted of sexual offences, but there was no strategy for managing this group or working to reduce their risk of reoffending and harm on release.

## Recommendation

**4.53** There should be interventions in place to help boys to address sexually harmful behaviour. (Repeated recommendation 4.50)



## Section 5. Summary of recommendations and good practice

The following is a listing of recommendations and examples of good practice included in this report. The reference numbers at the end of each refer to the paragraph location in the main report.

### Main recommendation To the Youth Justice Board and HMPPS

- 5.1** Work should be undertaken to identify and provide the support needed to help Werrington (and other young offender institutions) to address and reduce the consistently high levels of violence while continuing to deliver a full, constructive regime to the boys in their care. (S42)

### Main recommendation To the governor

- 5.2** All protected characteristic groups should have an identified lead who consults with the group regularly and uses their feedback to inform actions in the diversity action plan. Regular updates on each protected characteristic should be considered by the diversity and equality action team to inform an establishment-wide response to meeting the diverse needs of boys. (S43)

### Recommendations To the Youth Justice Board

- 5.3** The escort contract should be reviewed to ensure that children do not have long delays at court once their case has finished and do not travel in escort vans with adults. (1.3)
- 5.4** All boys should be provided with a suitable address in good time for their release. (4.29)

### Recommendations To the governor

#### Early days in custody

- 5.5** Risk assessment management plans should be regularly reviewed and updated and should accurately reflect the boys' risks to other boys and staff and how to address this on the units. (1.9)

#### Safeguarding

- 5.6** Quarterly and monthly safeguarding meetings should be attended by representatives from all areas of the establishment who work with boys. (1.13)

#### Child protection

- 5.7** All staff should undertake child protection training. (1.16, repeated recommendation 1.25)

### **Suicide and self-harm protection**

- 5.8** Health staff should consistently attend or contribute to the first ACCT case review. (1.26)
- 5.9** All care maps should include specific time-bound actions which provide enough support to address the identified needs and are regularly reviewed. (1.27)

### **Behaviour management**

- 5.10** Effective oversight of the management of behaviour should instil confidence in managers, staff and boys that all incidents of positive and negative behaviour are managed consistently. (1.33)

### **Security and disciplinary procedures**

- 5.11** Effective tracking of adjourned adjudications should be implemented and overseen by senior managers so that all charges are heard and concluded within a reasonable timescale, particularly referrals to external agencies. (1.56)

### **Bullying and violence reduction**

- 5.12** Entries in bullying reduction plans should be completed by all staff working with a boy to give a comprehensive picture of his behaviour while subject to anti-bullying procedures. (1.63)

### **The use of force**

- 5.13** Pain-inducing techniques should not be used on boys. (1.73, repeated recommendation 1.78)
- 5.14** All incidents involving use of force should be recorded, including audio. (1.74, repeated recommendation 1.79)
- 5.15** All staff should be aware of boys subject to restraint handling plans. They should be familiar with the content of the plans to guide them during incidents. (1.75)

### **Separation/removal from normal location**

- 5.16** Risks and concerns identified when a boy is first segregated should be clearly documented and accessible to all staff. (1.85)
- 5.17** The segregation and review group should ensure that there is sufficient analysis of data to identify any trends and patterns with the boys segregated. (1.86)

### **Residential units**

- 5.18** Consideration should be given to improving the design of the wings to enable effective separation and access to a full regime. (2.11)
- 5.19** All boys should be able to access a daily shower and telephone call. (2.12)

### **Health services**

- 5.20** The confidential health care complaints system should be well advertised and easily accessible to all boys. (2.52)

**5.21** All boys should have timely access to smoking cessation help and support. (2.53)

#### Time out of cell

**5.22** All boys should have access to 10 hours out of cell each day. (3.4, repeated recommendation 3.5)

#### Education, learning and skills

**5.23** The punctuality of boys arriving at and leaving education and training courses should be improved. (3.14)

**5.24** The curriculum should be fully covered in work experience pathways and skills accreditation should be available for boys working in the laundry. (3.22)

**5.25** Sufficient vocational training places should be available to meet demand. (3.23)

**5.26** The prison should complete the refurbishment of the multi-skills workshop and toilets, and appropriate seating should be provided for all boys during teaching sessions. (3.24)

**5.27** Teachers should manage closely the work of learning support practitioners to ensure that boys are fully supported. (3.32)

**5.28** All boys should benefit from effective target setting which improves their behaviour and educational attainment. (3.33)

**5.29** Teachers should apply the removal of boys' earned privileges merits consistently to ensure that behaviour in all classes is of a high standard. (3.39)

**5.30** Success rates in qualifications should be improved in a few courses so that they are consistently high on all courses. (3.43)

**5.31** All boys should have sufficiently demanding learning experiences to achieve their full potential. (3.44)

#### Physical education and healthy living

**5.32** Observations of teaching by PE staff should be carried out to provide them with quality improvement opportunities and further development. (3.55)

**5.33** The drainage in the outdoor field should be rectified to ensure that full use is made of the facilities. (3.56, repeated recommendation 3.49)

#### Training planning and remand management

**5.34** Training planning and remand management meetings should include staff who regularly work with boys so that all relevant activity is captured in their remand or training plans. (4.7)

**5.35** Training plan targets should focus on criminogenic factors and the behaviours underpinning the offending of boys. (4.12)

**5.36** Case worker contact with boys should focus on reinforcing positive behaviour and helping boys to develop the necessary skills to overcome barriers to progress. Quality assurance and supervision of case workers should focus on these issues. (4.13)

- 5.37** The monthly risk management meeting should be attended by representatives from all key departments and by staff who work with the boys under review. (4.15)
- 5.38** The management level in MAPPA cases should be confirmed six months before the boy's release date, or at the earliest possible date for those serving shorter sentences. (4.18, repeated recommendation 4.19)

### Reintegration planning

- 5.39** The establishment should ensure that all boys are able to use the virtual campus to research employment opportunities. (4.34, repeated recommendation 4.37)
- 5.40** The number of boys using ROTL for work experience should be increased. (4.35)
- 5.41** Advice and guidance on debt should be offered to boys. (4.43)
- 5.42** The prison should support boys to lodge outstanding court fines where appropriate. (4.44)
- 5.43** The visits hall should be refurbished and made more welcoming for families. (4.49)
- 5.44** There should be interventions in place to help boys to address sexually harmful behaviour. (4.53, repeated recommendation 4.50)

## Examples of good practice

- 5.45** The use of the merit scheme supplemented by a merit shop to encourage positive behaviour was an intuitive and welcome initiative. (1.40)
- 5.46** The collation, analysis and dissemination of intelligence took place immediately to inform decision making. This was supplemented by effective tracking of intelligence enabling a coordinated approach to reducing the high levels of violence. (1.57)
- 5.47** The introduction of a conflict resolution programme delivered by trained staff was an excellent initiative which showed early signs of a positive impact on reducing conflict between boys. (1.64)
- 5.48** Respondents to complaints met boys to discuss the complaint and explain the planned outcome. This contributed to more effective communication. The safeguarding team and social worker reinforced effective quality assurance and enhanced safety in the prison. (2.33)
- 5.49** Operational staff received a good level of specific age related mental health awareness training. This helped to promote awareness of common mental health issues experienced by this age group and to make an effective response. (2.75)

## Section 6. Appendices

### Appendix I: Inspection team

Martin Lomas	Deputy chief inspector
Angus Mulready-Jones	Team leader
Ian Dickens	Inspector
Angela Johnson	Inspector
Yvonne McGuckian	Inspector
Keith McInnis	Inspector
Majella Pearce	Inspector
Helen Ranns	Researcher
Patricia Taflan	Researcher
Joe Simmonds	Researcher
Paul Roberts	Substance misuse inspector
Maureen Jamieson	Health services inspector
Gary Turney	Care Quality Commission inspector
John Grimmer	Ofsted inspector
Nigel Bragg	Ofsted inspector



## Appendix II: Progress on recommendations from the last report

The following is a summary of the main findings from the last report and a list of all the recommendations made, organised under the four tests of a healthy prison. The reference numbers at the end of each recommendation refer to the paragraph location in the previous report. If a recommendation has been repeated in the main report, its new paragraph number is also provided.

### Safety

**Children and young people, particularly the most vulnerable, are held safely.**

*At the last inspection, in 2015, After long journeys for some boys, reception and first night procedures were good. Safeguarding procedures were well developed. The level of self-harm was high and, although not always reflected in the documentation, care was generally good. Levels of violence were high and one in four boys felt unsafe at the time of our inspection. More needed to be done to manage bullying behaviour, support the significant number of isolated boys, and make the prison safer. The incentives and earned privileges scheme was not used effectively to promote good behaviour and there was an overreliance on the adjudication process. Levels of use of force remained high but force was applied appropriately. Too many boys, some of whom were subject to ACCT procedures, spent long periods in segregation. Psychosocial services for boys with substance misuse issues were good. **Outcomes for children and young people were not sufficiently good against this healthy prison test.***

#### Main recommendation

The establishment should review the behaviour management policy and its application to ensure that low-level poor behaviour is consistently challenged and good behaviour is rewarded appropriately. (S49)

**Partially achieved**

#### Recommendations

The escort contract should be reviewed to ensure that children arrive at the establishment in good time to be assessed and settled on their first night. (I.4)

**Not achieved**

The establishment should make use of the on-site video link facilities. (I.5)

**Achieved**

Where concerns are identified in the risk assessment management documentation, relevant action points should be allocated to a member of staff and followed up. (I.11)

**Not achieved**

The first night unit should not be used to hold boys who are difficult to manage. (I.12)

**Achieved**

All boys should receive a full induction. (I.13)

**Partially achieved**

More focus should be given to the analysis of bullying statistics so that the scale of bullying can be measured and appropriate action taken to protect victims and manage perpetrators appropriately. (1.20)

**Achieved**

Safeguarding should be embedded in the work of residential officers. (1.21)

**Partially achieved**

All staff should undertake child protection training. (1.25)

**Not achieved** (Recommendation repeated, 1.16)

All boys who self isolate should be given the opportunity to discuss their circumstances with someone they trust and to access a full regime safely. (1.33)

**Partially achieved**

The quality of ACCT documentation should be consistent and regular management checks should be carried out. (1.39)

**Partially achieved**

Care maps should be detailed with time-bound actions. (1.40)

**Not achieved**

Short-term incentive plans should be implemented for boys who spend longer than two weeks on the basic regime. (1.49)

**Achieved**

Adjudicators should attend regular meetings to monitor the application of the adjudication and minor report systems. (1.63)

**Not achieved**

Pain-inducing techniques should not be used on boys. (1.78)

**Not achieved** (Recommendation repeated, 1.73)

All incidents involving use of force should be recorded, including audio. (1.79)

**Not achieved** (Recommendation repeated, 1.74)

There should be restraint handling plans in place for all boys with a medical condition that may be adversely affected by restraint. All staff should be aware of their contents and use the information during incidents. (1.80)

**Partially achieved**

The regime in the care and separation unit should be improved to include an hour in the open air and daily access to education for all boys. (1.90)

**Achieved**

All segregation unit staff should receive mental health training. (1.91)

**Achieved**

Boys on an open ACCT should only be segregated in exceptional circumstances which are well documented. (1.92)

**Achieved**

All instances of boys being separated for short periods on normal location should be recorded. (1.93)

**Achieved**

## Respect

### Children and young people are treated with respect for their human dignity.

*At the last inspection in 2015, living accommodation had improved and was reasonable. Most outdoor exercise yards had improved and were well equipped. Some boys did not have a daily shower or telephone call. Relationships between staff and boys were generally good. Consultation was limited, and despite substantial numbers of boys with protected characteristics, equality and diversity remained inadequate. Management of complaints was good and health care provision was very good. Supervision at meal service was poor but the quality of food was reasonable. **Outcomes for children and young people were reasonably good against this healthy prison test.***

#### Main recommendations

Boys should collectively and individually have a voice in areas of interest to them and areas of importance to the establishment, particularly safety, bullying and violence, and diversity. (S50)

#### **Achieved**

The equality agenda should be given a high priority throughout the establishment and should be sufficiently resourced to improve outcomes for boys with a protected characteristic. Inequality identified through monitoring data should be investigated and addressed. (S51)

#### **Partially achieved**

There should be a national transfer pathway for boys who need admission to an establishment with inpatient facilities. (S52)

#### **Not achieved**

#### Recommendations

Cells designed for one should not accommodate two people. (2.10)

#### **Not achieved**

Children should not be locked together in showers. (2.11)

#### **Achieved**

Cell call bells should be answered promptly. (2.12)

#### **Achieved**

Each boy should have a designated officer on their residential unit who is their central point of contact and support and takes responsibility for their day-to-day care and wellbeing through frequent contact and by attending relevant meetings relating to their care. (2.17)

#### **Partially achieved**

Staff relationships with boys should be properly supervised to ensure that staff interact in a respectful way and that poor behaviour by boys is challenged. (2.18)

#### **Partially achieved**

The quality of investigations into discrimination incident reports should be improved and should include effective quality assurance. (2.23)

#### **Partially achieved**

There should be consultations with black and minority ethnic and Muslim boys to understand their negative perceptions and address any concerns raised. (2.29)

**Not achieved**

Responses to complaints should be written in an age-appropriate manner and should explain what to do if dissatisfied; data on trends in complaints should be made available to the health service manager. (2.52)

**Achieved**

Boys should have timely access to specialist clinics with low waiting times and few missed appointments. (2.58)

**Achieved**

The partnership board should receive data on did-not-attend rates, delayed attendance at appointments and cancelled external escorts to inform and manage improvements. (2.59)

**Achieved**

Staff should investigate why so many boys will not collect their meals from the servery. All boys should be encouraged to collect their meals and staff should ensure they can do so safely. (2.81)

**Achieved**

All meals should be served at the advertised times. (2.82)

**Achieved**

The serving of food should be adequately supervised to ensure that appropriate hygiene requirements are met. (2.83)

**Achieved**

## Purposeful activity

**Children and young people are able, and expected, to engage in activity that is likely to benefit them.**

*At the last inspection in 2015, time out of cell was better than we normally see for most boys but there were still too many boys locked up for long periods. Leadership and management of learning and skills were good and there was effective partnership working between the establishment and the provider. There was a good range of education and training opportunities but English and mathematics were not well integrated. There was not enough outreach work for boys who were not attending full-time activities. The quality of learning, teaching and assessment was good and levels of achievement in qualifications were high overall. Library and PE provision were good but attendance was restricted for boys not attending education or training. **Outcomes for children and young people were reasonably good against this healthy prison test.***

## Recommendations

Boys should have access to 10 hours out of cell each day. (3.5)

**Not achieved** (Recommendation repeated, 3.4)

Self-assessment should provide a comprehensive evaluation of all aspects of education and skills. (3.13)

**Achieved**

The work experience pathway should include core subjects and provide accreditation for the skills that boys develop. (3.20)

**Partially achieved**

The use of mathematics and English in subject and vocational training should be developed more strongly to increase boys' ability to apply these skills. (3.21)

**Achieved**

Education managers and staff should ensure that they give boys sufficiently detailed and accurate feedback so that they know what they need to do to improve their written work. (3.28)

**Achieved**

Strategies for improvement should be implemented in the few classes and subjects where behaviour is not good. (3.34)

**Partially achieved**

Access to the library should not be curtailed by cancellation of Saturday sessions. (3.42)

**Achieved**

The drainage in the outdoor field should be rectified to ensure that full use is made of the facilities. (3.49)

**Not achieved** (Recommendation repeated, 3.56)

All boys should have access to a minimum of three hours of PE each week. (3.50)

**Achieved**

## Resettlement

**Children and young people are effectively helped to prepare for their release back into the community and to reduce the likelihood of reoffending.**

*At the last inspection in 2015, strategic oversight of resettlement was good and there were well developed partnerships with key stakeholders. Boys were seen by a duty case worker the day after arrival and were allocated a dedicated case worker quickly. All boys had a training or remand plan but residential staff needed more involvement in its delivery. Public protection arrangements were generally good but not enough was done in preparation for release. Reintegration planning was mostly good. However, accommodation was not always identified in good time before release and, although offending behaviour work was improving, there were still gaps in provision. The children and families pathway was particularly well developed. **Outcomes for children and young people were good against this healthy prison test.***

## Recommendations

Case workers should undertake planned formal case work meetings with boys outside of reviews. (4.13)

**Achieved**

Training planning and remand management meetings should include staff who regularly work with boys so that all relevant activity is captured in their remand or training plans and there is consistent reinforcement to help boys achieve their targets. The sharing of targets with relevant staff who do not attend meetings should be improved. (4.14)

**Partially achieved**

The management level in MAPPA cases should be confirmed six months before the boy's release date, or at the earliest possible date for those serving shorter sentences. (4.19)

**Not achieved** (Recommendation repeated, 4.18)

Work should be developed to ensure that boys with, or facing, indeterminate sentences have the services and support they need. (4.22)

**Achieved**

All boys should be provided with a suitable address in good time for their release. (4.32)

**Not achieved**

The establishment should ensure that all boys are able to use the virtual campus to research employment opportunities. (4.37)

**Not achieved** (Recommendation repeated, 4.34)

Boys should be able to open a bank account while at Werrington. (4.43)

**Achieved**

Work to address gambling should be developed. (4.44)

**Achieved**

Story Book Dads and a parenting course should be reinstated. (4.47)

**Achieved**

There should be interventions in place to help boys to address sexually harmful behaviour. (4.50)

**Not achieved** (Recommendation repeated, 4.53)

## Appendix III: Establishment population profile

Please note: the following figures were supplied by the establishment and any errors are the establishment's own.

### Population breakdown by:

Status	Number of young people	%
Sentenced	90	80.4%
Recall	3	2.7%
Convicted unsentenced	0	0.0%
Remand	18	16.1%
Detainees	0	0.9%
<b>Total</b>	<b>112</b>	

Age	Number of young people	%
15 years	6	5.4
16 years	27	24.1
17 years	68	60.7
18 years	11	9.8
<b>Total</b>		

Nationality	Number of young people	%
British	95	84.8
Foreign nationals	17	15.2
<b>Total</b>		

<b>Ethnicity</b>	<b>Number of young people</b>	<b>%</b>
<b>White</b>		
British	51	45.5
Irish	1	0.9
Gypsy/Irish Traveller	2	1.8
Other white	3	2.7
<b>Mixed</b>		
White and black Caribbean	6	5.4
White and black African	1	0.9
White and Asian	1	0.9
Other mixed	3	2.7
<b>Asian or Asian British</b>		
Indian	4	3.6
Pakistani	4	3.6
Bangladeshi	1	0.9
Chinese	0	0.0
Other Asian	2	1.8
<b>Black or black British</b>		
Caribbean	13	11.6
African	8	7.1
Other black	6	5.4
<b>Other ethnic group</b>		
Arab	1	0.9
Other ethnic group	5	4.5
<b>Not stated</b>		
<b>Total</b>	<b>112</b>	

<b>Religion</b>	<b>Number of young people</b>	<b>%</b>
Baptist	0	0.0
Church of England	4	3.6
Roman Catholic	15	13.4
Other Christian denominations	16	14.3
Muslim	29	25.9
Sikh	2	1.8
Hindu	0	0.0
Buddhist	0	0.0
Jewish	0	0.0
Other	0	0.0
No religion	40	41.1
<b>Total</b>	<b>112</b>	

<b>Other demographics</b>	<b>Number of young people</b>	<b>%</b>
Gypsy/Romany/Traveller	3	3
<b>Total</b>	<b>3</b>	

**Sentenced only – length of stay by age**

<b>Length of stay</b>	<1 mth	1–3 mths	3–6 mths	6–12 mths	1–2 yrs	2 yrs +	4 yrs +	<b>Total</b>
<b>Age</b>								
15 years	1	3	1	0	0	0	0	5.3%
16 years	2	8	5	8	0	0	0	24.5%
17 years	11	15	11	13	5	0	1	59.6%
18 years	0	3	3	2	2	0	0	10.6%
<b>Total</b>	<b>14</b>	<b>29</b>	<b>20</b>	<b>23</b>	<b>7</b>	<b>0</b>	<b>1</b>	

**Unsentenced only – length of stay by age**

<b>Length of stay</b>	<1 mth	1–3 mths	3–6 mths	6–12 mths	1–2 yrs	2 yrs+	4 yrs +	<b>Total</b>
<b>Age</b>								
15 years	1	0	0	0	0	0	0	5.6%
16 years	1	2	1	0	0	0	0	22.2%
17 years	6	2	4	0	0	0	0	66.7%
18 years	0	1	0	0	0	0	0	5.6%
<b>Total</b>	<b>8</b>	<b>5</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	

<b>Main offence</b>	<b>Number of young people</b>	<b>%</b>
Violence against the person	24	21.4
Sexual offences	6	5.3
Burglary	9	8.1
Robbery	37	33.0
Theft and handling	5	4.5
Fraud and forgery	0	0.0
Drugs offences	4	3.6
Other offences	27	24.1
Offence not recorded / holding warrant	0	0.0
<b>Total</b>	<b>112</b>	

**Number of DTO's by age and full sentence length, including the time in the community**

<b>Sentence</b>	4 mths	6 mths	8 mths	10 mths	12 mths	18 mths	24 mths	24+ months	<b>Total</b>
<b>Age</b>									
15 years	0	0	0	0	1	2	0	0	15.8%
16 years	0	0	0	0	1	0	3	1	26.3%
17 years	2	0	2	0	0	2	1	2	47.4%
18 years	0	0	0	0	0	0	2	0	10.5%
<b>Total</b>	<b>2</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>2</b>	<b>4</b>	<b>6</b>	<b>3</b>	

**Number of Section 91s, (determinate sentences only) by age and length of sentence**

Sentence	Under 2 yrs	2–3 yrs	3–4 yrs	4–5 yrs	5 yrs +	Recall	Total
<b>Age</b>							
15 years	0	0	0	0	0	0	0.0%
16 years	4	0	0	0	0	0	19.0%
17 years	16	0	0	0	0	0	76.2%
18 years	1	0	0	0	0	0	4.8%
<b>Total</b>	<b>21</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	

**Number of extended sentences under Section 228 (extended sentence for public protection) by age and full sentence length, including the time in the community**

Sentence	Under 2 yrs	2–3 yrs	3–4 yrs	4–5 yrs	5 yrs +	Recall	Total
<b>Age</b>							
15 years	0	0	0	0	0	0	0
16 years	0	0	0	0	0	0	0
17 years	0	0	0	0	0	0	0
18 years	0	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	

**Number of indeterminate sentences under Section 226 (detention for public protection) by age and length of tariff**

Sentence	Under 2 yrs	2–5 yrs	5–10 yrs	10–15 yrs	15–20 yrs	Recall	Total
<b>Age</b>							
15 years	0	0	0	0	0	0	0
16 years	0	0	0	0	0	0	0
17 years	0	0	0	0	0	0	0
18 years	0	0	0	0	0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

**Number of mandatory life sentences under Section 90 by age and length of tariff**

Sentence	Under 2 yrs	2–5 yrs	5–10 yrs	10–15 yrs	15–20 yrs	20 yrs +	Total
<b>Age</b>							
15 years							
16 years							
17 years				1			1
18 years							
<b>Total</b>				<b>1</b>			<b>1</b>

## Appendix IV: Summary of children and young people questionnaires and interviews

### Children and young people survey methodology

A voluntary, confidential and anonymous survey of the population of young people (15–18 years) was carried out by HM Inspectorate of Prisons.

### Sampling

Questionnaires were offered to all young people.

### Distributing and collecting questionnaires

Every attempt was made to distribute the questionnaires to respondents individually. This gave researchers an opportunity to explain the purpose of the survey and to answer respondents' questions. We also stressed the voluntary nature of the survey and provided assurances about confidentiality and the independence of the Inspectorate. This information is also provided in writing on the front cover of the questionnaire.

Interviews were offered to any young person who could not read or write in English, or who had literacy difficulties.

Respondents were not asked to put their names on their questionnaire, although their responses could be identified back to them in line with child protection requirements. In order to ensure confidentiality, respondents were asked to seal their completed questionnaire in the envelope provided and either hand it back to a member of the research team at a specified time or leave it in their room for collection.

Refusals were noted and no attempts were made to replace them.

### Survey response

At the time of the survey on 13 February 2017 the young person population at HMYOI Werrington was 111. Questionnaires were distributed to 109 young people<sup>15</sup>.

We received a total of 99 completed questionnaires, a response rate of 91%. This included two questionnaires completed via interview. Five respondents refused to complete a questionnaire and seven questionnaires were not returned.

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<sup>15</sup> Surveys were not distributed to two young people who were at court on the day of the survey.

Wing/Unit	Number of completed survey returns
A	41
B	36
C	18
Care and separation unit	4

## Presentation of survey results and analyses

Over the following pages we present the survey results for HMYOI Werrington.

First a full breakdown of responses is provided for each question. In this full breakdown all percentages, including those for filtered questions, refer to the full sample. Percentages have been rounded and therefore may not add up to 100%.

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant<sup>16</sup> differences are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in young people's background details.

Filtered questions are clearly indented and preceded by an explanation of how the filter has been applied. Percentages for filtered questions refer to the number of respondents filtered to that question. For all other questions, percentages refer to the entire sample. All missing responses have been excluded from analyses.

Percentages shown in the full breakdown may differ slightly from those shown in the comparative analyses. This is because the data have been weighted to enable valid statistical comparison between establishments.

The following comparative analyses are presented:

- The current survey responses from HMYOI Werrington in 2017 compared with responses from young people surveyed in all other young offender institutions. This comparator is based on all responses from young people surveys carried out in five YOIs since April 2015.
- The current survey responses from HMYOI Werrington in 2017 compared with the responses of young people surveyed at HMYOI Werrington in 2015.
- A comparison within the 2017 survey between the responses of white young people and those from a black and minority ethnic group.
- A comparison within the 2017 survey between the responses of Muslim young people and non-Muslim young people.
- A comparison within the 2017 survey between the responses of young people who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2017 survey between responses of young people who have been in local authority care and those who have not been in local authority care.
- A comparison within the 2017 survey between the responses of young people on A and B wings and the responses of young people on C wing.

<sup>16</sup> A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. In order to appropriately adjust p-values in light of multiple testing,  $p < 0.01$  was considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

## Survey summary

## SECTION I: ABOUT YOU

<b>Q1</b>	<b>How old are you?</b>	
	15 .....	5 (5%)
	16 .....	23 (25%)
	17 .....	53 (58%)
	18 .....	10 (11%)
<b>Q2</b>	<b>Are you a British citizen?</b>	
	Yes .....	85 (97%)
	No .....	3 (3%)
<b>Q3</b>	<b>Do you understand spoken English?</b>	
	Yes .....	90 (100%)
	No .....	0 (0%)
<b>Q4</b>	<b>Do you understand written English?</b>	
	Yes .....	90 (100%)
	No .....	0 (0%)
<b>Q5</b>	<b>What is your ethnic origin?</b>	
	White - British .....	39 (45%)
	White - Irish .....	3 (3%)
	White - Other .....	2 (2%)
	Black or Black British - Caribbean .....	12 (14%)
	Black or Black British - African .....	9 (10%)
	Black or Black British - Other .....	2 (2%)
	Asian or Asian British - Indian .....	2 (2%)
	Asian or Asian British - Pakistani .....	7 (8%)
	Asian or Asian British - Bangladeshi .....	1 (1%)
	Asian or Asian British - Chinese .....	0 (0%)
	Asian or Asian British - Other .....	0 (0%)
	Mixed race - White and Black Caribbean .....	6 (7%)
	Mixed race - White and Black African .....	1 (1%)
	Mixed race - White and Asian .....	1 (1%)
	Mixed race - Other .....	1 (1%)
	Arab .....	0 (0%)
	Other ethnic group .....	1 (1%)
<b>Q6</b>	<b>What is your religion?</b>	
	None .....	27 (30%)
	Church of England .....	14 (16%)
	Catholic .....	19 (21%)
	Protestant .....	0 (0%)
	Other Christian denomination .....	4 (4%)
	Buddhist .....	0 (0%)
	Hindu .....	0 (0%)
	Jewish .....	0 (0%)
	Muslim .....	24 (27%)
	Sikh .....	2 (2%)

<b>Q7</b>	<b>Do you consider yourself to be Gypsy/Romany/Traveller?</b>	
	Yes .....	6 (7%)
	No.....	75 (87%)
	Don't know .....	5 (6%)
<b>Q8</b>	<b>Do you have any children?</b>	
	Yes .....	11 (12%)
	No.....	78 (88%)
<b>Q9</b>	<b>Do you consider yourself to have a disability (i.e. do you need help with any long-term physical, mental or learning needs)?</b>	
	Yes .....	15 (17%)
	No.....	74 (83%)
<b>Q10</b>	<b>Have you ever been in local authority care?</b>	
	Yes .....	41 (45%)
	No.....	51 (55%)

### SECTION 2: ABOUT YOUR SENTENCE

<b>Q1</b>	<b>Are you sentenced?</b>	
	Yes .....	79 (87%)
	No - unsentenced/on remand .....	12 (13%)
<b>Q2</b>	<b>How long is your sentence (the full DTO sentence)?</b>	
	Not sentenced.....	12 (13%)
	Less than 6 months.....	18 (20%)
	6 to 12 months.....	17 (18%)
	More than 12 months, up to 2 years.....	26 (28%)
	More than 2 years.....	17 (18%)
	Indeterminate sentence for public protection (IPP).....	2 (2%)
<b>Q3</b>	<b>How long have you been in this establishment?</b>	
	Less than 1 month.....	13 (14%)
	1 to 6 months.....	51 (55%)
	More than 6 months, but less than 12 months.....	18 (20%)
	12 months to 2 years.....	8 (9%)
	More than 2 years.....	2 (2%)
<b>Q4</b>	<b>Is this your first time in custody in a YOI, secure children's home or secure training centre?</b>	
	Yes .....	47 (53%)
	No.....	42 (47%)

### SECTION 3: COURTS, TRANSFERS AND ESCORTS

<b>Q1</b>	<b>On your most recent journey here, did you feel safe?</b>	
	Yes .....	70 (76%)
	No.....	8 (9%)
	Don't remember .....	14 (15%)
<b>Q2</b>	<b>On your most recent journey here, were there any adults (over 18) or a mix of males and females travelling with you?</b>	
	Yes .....	22 (24%)
	No.....	58 (62%)
	Don't remember .....	13 (14%)

<b>Q3</b>	<b>On your most recent journey here, how long did you spend in the van?</b>	
	<i>Less than 2 hours</i> .....	49 (53%)
	<i>2 to 4 hours</i> .....	34 (37%)
	<i>More than 4 hours</i> .....	5 (5%)
	<i>Don't remember</i> .....	5 (5%)
<b>Q4</b>	<b>On your most recent journey here, were you offered a toilet break?</b>	
	<i>My journey was less than 2 hours</i> .....	49 (53%)
	<i>Yes</i> .....	4 (4%)
	<i>No</i> .....	33 (36%)
	<i>Don't remember</i> .....	6 (7%)
<b>Q5</b>	<b>On your most recent journey here, were you offered anything to eat or drink?</b>	
	<i>My journey was less than 2 hours</i> .....	49 (53%)
	<i>Yes</i> .....	25 (27%)
	<i>No</i> .....	16 (17%)
	<i>Don't remember</i> .....	2 (2%)
<b>Q6</b>	<b>On your most recent journey here, how did you feel you were treated by the escort staff?</b>	
	<i>Very well</i> .....	14 (15%)
	<i>Well</i> .....	43 (46%)
	<i>Neither</i> .....	21 (23%)
	<i>Badly</i> .....	2 (2%)
	<i>Very badly</i> .....	3 (3%)
	<i>Don't remember</i> .....	10 (11%)
<b>Q7</b>	<b>Before you arrived here, did you receive any information to help you prepare for coming here?</b>	
	<i>Yes - and it was helpful</i> .....	11 (12%)
	<i>Yes - but it was not helpful</i> .....	9 (10%)
	<i>No - I received no information</i> .....	63 (68%)
	<i>Don't remember</i> .....	9 (10%)

#### SECTION 4: FIRST DAYS

<b>Q1</b>	<b>How long were you in reception?</b>	
	<i>Less than 2 hours</i> .....	69 (74%)
	<i>2 hours or longer</i> .....	12 (13%)
	<i>Don't remember</i> .....	12 (13%)
<b>Q2</b>	<b>When you were searched, was this carried out in a respectful way?</b>	
	<i>Yes</i> .....	74 (80%)
	<i>No</i> .....	6 (7%)
	<i>Don't remember/Not applicable</i> .....	12 (13%)
<b>Q3</b>	<b>How well did you feel you were treated in reception?</b>	
	<i>Very well</i> .....	35 (38%)
	<i>Well</i> .....	41 (44%)
	<i>Neither</i> .....	11 (12%)
	<i>Badly</i> .....	1 (1%)
	<i>Very badly</i> .....	2 (2%)
	<i>Don't remember</i> .....	3 (3%)

<b>Q4</b>	<b>When you first arrived here, did staff ask if you needed help or support with any of the following things? (Please tick all that apply to you.)</b>			
	Not being able to smoke .....	39 (44%)	Money worries .....	12 (14%)
	Loss of property .....	13 (15%)	Feeling worried/upset/needing someone to talk to.....	26 (30%)
	Feeling scared.....	31 (35%)	Health problems.....	51 (58%)
	Gang problems.....	42 (48%)	Getting phone numbers.....	35 (40%)
	Contacting family .....	49 (56%)	Staff did not ask me about any of these	9 (10%)
<b>Q5</b>	<b>When you first arrived here, did you have any of the following problems? (Please tick all that apply to you.)</b>			
	Not being able to smoke .....	34 (40%)	Money worries .....	18 (21%)
	Loss of property .....	12 (14%)	Feeling worried/upset/needing someone to talk to.....	11 (13%)
	Feeling scared.....	10 (12%)	Health problems.....	13 (15%)
	Gang problems.....	10 (12%)	Getting phone numbers.....	24 (28%)
	Contacting family .....	26 (30%)	I did not have any problems .....	23 (27%)
<b>Q6</b>	<b>When you first arrived here, were you given any of the following? (Please tick all that apply to you.)</b>			
	Toiletries/basic items .....	78 (85%)		
	The opportunity to have a shower .....	78 (85%)		
	Something to eat.....	79 (86%)		
	A free phone call to friends/family .....	79 (86%)		
	PIN phone credit.....	47 (51%)		
	Information about feeling worried/upset .....	35 (38%)		
	Don't remember.....	7 (8%)		
	I was not given any of these .....	2 (2%)		
<b>Q7</b>	<b>Within your first 24 hours here, did you have access to the following people or services? (Please tick all that apply to you.)</b>			
	Chaplain.....	34 (37%)		
	Peer mentor.....	9 (10%)		
	Childline/Samaritans.....	15 (16%)		
	The prison shop/canteen.....	7 (8%)		
	Don't remember .....	30 (33%)		
	I did not have access to any of these .....	27 (29%)		
<b>Q8</b>	<b>Before you were locked up on your first night, were you seen by a doctor or nurse?</b>			
	Yes .....	71 (78%)		
	No.....	16 (18%)		
	Don't remember .....	4 (4%)		
<b>Q9</b>	<b>Did you feel safe on your first night here?</b>			
	Yes .....	73 (82%)		
	No.....	8 (9%)		
	Don't remember .....	8 (9%)		
<b>Q10</b>	<b>Did the induction course cover everything you needed to know about the establishment?</b>			
	I have not been on an induction course .....	8 (9%)		
	Yes .....	38 (42%)		
	No.....	25 (28%)		
	Don't remember .....	19 (21%)		

## SECTION 5: DAILY LIFE AND RESPECT

<b>Q1</b>	<b>Can you normally have a shower every day if you want to?</b>	
	Yes .....	46 (51%)
	No .....	43 (48%)
	Don't know .....	1 (1%)
<b>Q2</b>	<b>Is your cell call bell normally answered within five minutes?</b>	
	Yes .....	26 (30%)
	No.....	51 (59%)
	Don't know .....	10 (11%)
<b>Q3</b>	<b>What is the food like here?</b>	
	Very good.....	0 (0%)
	Good.....	13 (14%)
	Neither .....	29 (32%)
	Bad .....	23 (26%)
	Very bad.....	25 (28%)
<b>Q4</b>	<b>Does the shop/canteen sell a wide enough variety of products?</b>	
	I have not bought anything yet/Don't know.....	4 (4%)
	Yes .....	45 (51%)
	No.....	40 (45%)
<b>Q5</b>	<b>How easy is it for you to attend religious services?</b>	
	I don't want to attend religious services .....	16 (18%)
	Very easy.....	21 (23%)
	Easy .....	20 (22%)
	Neither .....	9 (10%)
	Difficult.....	13 (14%)
	Very difficult.....	3 (3%)
	Don't know .....	9 (10%)
<b>Q6</b>	<b>Are you religious beliefs respected?</b>	
	Yes .....	55 (62%)
	No.....	7 (8%)
	Don't know/Not applicable.....	27 (30%)
<b>Q7</b>	<b>Can you speak to a Chaplain of your faith in private if you want to?</b>	
	Yes .....	51 (59%)
	No.....	4 (5%)
	Don't know/Not applicable.....	32 (37%)
<b>Q8</b>	<b>Can you speak to a peer mentor when you need to?</b>	
	Yes .....	27 (30%)
	No.....	18 (20%)
	Don't know .....	45 (50%)
<b>Q9</b>	<b>Can you speak to a member of the IMB (Independent Monitoring Board) when you need to?</b>	
	Yes .....	21 (23%)
	No .....	20 (22%)
	Don't know .....	50 (55%)

<b>Q10</b>	<b>Can you speak to an advocate (an outside person to help you) when you need to?</b>	
	Yes .....	32 (36%)
	No.....	23 (26%)
	Don't know .....	35 (39%)

### SECTION 6: RELATIONSHIPS WITH STAFF

<b>Q1</b>	<b>Do most staff treat you with respect?</b>	
	Yes .....	49 (57%)
	No.....	37 (43%)

<b>Q2</b>	<b>If you had a problem, who would you turn to? (Please tick all that apply to you.)</b>	
	No-one.....	24 (27%)
	Personal officer.....	22 (25%)
	Wing Officer .....	23 (26%)
	Teacher/education staff.....	9 (10%)
	Gym staff .....	4 (5%)
	Chaplain .....	12 (14%)
	Independent Monitoring Board (IMB) .....	3 (3%)
	YOT worker .....	18 (20%)
	Social worker .....	11 (13%)
	Health services staff .....	6 (7%)
	Peer mentor .....	3 (3%)
	Another young person here.....	15 (17%)
	Case worker.....	35 (40%)
	Advocate.....	3 (3%)
	Family/friends.....	39 (44%)
	Childline/Samaritans .....	3 (3%)

<b>Q3</b>	<b>Have staff checked on you personally in the last week to see how you are getting on?</b>	
	Yes .....	33 (38%)
	No.....	55 (63%)

<b>Q4</b>	<b>When did you first meet your personal (named) officer?</b>	
	I still have not met him/her .....	27 (30%)
	In your first week .....	30 (34%)
	After your first week.....	17 (19%)
	Don't remember .....	15 (17%)

<b>Q5</b>	<b>How often do you see your personal (named) officer?</b>	
	I still have not met him/her .....	27 (32%)
	At least once a week .....	21 (25%)
	Less than once a week.....	36 (43%)

<b>Q6</b>	<b>Do you feel your personal (named) officer tries to help you?</b>	
	I still have not met him/her .....	27 (33%)
	Yes .....	33 (40%)
	No.....	22 (27%)

### SECTION 7: APPLICATIONS AND COMPLAINTS

<b>Q1</b>	<b>Is it easy to make an application?</b>	
	Yes .....	62 (71%)
	No .....	15 (17%)
	Don't know .....	10 (11%)

<b>Q2</b>	<b>Are applications sorted out fairly?</b>	
	I have not made an application.....	10 (13%)
	Yes.....	41 (53%)
	No .....	27 (35%)

<b>Q3</b>	<b>Are applications sorted out quickly (within 7 days)?</b>	
	<i>I have not made an application</i> .....	10 (13%)
	Yes .....	27 (36%)
	No.....	39 (51%)
<b>Q4</b>	<b>Is it easy to make a complaint?</b>	
	Yes .....	43 (51%)
	No.....	16 (19%)
	Don't know .....	26 (31%)
<b>Q5</b>	<b>Are complaints sorted out fairly?</b>	
	<i>I have not made a complaint</i> .....	26 (40%)
	Yes .....	11 (17%)
	No.....	28 (43%)
<b>Q6</b>	<b>Are complaints sorted out quickly (within 7 days)?</b>	
	<i>I have not made a complaint</i> .....	26 (39%)
	Yes .....	13 (19%)
	No.....	28 (42%)
<b>Q7</b>	<b>Have you ever felt too scared or intimidated to make a complaint?</b>	
	Yes .....	5 (6%)
	No.....	47 (55%)
	Never needed to make a complaint.....	33 (39%)

## SECTION 8: REWARDS AND SANCTIONS, AND DISCIPLINE

<b>Q1</b>	<b>What level of the rewards and sanctions scheme are you on?</b>	
	<i>Don't know what the rewards and sanctions scheme is</i> .....	5 (6%)
	<i>Enhanced (top)</i> .....	27 (31%)
	<i>Standard (middle)</i> .....	37 (43%)
	<i>Basic (bottom)</i> .....	14 (16%)
	<i>Don't know</i> .....	3 (3%)
<b>Q2</b>	<b>Have you been treated fairly in your experience of the rewards and sanctions scheme?</b>	
	<i>Don't know what the rewards and sanctions scheme is</i> .....	5 (6%)
	Yes .....	31 (37%)
	No.....	36 (43%)
	Don't know .....	12 (14%)
<b>Q3</b>	<b>Do the different levels of the rewards and sanctions scheme encourage you to change your behaviour?</b>	
	<i>Don't know what the rewards and sanctions scheme is</i> .....	5 (6%)
	Yes .....	37 (44%)
	No.....	33 (39%)
	Don't know .....	10 (12%)
<b>Q4</b>	<b>Have you had a minor report since you have been here?</b>	
	Yes .....	39 (45%)
	No.....	33 (38%)
	Don't know .....	15 (17%)
<b>Q5</b>	<b>If you have had a minor report, was the process explained clearly to you?</b>	
	<i>I have not had a minor report</i> .....	48 (56%)
	Yes .....	30 (35%)
	No.....	8 (9%)

<b>Q6</b>	<b>Have you had an adjudication ('nicking') since you have been here?</b>	
	Yes .....	64 (73%)
	No.....	23 (26%)
	Don't know .....	1 (1%)
<b>Q7</b>	<b>If you have had an adjudication ('nicking'), was the process explained clearly to you?</b>	
	<i>I have not had an adjudication</i> .....	24 (28%)
	Yes .....	53 (61%)
	No.....	10 (11%)
<b>Q8</b>	<b>Have you been physically restrained (C and R) since you have been here?</b>	
	Yes .....	34 (39%)
	No.....	46 (53%)
	Don't know .....	7 (8%)
<b>Q9</b>	<b>If you have spent a night in the care and separation unit (CSU), how were you treated by staff?</b>	
	<i>I have not been to the care and separation unit</i> .....	65 (74%)
	Very well.....	6 (7%)
	Well.....	3 (3%)
	Neither .....	10 (11%)
	Badly.....	2 (2%)
	Very badly .....	2 (2%)

### SECTION 9: SAFETY

<b>Q1</b>	<b>Have you ever felt unsafe here?</b>	
	Yes .....	30 (34%)
	No.....	58 (66%)
<b>Q2</b>	<b>Do you feel unsafe now?</b>	
	Yes .....	11 (13%)
	No.....	75 (87%)
<b>Q3</b>	<b>In which areas have you felt unsafe? (Please tick all that apply to you.)</b>	
	Never felt unsafe .....	58 (68%)
	Everywhere .....	13 (15%)
	Care and separation unit .....	1 (1%)
	Association areas.....	5 (6%)
	Reception area .....	0 (0%)
	At the gym .....	9 (11%)
	In an exercise yard.....	8 (9%)
	At work.....	0 (0%)
	At education.....	5 (6%)
	At religious services .....	2 (2%)
	At meal times .....	3 (4%)
	At healthcare .....	0 (0%)
	Visits area .....	2 (2%)
	In wing showers.....	0 (0%)
	In gym showers.....	2 (2%)
	In corridors/stairwells.....	2 (2%)
	On your landing/wing.....	4 (5%)
	During movement .....	2 (2%)
	In your cell .....	3 (4%)

<b>Q4</b>	<b>Have you ever been victimised by another young person/group of young people here (e.g. insulted or assaulted you)?</b>	
	Yes .....	24 (28%)
	No.....	61 (72%)
<b>Q5</b>	<b>If yes, what did the incident(s) involve/what was it about? (Please tick all that apply to you.)</b>	
	<i>Insulting remarks (about you, your family or friends)</i> .....	14 (16%)
	<i>Physical abuse (being hit, kicked or assaulted)</i> .....	10 (12%)
	<i>Sexual abuse</i> .....	0 (0%)
	<i>Feeling threatened or intimidated</i> .....	7 (8%)
	<i>Having your canteen/property taken</i> .....	1 (1%)
	<i>Medication</i> .....	0 (0%)
	<i>Debt</i> .....	1 (1%)
	<i>Drugs</i> .....	1 (1%)
	<i>Your race or ethnic origin</i> .....	3 (4%)
	<i>Your religion/religious beliefs</i> .....	1 (1%)
	<i>Your nationality</i> .....	0 (0%)
	<i>You are from a different part of the country to others</i> .....	2 (2%)
	<i>You are from a Traveller community</i> .....	0 (0%)
	<i>Your sexuality</i> .....	0 (0%)
	<i>Your age</i> .....	0 (0%)
	<i>You having a disability</i> .....	2 (2%)
	<i>You were new here</i> .....	6 (7%)
	<i>Your offence/crime</i> .....	0 (0%)
	<i>Gang related issues</i> .....	4 (5%)
<b>Q7</b>	<b>Have you ever been victimised by staff here (e.g. insulted or assaulted you)?</b>	
	Yes .....	19 (23%)
	No.....	65 (77%)
<b>Q8</b>	<b>If yes, what did the incident(s) involve/what was it about? (Please tick all that apply to you.)</b>	
	<i>Insulting remarks (about you, your family or friends)</i> .....	10 (12%)
	<i>Physical abuse (being hit, kicked or assaulted)</i> .....	3 (4%)
	<i>Sexual abuse</i> .....	0 (0%)
	<i>Feeling threatened or intimidated</i> .....	6 (7%)
	<i>Having your canteen/property taken</i> .....	3 (4%)
	<i>Medication</i> .....	0 (0%)
	<i>Debt</i> .....	0 (0%)
	<i>Drugs</i> .....	0 (0%)
	<i>Your race or ethnic origin</i> .....	4 (5%)
	<i>Your religion/religious beliefs</i> .....	2 (2%)
	<i>Your nationality</i> .....	2 (2%)
	<i>You are from a different part of the country to others</i> .....	1 (1%)
	<i>You are from a Traveller community</i> .....	0 (0%)
	<i>Your sexuality</i> .....	0 (0%)
	<i>Your age</i> .....	2 (2%)
	<i>You having a disability</i> .....	0 (0%)
	<i>You were new here</i> .....	2 (2%)
	<i>Your offence/crime</i> .....	1 (1%)
	<i>Gang related issues</i> .....	1 (1%)
	<i>Because you made a complaint</i> .....	6 (7%)
<b>Q10</b>	<b>If you were being victimised, would you tell a member of staff?</b>	
	Yes .....	21 (30%)
	No.....	36 (51%)
	Don't know .....	13 (19%)

<b>Q11</b>	<b>Do you think staff would take it seriously if you told them you had been victimised?</b>		
	Yes .....	27 (33%)	
	No.....	32 (39%)	
	Don't know .....	24 (29%)	

<b>Q12</b>	<b>Is shouting through the windows a problem here?</b>		
	Yes .....	32 (38%)	
	No.....	39 (46%)	
	Don't know .....	13 (15%)	

### SECTION 10: HEALTH SERVICES

<b>Q1</b>	<b>Is it easy to see the following people if you need to?</b>			
		Yes	No	Don't know
	The doctor .....	53 (65%)	19 (23%)	10 (12%)
	The nurse .....	61 (75%)	14 (17%)	6 (7%)
	The dentist .....	41 (51%)	27 (33%)	13 (16%)

<b>Q2</b>	<b>What do you think of the overall quality of the health services here?</b>		
	<i>I have not been</i> .....		1 (1%)
	<i>Very good</i> .....		17 (20%)
	<i>Good</i> .....		35 (42%)
	<i>Neither</i> .....		22 (27%)
	<i>Bad</i> .....		5 (6%)
	<i>Very bad</i> .....		3 (4%)

<b>Q3</b>	<b>If you are taking medication, are you allowed to keep some/all of it in your room?</b>		
	<i>I am not taking any medication</i> .....		44 (54%)
	<i>Yes, all of my meds</i> .....		7 (9%)
	<i>Yes, some of my meds</i> .....		17 (21%)
	<i>No</i> .....		14 (17%)

<b>Q4</b>	<b>Do you have any emotional or mental health problems?</b>		
	Yes .....		21 (26%)
	No.....		60 (74%)

<b>Q5</b>	<b>Are you being helped by anyone here with your emotional or mental health problems (e.g. a psychologist, doctor, counsellor, personal officer or another member of staff)?</b>		
	<i>I do not have any emotional or mental health problems</i> .....		60 (73%)
	Yes .....		16 (20%)
	No.....		6 (7%)

<b>Q6</b>	<b>Did you have problems with alcohol when you first arrived here?</b>		
	Yes .....		9 (11%)
	No.....		73 (89%)

<b>Q7</b>	<b>Have you received any help with alcohol problems here?</b>		
	Yes .....		8 (10%)
	No.....		74 (90%)

<b>Q8</b>	<b>Did you have problems with drugs when you first arrived here?</b>		
	Yes .....		23 (28%)
	No.....		58 (72%)

<b>Q9</b>	<b>Do you have problems with drugs now?</b>		
	Yes .....		8 (10%)
	No.....		74 (90%)

<b>Q10</b>	<b>Have you received any help with drugs problems here?</b>	
	Yes .....	21 (26%)
	No.....	61 (74%)
<b>Q11</b>	<b>How easy or difficult is it to get illegal drugs here?</b>	
	Very easy.....	10 (13%)
	Easy .....	9 (12%)
	Neither .....	0 (0%)
	Difficult.....	1 (1%)
	Very difficult.....	10 (13%)
	Don't know .....	48 (62%)

### SECTION 11: ACTIVITIES

<b>Q1</b>	<b>How old were you when you were last at school?</b>				
	14 or under .....	32 (40%)			
	15 or over.....	48 (60%)			
<b>Q2</b>	<b>Have you ever been excluded from school?</b>				
	Yes .....	76 (90%)			
	No.....	7 (8%)			
	Not applicable.....	1 (1%)			
<b>Q3</b>	<b>Did you ever skip school before you came into custody?</b>				
	Yes .....	63 (76%)			
	No.....	17 (20%)			
	Not applicable.....	3 (4%)			
<b>Q4</b>	<b>Do you CURRENTLY take part in any of the following activities? (Please tick all that apply to you.)</b>				
	Education.....	61 (73%)			
	A job in this establishment.....	18 (22%)			
	Vocational or skills training .....	7 (8%)			
	Offending behaviour programmes .....	9 (11%)			
	I am not currently involved in any of these.....	9 (11%)			
<b>Q5</b>	<b>If you have been involved in any of the following activities here, do you think they will help you when you leave prison?</b>				
		Not been involved	Yes	No	Don't know
	Education	4 (5%)	44 (57%)	19 (25%)	10 (13%)
	A job in this establishment	17 (28%)	26 (43%)	9 (15%)	9 (15%)
	Vocational or skills training	18 (32%)	18 (32%)	7 (12%)	14 (25%)
	Offending behaviour programmes	18 (31%)	17 (29%)	13 (22%)	11 (19%)
<b>Q6</b>	<b>Do you usually have association every day?</b>				
	Yes .....	55 (71%)			
	No.....	23 (29%)			
<b>Q7</b>	<b>Can you usually go outside for exercise every day?</b>				
	Don't want to go.....	9 (11%)			
	Yes .....	48 (59%)			
	No.....	25 (30%)			

<b>Q8</b>	<b>How many times do you usually go to the gym each week?</b>	
	<i>Don't want to go</i> .....	10 (12%)
	<i>None</i> .....	13 (16%)
	<i>One to two times</i> .....	25 (30%)
	<i>Three to five times</i> .....	29 (35%)
	<i>More than five times</i> .....	5 (6%)

## SECTION 12: FAMILY AND FRIENDS

<b>Q1</b>	<b>Are you able to use the telephone every day, if you want to?</b>	
	<i>Yes</i> .....	43 (52%)
	<i>No</i> .....	39 (48%)
	<i>Don't know</i> .....	0 (0%)

<b>Q2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>	
	<i>Yes</i> .....	33 (40%)
	<i>No</i> .....	43 (52%)
	<i>Don't know</i> .....	6 (7%)

<b>Q3</b>	<b>How many visits do you usually have each week, from family or friends?</b>	
	<i>I don't get visits</i> .....	14 (17%)
	<i>Less than one a week</i> .....	24 (29%)
	<i>About one a week</i> .....	26 (32%)
	<i>More than one a week</i> .....	4 (5%)
	<i>Don't know</i> .....	14 (17%)

<b>Q4</b>	<b>How easy is it for your family and friends to visit you here?</b>	
	<i>I don't get visits</i> .....	14 (17%)
	<i>Very easy</i> .....	8 (10%)
	<i>Easy</i> .....	21 (26%)
	<i>Neither</i> .....	11 (13%)
	<i>Difficult</i> .....	8 (10%)
	<i>Very difficult</i> .....	9 (11%)
	<i>Don't know</i> .....	11 (13%)

<b>Q5</b>	<b>Do your visits usually start on time?</b>	
	<i>I don't get visits</i> .....	14 (17%)
	<i>Yes</i> .....	38 (47%)
	<i>No</i> .....	18 (22%)
	<i>Don't know</i> .....	11 (14%)

## SECTION 13: PREPARATION FOR RELEASE

<b>Q1</b>	<b>Do you think you will have a problem with any of the following things, when you are released? (Please tick all that apply to you.)</b>	
	<i>Finding accommodation</i> .....	18 (23%)
	<i>Getting into school or college</i> .....	17 (22%)
	<i>Getting a job</i> .....	36 (46%)
	<i>Money/finances</i> .....	19 (24%)
	<i>Claiming benefits</i> .....	8 (10%)
	<i>Continuing health services</i> .....	6 (8%)
	<i>Opening a bank account</i> .....	16 (20%)
	<i>Avoiding bad relationships</i> .....	13 (16%)
	<i>I won't have any problems</i> .....	32 (41%)

<b>Q2</b>	<b>Do you have a training plan, sentence plan or remand plan (i.e. a plan that is discussed in your DTO/planning meetings, which sets out your targets)?</b>	
	Yes .....	48 (55%)
	No.....	17 (20%)
	Don't know .....	22 (25%)
<b>Q3</b>	<b>Were you involved in the development of your plan?</b>	
	<i>I don't have a plan/don't know if I have a plan</i> .....	39 (45%)
	Yes .....	42 (48%)
	No.....	6 (7%)
<b>Q4</b>	<b>Do you understand the targets that have been set in your plan?</b>	
	<i>I don't have a plan/don't know if I have a plan</i> .....	39 (45%)
	Yes .....	46 (53%)
	No.....	1 (1%)
<b>Q5</b>	<b>Do you have a case worker here?</b>	
	Yes .....	85 (99%)
	No.....	1 (1%)
	Don't know .....	0 (0%)
<b>Q6</b>	<b>Has your case worker helped to prepare you for release?</b>	
	<i>I don't have a case worker</i> .....	1 (1%)
	Yes .....	49 (58%)
	No.....	21 (25%)
	Don't know .....	13 (15%)
<b>Q7</b>	<b>Has your social worker been to visit you since you have been here?</b>	
	<i>I don't have a social worker</i> .....	30 (34%)
	Yes .....	34 (39%)
	No.....	24 (27%)
<b>Q8</b>	<b>Have you had a say in what will happen to you when you are released?</b>	
	Yes .....	43 (50%)
	No.....	24 (28%)
	Don't know .....	19 (22%)
<b>Q9</b>	<b>Do you know who to contact for help with any of the following problems, before your release? (Please tick all that apply to you.)</b>	
	<i>Finding accommodation</i> .....	21 (26%)
	<i>Getting into school or college</i> .....	23 (29%)
	<i>Getting a job</i> .....	29 (36%)
	<i>Help with money/finances</i> .....	20 (25%)
	<i>Help with claiming benefits</i> .....	14 (18%)
	<i>Continuing health services</i> .....	14 (18%)
	<i>Opening a bank account</i> .....	17 (21%)
	<i>Avoiding bad relationships</i> .....	14 (18%)
	<i>I don't know who to contact</i> .....	42 (53%)

**Q10 What is most likely to stop you offending in the future? (Please tick all that apply to you.)**

<i>Not sentenced</i> .....	12 (14%)	<i>Having a mentor (someone you can ask for advice)</i> .....	5 (6%)
<i>Nothing, it is up to me</i> .....	27 (31%)	<i>Having a YOT worker or social worker that I get on with</i> .....	14 (16%)
<i>Making new friends outside</i> .....	11 (13%)	<i>Having children</i> .....	12 (14%)
<i>Going back to live with my family</i> .....	23 (26%)	<i>Having something to do that isn't crime</i>	18 (21%)
<i>Getting a place of my own</i> .....	20 (23%)	<i>This sentence</i> .....	17 (20%)
<i>Getting a job</i> .....	33 (38%)	<i>Getting into school/college</i> .....	18 (21%)
<i>Having a partner (girlfriend or boyfriend)</i> .....	17 (20%)	<i>Talking about my offending behaviour with staff</i> .....	6 (7%)
<i>Staying off alcohol/drugs</i> .....	12 (14%)		

**Q11 Do you want to stop offending?**

<i>Not sentenced</i> .....	12 (14%)
<i>Yes</i> .....	63 (73%)
<i>No</i> .....	4 (5%)
<i>Don't know</i> .....	7 (8%)

**Q12 Have you done anything, or has anything happened to you here, that you think will make you less likely to offend in the future?**

<i>Not sentenced</i> .....	12 (14%)
<i>Yes</i> .....	36 (43%)
<i>No</i> .....	35 (42%)

## Comparison with young people's comparator and previous survey results.



### Gi f j Ymresponses from children and young people: HMYOI Werrington 2017

**Survey responses** (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance. NB: This document shows a comparison between the responses from all young people surveyed in this establishment with all young people surveyed for the comparator.

#### Key to tables

		HMYOI Werrington 2017	Young people's comparator	HMYOI Werrington 2017	HMYOI Werrington 2015
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in young people's background details				
	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		<b>99</b>	<b>515</b>	<b>99</b>	<b>79</b>
<b>SECTION 1: ABOUT YOU</b>					
1.1	Are you 18 years of age?	11%	15%	11%	13%
1.2	Are you a foreign national?	3%	8%	3%	3%
1.3	Do you understand spoken English?	100%	99%	100%	100%
1.4	Do you understand written English?	100%	98%	100%	100%
1.5	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other category.)	50%	45%	50%	48%
1.6	Are you Muslim?	27%	21%	27%	32%
1.7	Do you consider yourself to be Gypsy/Romany/Traveller?	7%	7%	7%	10%
1.8	Do you have any children?	12%	7%	12%	13%
1.9	Do you consider yourself to have a disability?	17%	18%	17%	21%
1.10	Have you ever been in local authority care?	45%	37%	45%	38%
<b>SECTION 2: ABOUT YOUR SENTENCE</b>					
2.1	Are you sentenced?	87%	80%	87%	79%
2.2	Is your sentence 12 months or less?	38%	33%	38%	35%
2.3	Have you been in this establishment for one month or less?	15%	15%	15%	20%
2.4	Is this your first time in custody in a YOI, secure children's home or secure training centre?	53%	61%	53%	57%
<b>SECTION 3: COURTS, TRANSFERS AND ESCORTS</b>					
On your most recent journey here:					
3.1	Did you feel safe?	76%	78%	76%	75%
3.2	Did you travel with any adults (over 18) or a mix of males and females?	24%	35%	24%	29%
3.3	Did you spend more than 4 hours in the van?	6%	9%	6%	7%
For those who spent 2 or more hours in the escort van:					
3.4	Were you offered a toilet break if you needed it?	8%	13%	8%	9%
3.5	Were you offered anything to eat or drink?	58%	45%	58%	43%
3.6	Were you treated well/very well by the escort staff?	62%	52%	62%	56%
3.7	Before you arrived, did you receive any helpful information to help you prepare for coming here?	12%	10%	12%	11%

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<b>SECTION 4: YOUR FIRST FEW DAYS HERE</b>					
<b>4.1</b>	Were you in reception for less than 2 hours?	74%	76%	74%	73%
<b>4.2</b>	When you were searched, was this carried out in a respectful way?	81%	77%	81%	85%
<b>4.3</b>	Were you treated well/very well in reception?	82%	61%	82%	86%
When you first arrived, did staff ask if you needed help or support with any of the following:					
<b>4.4a</b>	Not being able to smoke?	44%	48%	44%	41%
<b>4.4b</b>	Loss of property?	15%	19%	15%	16%
<b>4.4c</b>	Feeling scared?	35%	25%	35%	31%
<b>4.4d</b>	Gang problems?	48%	42%	48%	42%
<b>4.4e</b>	Contacting family?	56%	53%	56%	46%
<b>4.4f</b>	Money worries?	13%	15%	13%	16%
<b>4.4g</b>	Feeling worried/upset/needing someone to talk to?	30%	29%	30%	31%
<b>4.4h</b>	Health problems?	58%	54%	58%	53%
<b>4.4i</b>	Getting phone numbers?	40%	40%	40%	32%
<b>4.5</b>	Did you have any problems when you first arrived?	73%	78%	73%	78%
When you first arrived, did you have problems with any of the following:					
<b>4.5a</b>	Not being able to smoke?	40%	46%	40%	43%
<b>4.5b</b>	Loss of property?	14%	13%	14%	8%
<b>4.5c</b>	Feeling scared?	12%	13%	12%	20%
<b>4.5d</b>	Gang problems?	12%	13%	12%	24%
<b>4.5e</b>	Contacting family?	30%	33%	30%	32%
<b>4.5f</b>	Money worries?	21%	15%	21%	12%
<b>4.5g</b>	Feeling worried/upset/needing someone to talk to?	13%	16%	13%	19%
<b>4.5h</b>	Health problems?	16%	14%	16%	13%
<b>4.5i</b>	Getting phone numbers?	28%	35%	28%	25%
When you first arrived, were you given any of the following:					
<b>4.6a</b>	Toiletries/basic items?	85%	82%	85%	87%
<b>4.6b</b>	The opportunity to have a shower?	85%	44%	85%	75%
<b>4.6c</b>	Something to eat?	85%	78%	85%	82%
<b>4.6d</b>	A free phone call to friends/family?	85%	71%	85%	70%
<b>4.6e</b>	PIN phone credit?	52%	51%	52%	55%
<b>4.6f</b>	Information about feeling worried/upset?	38%	26%	38%	34%

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Within your first 24 hours, did you have access to the following people or services:					
<b>4.7a</b>	A chaplain?	37%	46%	37%	35%
<b>4.7b</b>	A peer mentor?	10%	10%	10%	11%
<b>4.7c</b>	Childline/Samaritans	17%	15%	17%	15%
<b>4.7d</b>	The prison shop/canteen?	8%	9%	8%	10%
<b>4.8</b>	Before you were locked up on your first night, were you seen by a doctor or nurse?	78%	70%	78%	80%
<b>4.9</b>	Did you feel safe on your first night here?	82%	74%	82%	76%
<b>4.10</b>	For those who have been on an induction course: did it cover everything you needed to know about the establishment?	47%	54%	47%	38%
<b>SECTION 5: DAILY LIFE AND RESPECT</b>					
<b>5.1</b>	Can you normally have a shower every day if you want to?	52%	85%	52%	69%
<b>5.2</b>	Is your cell call bell normally answered within five minutes?	30%	23%	30%	22%
<b>5.3</b>	Do you find the food here good/very good?	15%	15%	15%	21%
<b>5.4</b>	Does the shop/canteen sell a wide enough variety of products?	51%	44%	51%	61%
<b>5.5</b>	Is it easy/very easy for you to attend religious services?	45%	44%	45%	53%
<b>5.6</b>	Do you feel your religious beliefs are respected?	62%	56%	62%	58%
Can you speak to:					
<b>5.7</b>	A chaplain of your faith in private?	59%	63%	59%	62%
<b>5.8</b>	A peer mentor?	30%	23%	30%	32%
<b>5.9</b>	A member of the IMB (Independent Monitoring Board)?	24%	14%	24%	28%
<b>5.10</b>	An advocate (an outside person to help you)?	36%	29%	36%	38%
<b>SECTION 6: RELATIONSHIPS WITH STAFF</b>					
<b>6.1</b>	Do most staff treat you with respect?	57%	61%	57%	67%
<b>6.2</b>	If you had a problem, would you have no-one to turn to?	27%	22%	27%	22%
<b>6.3</b>	Have staff checked on you personally in the last week to see how you are getting on?	37%	30%	37%	41%
For those who have met their personal officer:					
<b>6.4</b>	Did you meet your personal (named) officer within the first week?	49%	28%	49%	21%
<b>6.5</b>	Do you see your personal (named) officer at least once a week?	38%	45%	38%	59%
<b>6.6</b>	Do you feel your personal (named) officer tries to help you?	60%	55%	60%	71%

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<b>SECTION 7: APPLICATIONS AND COMPLAINTS</b>					
<b>7.1</b>	Is it easy to make an application?	71%	64%	71%	52%
For those who have made an application:					
<b>7.2</b>	Do you feel applications are sorted out fairly?	61%	49%	61%	47%
<b>7.3</b>	Do you feel applications are sorted out quickly (within 7 days)?	41%	38%	41%	30%
<b>7.4</b>	Is it easy to make a complaint?	51%	46%	51%	39%
For those who have made a complaint:					
<b>7.5</b>	Do you feel complaints are sorted out fairly?	28%	24%	28%	37%
<b>7.6</b>	Do you feel complaints are sorted out quickly (within 7 days)?	33%	22%	33%	25%
<b>7.7</b>	Have you ever felt too scared or intimidated to make a complaint?	6%	14%	6%	22%
<b>SECTION 8: REWARDS AND SANCTIONS, AND DISCIPLINE</b>					
<b>8.1</b>	Are you on the enhanced (top) level of the reward scheme?	31%	24%	31%	23%
<b>8.2</b>	Have you been treated fairly in your experience of the reward scheme?	37%	36%	37%	41%
<b>8.3</b>	Do the different levels make you change your behaviour?	43%	41%	43%	48%
<b>8.4</b>	Have you had a minor report since you have been here?	45%	50%	45%	53%
For those who have had a minor report:					
<b>8.5</b>	Was the process explained clearly to you?	79%	57%	79%	73%
<b>8.6</b>	Have you had an adjudication ('nicking') since you have been here?	73%	67%	73%	81%
For those who have had an adjudication ('nicking'):					
<b>8.7</b>	Was the process explained clearly to you?	84%	78%	84%	72%
<b>8.8</b>	Have you been physically restrained (Cand R) since you have been here?	39%	45%	39%	49%
<b>8.9</b>	For those who had spent a night in the care and separation unit: did the staff treat you well/very well?	39%	35%	39%	39%
<b>SECTION 9: SAFETY</b>					
<b>9.1</b>	Have you ever felt unsafe here?	34%	41%	34%	56%
<b>9.2</b>	Do you feel unsafe now?	13%	15%	13%	25%

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<b>9.4</b>	Have you ever been victimised by other young people here?	<b>28%</b>	<b>28%</b>	<b>28%</b>	<b>46%</b>
Since you have been here, have other young people:					
<b>9.5a</b>	Made insulting remarks about you, your family or friends?	<b>17%</b>	<b>16%</b>	<b>17%</b>	<b>30%</b>
<b>9.5b</b>	Hit, kicked or assaulted you?	<b>12%</b>	<b>12%</b>	<b>12%</b>	<b>18%</b>
<b>9.5c</b>	Sexually abused you?	<b>0%</b>	<b>1%</b>	<b>0%</b>	<b>0%</b>
<b>9.5d</b>	Threatened or intimidated you?	<b>8%</b>	<b>11%</b>	<b>8%</b>	<b>25%</b>
<b>9.5e</b>	Taken your canteen/property?	<b>1%</b>	<b>5%</b>	<b>1%</b>	<b>16%</b>
<b>9.5f</b>	Victimised you because of medication?	<b>0%</b>	<b>1%</b>	<b>0%</b>	<b>0%</b>
<b>9.5g</b>	Victimised you because of debt?	<b>1%</b>	<b>2%</b>	<b>1%</b>	<b>1%</b>
<b>9.5h</b>	Victimised you because of drugs?	<b>1%</b>	<b>2%</b>	<b>1%</b>	<b>3%</b>
<b>9.5i</b>	Victimised you because of your race or ethnic origin?	<b>3%</b>	<b>5%</b>	<b>3%</b>	<b>5%</b>
<b>9.5j</b>	Victimised you because of your religion/religious beliefs?	<b>1%</b>	<b>2%</b>	<b>1%</b>	<b>5%</b>
<b>9.5k</b>	Victimised you because of your nationality?	<b>0%</b>	<b>3%</b>	<b>0%</b>	<b>4%</b>
<b>9.5l</b>	Victimised you because you were from a different part of the country?	<b>2%</b>	<b>3%</b>	<b>2%</b>	<b>5%</b>
<b>9.5m</b>	Victimised you because you are from a Traveller community?	<b>0%</b>	<b>3%</b>	<b>0%</b>	<b>5%</b>
<b>9.5n</b>	Victimised you because of your sexual orientation?	<b>0%</b>	<b>1%</b>	<b>0%</b>	<b>0%</b>
<b>9.5o</b>	Victimised you because of your age?	<b>0%</b>	<b>2%</b>	<b>0%</b>	<b>0%</b>
<b>9.5p</b>	Victimised you because you have a disability?	<b>2%</b>	<b>2%</b>	<b>2%</b>	<b>1%</b>
<b>9.5q</b>	Victimised you because you were new here?	<b>7%</b>	<b>8%</b>	<b>7%</b>	<b>19%</b>
<b>9.5r</b>	Victimised you because of your offence/crime?	<b>0%</b>	<b>4%</b>	<b>0%</b>	<b>4%</b>
<b>9.5s</b>	Victimised you because of gang related issues?	<b>4%</b>	<b>7%</b>	<b>4%</b>	<b>12%</b>

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<b>9.7</b>	Have you ever been victimised by a member of staff here?	<b>22%</b>	<b>31%</b>	<b>22%</b>	<b>34%</b>
Since you have been here, have staff:					
<b>9.8a</b>	Made insulting remarks about you, your family or friends?	<b>12%</b>	<b>16%</b>	<b>12%</b>	<b>16%</b>
<b>9.8b</b>	Hit, kicked or assaulted you?	<b>3%</b>	<b>10%</b>	<b>3%</b>	<b>12%</b>
<b>9.8c</b>	Sexually abused you?	<b>0%</b>	<b>1%</b>	<b>0%</b>	<b>0%</b>
<b>9.8d</b>	Threatened or intimidated you?	<b>7%</b>	<b>9%</b>	<b>7%</b>	<b>5%</b>
<b>9.8e</b>	Taken your canteen/property?	<b>3%</b>	<b>5%</b>	<b>3%</b>	<b>1%</b>
<b>9.8f</b>	Victimised you because of medication?	<b>0%</b>	<b>2%</b>	<b>0%</b>	<b>0%</b>
<b>9.8g</b>	Victimised you because of debt?	<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>
<b>9.8h</b>	Victimised you because of drugs?	<b>0%</b>	<b>1%</b>	<b>0%</b>	<b>1%</b>
<b>9.8i</b>	Victimised you because of your race or ethnic origin?	<b>4%</b>	<b>5%</b>	<b>4%</b>	<b>5%</b>
<b>9.8j</b>	Victimised you because of your religion/religious beliefs?	<b>2%</b>	<b>3%</b>	<b>2%</b>	<b>4%</b>
<b>9.8k</b>	Victimised you because of your nationality?	<b>2%</b>	<b>1%</b>	<b>2%</b>	<b>3%</b>
<b>9.8k</b>	Victimised you because you were from a different part of the country?	<b>1%</b>	<b>1%</b>	<b>1%</b>	<b>0%</b>
<b>9.8m</b>	Victimised you because you are from a Traveller community?	<b>0%</b>	<b>1%</b>	<b>0%</b>	<b>0%</b>
<b>9.8n</b>	Victimised you because of your sexual orientation?	<b>0%</b>	<b>1%</b>	<b>0%</b>	<b>0%</b>
<b>9.8o</b>	Victimised you because of your age?	<b>2%</b>	<b>3%</b>	<b>2%</b>	<b>1%</b>
<b>9.8p</b>	Victimised you because you have a disability?	<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>
<b>9.8q</b>	Victimised you because you were new here?	<b>2%</b>	<b>2%</b>	<b>2%</b>	<b>3%</b>
<b>9.8r</b>	Victimised you because of your offence/crime?	<b>1%</b>	<b>2%</b>	<b>1%</b>	<b>0%</b>
<b>9.8s</b>	Victimised you because of gang related issues?	<b>1%</b>	<b>2%</b>	<b>1%</b>	<b>1%</b>
<b>9.8t</b>	Victimised you because you made a complaint?	<b>7%</b>	<b>6%</b>	<b>7%</b>	<b>3%</b>
<b>9.10</b>	If you were being victimised, would you tell a member of staff?	<b>30%</b>	<b>28%</b>	<b>30%</b>	<b>48%</b>
<b>9.11</b>	Do you think staff would take it seriously if you told them you had been victimised?	<b>32%</b>	<b>22%</b>	<b>32%</b>	<b>27%</b>
<b>9.12</b>	Is shouting through the windows a problem here?	<b>38%</b>	<b>40%</b>	<b>38%</b>	<b>59%</b>

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<b>SECTION 10: HEALTH SERVICES</b>					
<b>10.1a</b>	Is it easy for you to see the doctor?	65%	52%	65%	46%
<b>10.1b</b>	Is it easy for you to see the nurse?	76%	66%	76%	65%
<b>10.1c</b>	Is it easy for you to see the dentist?	51%	29%	51%	20%
<b>10.2</b>	For those who have been to health services: Do you think the overall quality is good/very good?	63%	48%	63%	57%
<b>10.3</b>	If you are taking medication, are you allowed to keep some/all of it in your cell?	63%	48%	63%	52%
<b>10.4</b>	Do you have any emotional or mental health problems?	26%	26%	26%	24%
<b>10.5</b>	If you have emotional or mental health problems, are you being helped by anyone here?	72%	51%	72%	48%
<b>10.6</b>	Did you have any problems with alcohol when you first arrived?	11%	7%	11%	5%
<b>10.7</b>	Have you received any help with any alcohol problems here?	10%	4%	10%	4%
<b>10.8</b>	Did you have any problems with drugs when you first arrived?	29%	31%	29%	29%
<b>10.9</b>	Do you have a problem with drugs now?	10%	8%	10%	3%
<b>10.10</b>	Have you received any help with any drug problems here?	26%	19%	26%	23%
<b>10.11</b>	Is it easy/very easy to get illegal drugs here?	24%	20%	24%	30%
<b>SECTION 11: ACTIVITIES</b>					
<b>11.1</b>	Were you 14 or younger when you were last at school?	40%	40%	40%	27%
<b>11.2</b>	Have you ever been excluded from school?	90%	86%	90%	90%
<b>11.3</b>	Did you ever skip school before you came into custody?	76%	72%	76%	67%
Do you currently take part in any of the following:					
<b>11.4a</b>	Education?	73%	75%	73%	74%
<b>11.4b</b>	A job in this establishment?	22%	13%	22%	23%
<b>11.4c</b>	Vocational or skills training?	9%	8%	9%	14%
<b>11.4d</b>	Offending behaviour programmes?	11%	19%	11%	20%
<b>11.4e</b>	Nothing	11%	21%	11%	7%

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For those who have taken part in the following activities while in this establishment, do you think that they will help you when you leave prison:					
<b>11.5a</b>	Education?	61%	60%	61%	69%
<b>11.5b</b>	A job in this establishment?	59%	36%	59%	41%
<b>11.5c</b>	Vocational or skills training?	46%	32%	46%	54%
<b>11.5d</b>	Offending behaviour programmes?	41%	45%	41%	53%
<b>11.6</b>	Do you usually have association every day?	71%	52%	71%	46%
<b>11.7</b>	Can you usually go outside for exercise every day?	59%	60%	59%	58%
<b>11.8</b>	Do you go to the gym more than five times each week?	7%	2%	7%	5%
<b>SECTION 12: KEEPING IN TOUCH WITH FAMILY AND FRIENDS</b>					
<b>12.1</b>	Are you able to use the telephone every day?	52%	80%	52%	65%
<b>12.2</b>	Have you had any problems with sending or receiving letters or parcels?	40%	48%	40%	49%
<b>12.3</b>	Do you usually have one or more visits per week from family and friends?	37%	33%	37%	46%
<b>12.4</b>	Is it easy/very easy for your family and friends to visit you here?	35%	30%	35%	32%
<b>12.5</b>	Do your visits start on time?	47%	36%	47%	37%
<b>SECTION 13: PREPARATION FOR RELEASE</b>					
Do you think you will have a problem with the following, when you are released:					
<b>13.1a</b>	Finding accommodation?	23%	28%	23%	23%
<b>13.1b</b>	Getting into school or college?	22%	35%	22%	28%
<b>13.1c</b>	Getting a job?	46%	49%	46%	58%
<b>13.1d</b>	Money/finances?	24%	34%	24%	34%
<b>13.1e</b>	Claiming benefits?	10%	14%	10%	14%
<b>13.1f</b>	Continuing health services?	8%	9%	8%	7%
<b>13.1g</b>	Opening a bank account?	20%	15%	20%	17%
<b>13.1h</b>	Avoiding bad relationships?	17%	15%	17%	16%
<b>13.2</b>	Do you have a training plan, sentence plan or remand plan?	55%	45%	55%	38%
For those with a training plan, sentence plan or remand plan:					
<b>13.3</b>	Were you involved in the development of your plan?	87%	87%	87%	64%
<b>13.4</b>	Do you understand the targets set in your plan?	98%	91%	98%	77%
<b>13.5</b>	Do you have a caseworker here?	99%	91%	99%	93%
<b>13.6</b>	Has your caseworker helped to prepare you for release?	59%	45%	59%	33%
For those with a social worker:					
<b>13.7</b>	Has your social worker been to visit you since you have been here?	59%	72%	59%	75%
<b>13.8</b>	Have you had a say in what will happen to you when you are released?	50%	38%	50%	33%

## Comparison with young people's comparator and previous survey results.

### Key to tables

		HMYOI Werrington 2017	Young people's comparator	HMYOI Werrington 2017	HMYOI Werrington 2015
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in young people's background details				
	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		<b>99</b>	<b>515</b>	<b>99</b>	<b>79</b>
Do you know who to contact for help with the following problems?					
<b>13.9a</b>	Finding accommodation	27%	30%	27%	20%
<b>13.9b</b>	Getting into school or college	29%	32%	29%	28%
<b>13.9c</b>	Getting a job	36%	31%	36%	30%
<b>13.9d</b>	Help with money/finances	25%	24%	25%	25%
<b>13.9e</b>	Help with claiming benefits	18%	18%	18%	15%
<b>13.9f</b>	Continuing health services	18%	17%	18%	15%
<b>13.9g</b>	Opening a bank account	21%	20%	21%	23%
<b>13.9h</b>	Avoiding bad relationships	18%	15%	18%	15%
For those who were sentenced:					
<b>13.11</b>	Do you want to stop offending?	86%	89%	86%	91%
<b>13.12</b>	Have you done anything or has anything happened to you here that you think will make you less likely to offend in the future?	51%	52%	51%	58%

## Diversity analysis



### Key question responses (ethnicity and religion) HMYOI Werrington 2017

**Survey responses** (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

#### Key to tables

		Black and minority ethnic young people	White young people	Muslim young people	Non-Muslim young people
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in young people's background details				
	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		<b>43</b>	<b>44</b>	<b>24</b>	<b>66</b>
1.2	Are you a foreign national?	7%	0%	8%	1%
1.3	Do you understand spoken English?	100%	100%	100%	100%
1.4	Do you understand written English?	100%	100%	100%	100%
1.5	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			93%	35%
1.6	Are you Muslim?	51%	4%		
1.5	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	12%	0%	10%
1.9	Do you consider yourself to have a disability?	13%	19%	12%	17%
1.10	Have you ever been in local authority care?	38%	50%	30%	50%
2.1	Are you sentenced?	92%	85%	93%	86%
2.4	Is this your first time in custody in a YOI, secure children's home or secure training centre?	59%	46%	58%	51%
3.2	Did you travel with any adults (over 18) or a mix of males and females?	17%	35%	11%	27%
3.6	Were you treated well/very well by the escort staff?	55%	65%	52%	64%
3.7	Before you arrived, did you receive any helpful information to help you prepare for coming here?	7%	18%	4%	15%
4.2	When you were searched, was this carried out in a respectful way?	76%	86%	83%	80%
4.3	Were you treated well/very well in reception?	72%	88%	77%	82%
4.8	Before you were locked up on your first night, were you seen by a doctor or nurse?	64%	86%	67%	81%
4.9	Did you feel safe on your first night here?	77%	85%	84%	81%
5.1	Can you normally have a shower every day if you want to?	38%	63%	41%	55%
5.2	Is your cell call bell normally answered within five minutes?	30%	32%	33%	29%
5.3	Do you find the food here good/very good?	7%	18%	7%	17%
5.4	Does the shop/canteen sell a wide enough variety of products?	36%	63%	27%	61%
5.6	Do you feel your religious beliefs are respected?	70%	51%	85%	51%
Can you speak to:					
5.7	A chaplain of your faith in private?	51%	64%	63%	57%
5.8	A peer mentor?	20%	39%	26%	31%
5.9	A member of the IMB (Independent Monitoring Board)?	20%	25%	26%	24%
5.10	An advocate (an outside person to help you)?	34%	39%	33%	37%

## Diversity analysis

### Key to tables

		Black and minority ethnic young people	White young people	Muslim young people	Non-Muslim young people
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in young people's background details				
	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		<b>43</b>	<b>44</b>	<b>24</b>	<b>66</b>
6.1	Do most staff treat you with respect?	57%	58%	68%	54%
6.2	If you had a problem, would you have no-one to turn to?	24%	27%	27%	28%
7.1	Is it easy to make an application?	61%	83%	62%	74%
7.4	Is it easy to make a complaint?	37%	63%	54%	49%
8.1	Are you on the enhanced (top) level of the reward scheme?	25%	39%	31%	30%
8.2	Have you been treated fairly in your experience of the reward scheme?	33%	43%	36%	39%
8.3	Do the different levels make you change your behaviour?	49%	40%	32%	47%
8.4	Have you had a minor report since you have been here?	41%	43%	35%	47%
8.6	Have you had an adjudication ('nicking') since you have been here?	78%	63%	73%	71%
8.8	Have you been physically restrained (C and R) since you have been here?	45%	37%	39%	39%
9.1	Have you ever felt unsafe here?	31%	32%	23%	37%
9.2	Do you feel unsafe now?	15%	8%	8%	15%
9.4	Have you been victimised by other young people here?	23%	30%	24%	30%
Since you have been here, have other young people:					
9.5d	Threatened or intimidated you?	3%	12%	0%	10%
9.5i	Victimised you because of your race or ethnic origin?	3%	2%	4%	3%
9.5j	Victimised you because of your religion/religious beliefs?	3%	0%	4%	0%
9.5k	Victimised you because of your nationality?	0%	0%	0%	0%
9.5p	Victimised you because you have a disability?	3%	2%	0%	2%
9.7	Have you been victimised by staff here?	23%	17%	16%	23%
Since you have been here, have staff:					
9.8d	Threatened or intimidated you?	5%	6%	4%	6%
9.8i	Victimised you because of your race or ethnic origin?	10%	0%	8%	3%
9.8j	Victimised you because of your religion/religious beliefs?	5%	0%	8%	0%
9.8k	Victimised you because of your nationality?	5%	0%	0%	3%
9.8p	Victimised you because you have a disability?	0%	0%	0%	0%
9.10	If you were being victimised, would you tell a member of staff?	14%	42%	16%	34%
9.11	Do you think staff would take it seriously if you told them you had been victimised?	23%	44%	24%	38%

## Diversity analysis

### Key to tables

		Black and minority ethnic young people	White young people	Muslim young people	Non-Muslim young people
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in young people's background details				
	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		<b>43</b>	<b>44</b>	<b>24</b>	<b>66</b>
<b>10.1a</b>	Is it easy/very easy for you to see the doctor?	51%	78%	60%	67%
<b>10.1b</b>	Is it easy/very easy for you to see the nurse?	69%	84%	76%	75%
<b>10.4</b>	Do you feel you have any emotional or mental health problems?	8%	38%	8%	32%
Do you currently take part in any of the following:					
<b>11.4a</b>	Education?	84%	67%	83%	72%
<b>11.4b</b>	A job in this establishment?	11%	31%	13%	25%
<b>11.4c</b>	Vocational or skills training?	5%	8%	4%	11%
<b>11.4d</b>	Offending behaviour programmes?	5%	15%	8%	11%
<b>11.4e</b>	Nothing?	8%	8%	8%	12%
<b>11.6</b>	Do you usually have association every day?	58%	82%	54%	76%
<b>11.7</b>	Can you usually go outside for exercise every day?	60%	63%	64%	57%
<b>11.8</b>	Do you go to the gym more than five times each week?	5%	7%	4%	6%
<b>12.1</b>	Are you able to use the telephone every day?	47%	62%	60%	51%
<b>12.2</b>	Have you had any problems with sending or receiving letters or parcels?	50%	36%	60%	31%
<b>12.3</b>	Do you usually have one or more visits per week from family and friends?	33%	36%	36%	35%
<b>13.2</b>	Do you have a training plan, sentence plan or remand plan?	53%	58%	63%	52%
<b>13.8</b>	Have you had a say in what will happen to you when you are released?	30%	71%	39%	55%

Diversity analysis - disability



Key question responses HMYOI Werrington 2017

Survey responses (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
<b>Number of completed questionnaires returned</b>		<b>15</b>	<b>74</b>
1.2	Are you a foreign national?	6%	3%
1.3	Do you understand spoken English?	100%	100%
1.4	Do you understand written English?	100%	100%
1.5	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	40%	52%
1.6	Are you Muslim?	20%	27%
1.5	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	9%
1.10	Have you ever been in local authority care?	41%	45%
2.1	Are you sentenced?	87%	88%
2.4	Is this your first time in custody in a YOI, secure children's home or secure training centre?	41%	55%
3.2	Did you travel with any adults (over 18) or a mix of males and females?	12%	27%
3.6	Were you treated well/very well by the escort staff?	88%	56%
3.7	Before you arrived, did you receive any helpful information to help you prepare for coming here?	6%	14%
4.2	When you were searched, was this carried out in a respectful way?	94%	78%
4.3	Were you treated well/very well in reception?	81%	82%
4.8	Before you were locked up on your first night, were you seen by a doctor or nurse?	88%	76%
4.9	Did you feel safe on your first night here?	80%	83%
5.1	Can you normally have a shower every day if you want to?	47%	51%
5.2	Is your cell call bell normally answered within five minutes?	27%	31%
5.3	Do you find the food here good/very good?	19%	14%
5.4	Does the shop/canteen sell a wide enough variety of products?	41%	53%
5.6	Do you feel your religious beliefs are respected?	53%	64%
Can you speak to:			
5.7	A chaplain of your faith in private?	73%	58%
5.8	A peer mentor?	41%	28%
5.9	A member of the IMB (Independent Monitoring Board)?	35%	21%
5.10	An advocate (an outside person to help you)?	41%	36%

## Diversity analysis - disability

### Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
6.1	Do most staff treat you with respect?	65%	56%
6.2	If you had a problem, would you have no-one to turn to?	25%	26%
7.1	Is it easy to make an application?	59%	74%
7.4	Is it easy to make a complaint?	53%	51%
8.1	Are you on the enhanced (top) level of the reward scheme?	25%	33%
8.2	Have you been treated fairly in your experience of the reward scheme?	35%	40%
8.3	Do the different levels make you change your behaviour?	53%	41%
8.4	Have you had a minor report since you have been here?	41%	45%
8.6	Have you had an adjudication ('nicking') since you have been here?	75%	73%
8.8	Have you been physically restrained (C and R) since you have been here?	38%	42%
9.1	Have you ever felt unsafe here?	47%	33%
9.2	Do you feel unsafe now?	25%	11%
9.4	Have you been victimised by other young people here?	47%	25%
Since you have been here, have other young people:			
9.5d	Threatened or intimidated you?	19%	5%
9.5i	Victimised you because of your race or ethnic origin?	0%	4%
9.5j	Victimised you because of your religion/religious beliefs?	0%	1%
9.5k	Victimised you because of your nationality?	0%	0%
9.5p	Victimised you because you have a disability?	6%	1%
9.7	Have you been victimised by staff here?	20%	20%
Since you have been here, have staff:			
9.8d	Threatened or intimidated you?	6%	8%
9.8i	Victimised you because of your race or ethnic origin?	0%	5%
9.8j	Victimised you because of your religion/religious beliefs?	0%	3%
9.8k	Victimised you because of your nationality?	0%	3%
9.8p	Victimised you because you have a disability?	0%	0%
9.10	If you were being victimised, would you tell a member of staff?	29%	32%
9.11	Do you think staff would take it seriously if you told them you had been victimised?	35%	33%

## Diversity analysis - disability

### Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
<b>10.1a</b>	Is it easy/very easy for you to see the doctor?	81%	63%
<b>10.1b</b>	Is it easy/very easy for you to see the nurse?	75%	78%
<b>10.4</b>	Do you feel you have any emotional or mental health problems?	63%	17%
Do you currently take part in any of the following:			
<b>11.4a</b>	Education?	81%	73%
<b>11.4b</b>	A job in this establishment?	19%	22%
<b>11.4c</b>	Vocational or skills training?	0%	10%
<b>11.4d</b>	Offending behaviour programmes?	12%	8%
<b>11.4e</b>	Nothing?	6%	12%
<b>11.6</b>	Do you usually have association every day?	50%	76%
<b>11.7</b>	Can you usually go outside for exercise every day?	53%	63%
<b>11.8</b>	Do you go to the gym more than five times each week?	6%	6%
<b>12.1</b>	Are you able to use the telephone every day?	35%	58%
<b>12.2</b>	Have you had any problems with sending or receiving letters or parcels?	53%	39%
<b>12.3</b>	Do you usually have one or more visits per week from family and friends?	35%	36%
<b>13.2</b>	Do you have a training plan, sentence plan or remand plan?	59%	52%
<b>13.8</b>	Have you had a say in what will happen to you when you are released?	59%	49%

## Diversity analysis



### Key question responses (local authority care analysis) HMYOI Werrington 2017

**Survey responses** (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

#### Key to tables

	Any percentage highlighted in green is significantly better	Young people who have been in local authority care	Young people who have not been in local authority care
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
<b>Number of completed questionnaires returned</b>		<b>41</b>	<b>51</b>
1.2	Are you a foreign national?	2%	4%
1.3	Do you understand spoken English?	100%	100%
1.4	Do you understand written English?	100%	100%
1.5	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	42%	55%
1.6	Are you Muslim?	18%	34%
1.5	Do you consider yourself to be Gypsy/ Romany/ Traveller?	7%	6%
1.9	Do you consider yourself to have a disability?	16%	18%
2.1	Are you sentenced?	80%	95%
2.4	Is this your first time in custody in a YOI, secure children's home or secure training centre?	29%	70%
3.2	Did you travel with any adults (over 18) or a mix of males and females?	26%	21%
3.6	Were you treated well/very well by the escort staff?	71%	52%
3.7	Before you arrived, did you receive any helpful information to help you prepare for coming here?	20%	6%
4.2	When you were searched, was this carried out in a respectful way?	87%	76%
4.3	Were you treated well/very well in reception?	87%	77%
4.8	Before you were locked up on your first night, were you seen by a doctor or nurse?	82%	73%
4.9	Did you feel safe on your first night here?	80%	83%
5.1	Can you normally have a shower every day if you want to?	51%	49%
5.2	Is your cell call bell normally answered within five minutes?	24%	35%
5.3	Do you find the food here good/very good?	14%	16%
5.4	Does the shop/canteen sell a wide enough variety of products?	50%	51%
5.6	Do you feel your religious beliefs are respected?	61%	60%
Can you speak to:			
5.7	A chaplain of your faith in private?	59%	58%
5.8	A peer mentor?	24%	35%
5.9	A member of the IMB (Independent Monitoring Board)?	22%	24%
5.10	An advocate (an outside person to help you)?	34%	38%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Young people who have been in local authority care	Young people who have not been in local authority care
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
6.1	Do most staff treat you with respect?	53%	60%
6.2	If you had a problem, would you have no-one to turn to?	31%	23%
7.1	Is it easy to make an application?	64%	76%
7.4	Is it easy to make a complaint?	37%	63%
8.1	Are you on the enhanced (top) level of the reward scheme?	25%	37%
8.2	Have you been treated fairly in your experience of the reward scheme?	31%	42%
8.3	Do the different levels make you change your behaviour?	36%	50%
8.4	Have you had a minor report since you have been here?	42%	46%
8.6	Have you had an adjudication ('nicking') since you have been here?	76%	69%
8.8	Have you been physically restrained (C and R) since you have been here?	38%	42%
9.1	Have you ever felt unsafe here?	40%	31%
9.2	Do you feel unsafe now?	10%	15%
9.4	Have you been victimised by other young people here?	24%	32%
Since you have been here, have other young people:			
9.5d	Threatened or intimidated you?	7%	8%
9.5i	Victimised you because of your race or ethnic origin?	2%	4%
9.5j	Victimised you because of your religion/religious beliefs?	0%	2%
9.5k	Victimised you because of your nationality?	0%	0%
9.5p	Victimised you because you have a disability?	0%	4%
9.7	Have you been victimised by staff here?	23%	21%
Since you have been here, have staff:			
9.8d	Threatened or intimidated you?	10%	4%
9.8i	Victimised you because of your race or ethnic origin?	0%	8%
9.8j	Victimised you because of your religion/religious beliefs?	0%	4%
9.8k	Victimised you because of your nationality?	0%	4%
9.8p	Victimised you because you have a disability?	0%	0%
9.10	If you were being victimised, would you tell a member of staff?	24%	38%
9.11	Do you think staff would take it seriously if you told them you had been victimised?	28%	37%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Young people who have been in local authority care	Young people who have not been in local authority care
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
<b>10.1a</b>	Is it easy/very easy for you to see the doctor?	61%	69%
<b>10.1b</b>	Is it easy/very easy for you to see the nurse?	75%	78%
<b>10.4</b>	Do you feel you have any emotional or mental health problems?	30%	22%
Do you currently take part in any of the following:			
<b>11.4a</b>	Education?	73%	77%
<b>11.4b</b>	A job in this establishment?	17%	26%
<b>11.4c</b>	Vocational or skills training?	3%	14%
<b>11.4d</b>	Offending behaviour programmes?	3%	15%
<b>11.4e</b>	Nothing?	17%	6%
<b>11.6</b>	Do you usually have association every day?	73%	69%
<b>11.7</b>	Can you usually go outside for exercise every day?	56%	61%
<b>11.8</b>	Do you go to the gym more than five times each week?	5%	6%
<b>12.1</b>	Are you able to use the telephone every day?	51%	54%
<b>12.2</b>	Have you had any problems with sending or receiving letters or parcels?	42%	40%
<b>12.3</b>	Do you usually have one or more visits per week from family and friends?	10%	54%
<b>13.2</b>	Do you have a training plan, sentence plan or remand plan?	48%	61%
<b>13.8</b>	Have you had a say in what will happen to you when you are released?	48%	54%

## Wing comparator



### Survey responses from children and young people: HMYOI Werrington 2017

**Survey responses** (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance. NB: This document shows a comparison between the responses from all young people surveyed in this establishment with all young people surveyed for the comparator.

#### Key to tables

	Any percentage highlighted in green is significantly better	A and B Wings	C Wing
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
<b>Number of completed questionnaires returned</b>		<b>77</b>	<b>18</b>
<b>SECTION 1: ABOUT YOU</b>			
1.1	Are you 18 years of age?	12%	5%
1.2	Are you a foreign national?	4%	0%
1.3	Do you understand spoken English?	100%	100%
1.4	Do you understand written English?	100%	100%
1.5	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other category.)	57%	29%
1.6	Are you Muslim?	29%	20%
1.7	Do you consider yourself to be Gypsy/Romany/Traveller?	6%	5%
1.8	Do you have any children?	13%	10%
1.9	Do you consider yourself to have a disability?	20%	6%
1.10	Have you ever been in local authority care?	45%	40%
<b>SECTION 2: ABOUT YOUR SENTENCE</b>			
2.1	Are you sentenced?	85%	100%
2.2	Is your sentence 12 months or less?	38%	45%
2.3	Have you been in this establishment for one month or less?	10%	35%
2.4	Is this your first time in custody in a YOI, secure children's home or secure training centre?	50%	60%
<b>SECTION 3: COURTS, TRANSFERS AND ESCORTS</b>			
On your most recent journey here:			
3.1	Did you feel safe?	79%	71%
3.2	Did you travel with any adults (over 18) or a mix of males and females?	24%	20%
3.3	Did you spend more than 4 hours in the van?	5%	5%
3.6	Were you treated well/very well by the escort staff?	64%	55%
3.7	Before you arrived, did you receive any helpful information to help you prepare for coming here?	10%	15%

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<b>SECTION 4: YOUR FIRST FEW DAYS HERE</b>			
<b>4.1</b>	Were you in reception for less than 2 hours?	<b>77%</b>	<b>71%</b>
<b>4.2</b>	When you were searched, was this carried out in a respectful way?	<b>84%</b>	<b>79%</b>
<b>4.3</b>	Were you treated well/very well in reception?	<b>84%</b>	<b>80%</b>
When you first arrived, did staff ask if you needed help or support with any of the following:			
<b>4.4a</b>	Not being able to smoke?	<b>42%</b>	<b>47%</b>
<b>4.4b</b>	Loss of property?	<b>12%</b>	<b>21%</b>
<b>4.4c</b>	Feeling scared?	<b>31%</b>	<b>53%</b>
<b>4.4d</b>	Gang problems?	<b>49%</b>	<b>47%</b>
<b>4.4e</b>	Contacting family?	<b>53%</b>	<b>68%</b>
<b>4.4f</b>	Money worries?	<b>12%</b>	<b>16%</b>
<b>4.4g</b>	Feeling worried/upset/needing someone to talk to?	<b>29%</b>	<b>32%</b>
<b>4.4h</b>	Health problems?	<b>58%</b>	<b>63%</b>
<b>4.4i</b>	Getting phone numbers?	<b>40%</b>	<b>42%</b>
<b>4.5</b>	Did you have any problems when you first arrived?	<b>71%</b>	<b>80%</b>
When you first arrived, did you have problems with any of the following:			
<b>4.5a</b>	Not being able to smoke?	<b>36%</b>	<b>44%</b>
<b>4.5b</b>	Loss of property?	<b>13%</b>	<b>13%</b>
<b>4.5c</b>	Feeling Scared?	<b>10%</b>	<b>13%</b>
<b>4.5d</b>	Gang Problems?	<b>12%</b>	<b>6%</b>
<b>4.5e</b>	Contacting Family?	<b>31%</b>	<b>20%</b>
<b>4.5f</b>	Money worries?	<b>22%</b>	<b>6%</b>
<b>4.5g</b>	Feeling worried/upset/needing someone to talk to?	<b>12%</b>	<b>13%</b>
<b>4.5h</b>	Health problems?	<b>14%</b>	<b>6%</b>
<b>4.5i</b>	Getting phone numbers?	<b>29%</b>	<b>13%</b>
When you first arrived, were you given any of the following:			
<b>4.6a</b>	Toiletries/basic items?	<b>87%</b>	<b>71%</b>
<b>4.6b</b>	The opportunity to have a shower?	<b>87%</b>	<b>71%</b>
<b>4.6c</b>	Something to eat?	<b>87%</b>	<b>80%</b>
<b>4.6d</b>	A free phone call to friends/family?	<b>86%</b>	<b>85%</b>
<b>4.6e</b>	PIN phone credit?	<b>48%</b>	<b>60%</b>
<b>4.6f</b>	Information about feeling worried/upset?	<b>34%</b>	<b>50%</b>

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Within your first 24 hours, did you have access to the following people or services:			
<b>4.7a</b>	A chaplain?	<b>30%</b>	<b>60%</b>
<b>4.7b</b>	A peer mentor?	<b>8%</b>	<b>10%</b>
<b>4.7c</b>	Childline/Samaritans	<b>11%</b>	<b>29%</b>
<b>4.7d</b>	The prison shop/canteen?	<b>3%</b>	<b>20%</b>
<b>4.8</b>	Before you were locked up on your first night, were you seen by a doctor or nurse?	<b>77%</b>	<b>80%</b>
<b>4.9</b>	Did you feel safe on your first night here?	<b>86%</b>	<b>71%</b>
<b>SECTION 5: DAILY LIFE AND RESPECT</b>			
<b>5.1</b>	Can you normally have a shower every day if you want to?	<b>52%</b>	<b>50%</b>
<b>5.2</b>	Is your cell call bell normally answered within five minutes?	<b>25%</b>	<b>45%</b>
<b>5.3</b>	Do you find the food here good/very good?	<b>12%</b>	<b>20%</b>
<b>5.4</b>	Does the shop/canteen sell a wide enough variety of products?	<b>48%</b>	<b>65%</b>
<b>5.5</b>	Is it easy/very easy for you to attend religious services?	<b>46%</b>	<b>50%</b>
<b>5.6</b>	Do you feel your religious beliefs are respected?	<b>69%</b>	<b>45%</b>
Can you speak to:			
<b>5.7</b>	A Chaplain of your faith in private?	<b>57%</b>	<b>63%</b>
<b>5.8</b>	A peer mentor?	<b>26%</b>	<b>40%</b>
<b>5.9</b>	A member of the IMB (Independent Monitoring Board)?	<b>22%</b>	<b>20%</b>
<b>5.10</b>	An advocate (an outside person to help you)?	<b>32%</b>	<b>45%</b>
<b>SECTION 6: RELATIONSHIPS WITH STAFF</b>			
<b>6.1</b>	Do most staff treat you with respect?	<b>54%</b>	<b>67%</b>
<b>6.2</b>	If you had a problem, would you have no-one to turn to?	<b>28%</b>	<b>16%</b>
<b>6.3</b>	Have staff checked on you personally in the last week to see how you are getting on?	<b>32%</b>	<b>56%</b>
<b>SECTION 7: APPLICATIONS AND COMPLAINTS</b>			
<b>7.1</b>	Is it easy to make an application?	<b>72%</b>	<b>68%</b>
<b>7.4</b>	Is it easy to make a complaint?	<b>49%</b>	<b>56%</b>
<b>7.7</b>	Have you ever felt too scared or intimidated to make a complaint?	<b>8%</b>	<b>0%</b>

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<b>SECTION 8: REWARDS AND SANCTIONS, AND DISCIPLINE</b>			
<b>8.1</b>	Are you on the enhanced (top) level of the reward scheme?	<b>24%</b>	<b>63%</b>
<b>8.2</b>	Have you been treated fairly in your experience of the reward scheme?	<b>33%</b>	<b>53%</b>
<b>8.3</b>	Do the different levels make you change your behaviour?	<b>42%</b>	<b>50%</b>
<b>8.4</b>	Have you had a minor report since you have been here?	<b>49%</b>	<b>21%</b>
<b>8.6</b>	Have you had an adjudication ('nicking') since you have been here?	<b>81%</b>	<b>37%</b>
<b>8.8</b>	Have you been physically restrained (Cand R) since you have been here?	<b>45%</b>	<b>5%</b>
<b>SECTION 9: SAFETY</b>			
<b>9.1</b>	Have you ever felt unsafe here?	<b>33%</b>	<b>37%</b>
<b>9.2</b>	Do you feel unsafe now?	<b>14%</b>	<b>5%</b>
<b>9.4</b>	Have you ever been victimised by other young people here?	<b>23%</b>	<b>42%</b>
Since you have been here, have other young people:			
<b>9.5a</b>	Made insulting remarks about you, your family or friends?	<b>14%</b>	<b>21%</b>
<b>9.5b</b>	Hit, kicked or assaulted you?	<b>11%</b>	<b>11%</b>
<b>9.5c</b>	Sexually abused you?	<b>0%</b>	<b>0%</b>
<b>9.5d</b>	Threatened or intimidated you?	<b>10%</b>	<b>5%</b>
<b>9.5e</b>	Taken your canteen/property?	<b>1%</b>	<b>0%</b>
<b>9.5f</b>	Victimised you because of medication?	<b>0%</b>	<b>0%</b>
<b>9.5g</b>	Victimised you because of debt?	<b>1%</b>	<b>0%</b>
<b>9.5h</b>	Victimised you because of drugs?	<b>1%</b>	<b>0%</b>
<b>9.5i</b>	Victimised you because of your race or ethnic origin?	<b>3%</b>	<b>5%</b>
<b>9.5j</b>	Victimised you because of your religion/religious beliefs?	<b>0%</b>	<b>5%</b>
<b>9.5k</b>	Victimised you because of your nationality?	<b>0%</b>	<b>0%</b>
<b>9.5l</b>	Victimised you because you were from a different part of the country?	<b>1%</b>	<b>5%</b>
<b>9.5m</b>	Victimised you because you are from a Traveller community?	<b>0%</b>	<b>0%</b>
<b>9.5n</b>	Victimised you because of your sexual orientation?	<b>0%</b>	<b>0%</b>
<b>9.5o</b>	Victimised you because of your age?	<b>0%</b>	<b>0%</b>
<b>9.5p</b>	Victimised you because you have a disability?	<b>1%</b>	<b>5%</b>
<b>9.5q</b>	Victimised you because you were new here?	<b>8%</b>	<b>5%</b>
<b>9.5r</b>	Victimised you because of your offence/crime?	<b>0%</b>	<b>0%</b>
<b>9.5s</b>	Victimised you because of gang related issues?	<b>6%</b>	<b>0%</b>

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<b>9.7</b>	Have you ever been victimised by a member of staff here?	<b>26%</b>	<b>6%</b>
Since you have been here, have staff:			
<b>9.8a</b>	Made insulting remarks about you, your family or friends?	<b>14%</b>	<b>0%</b>
<b>9.8b</b>	Hit, kicked or assaulted you?	<b>3%</b>	<b>0%</b>
<b>9.8c</b>	Sexually abused you?	<b>0%</b>	<b>0%</b>
<b>9.8d</b>	Threatened or intimidated you?	<b>8%</b>	<b>0%</b>
<b>9.8e</b>	Taken your canteen/property?	<b>3%</b>	<b>0%</b>
<b>9.8f</b>	Victimised you because of medication?	<b>0%</b>	<b>0%</b>
<b>9.8g</b>	Victimised you because of debt?	<b>0%</b>	<b>0%</b>
<b>9.8h</b>	Victimised you because of drugs?	<b>0%</b>	<b>0%</b>
<b>9.8i</b>	Victimised you because of your race or ethnic origin?	<b>6%</b>	<b>0%</b>
<b>9.8j</b>	Victimised you because of your religion/religious beliefs?	<b>3%</b>	<b>0%</b>
<b>9.8k</b>	Victimised you because of your nationality?	<b>3%</b>	<b>0%</b>
<b>9.8k</b>	Victimised you because you were from a different part of the country?	<b>0%</b>	<b>0%</b>
<b>9.8m</b>	Victimised you because you are from a Traveller community?	<b>0%</b>	<b>0%</b>
<b>9.8n</b>	Victimised you because of your sexual orientation?	<b>0%</b>	<b>0%</b>
<b>9.8o</b>	Victimised you because of your age?	<b>1%</b>	<b>0%</b>
<b>9.8p</b>	Victimised you because you have a disability?	<b>0%</b>	<b>0%</b>
<b>9.8q</b>	Victimised you because you were new here?	<b>1%</b>	<b>0%</b>
<b>9.8r</b>	Victimised you because of your offence/crime?	<b>1%</b>	<b>0%</b>
<b>9.8s</b>	Victimised you because of gang related issues?	<b>1%</b>	<b>0%</b>
<b>9.8t</b>	Victimised you because you made a complaint?	<b>8%</b>	<b>0%</b>
<b>9.10</b>	If you were being victimised, would you tell a member of staff?	<b>27%</b>	<b>44%</b>
<b>9.11</b>	Do you think staff would take it seriously if you told them you had been victimised?	<b>23%</b>	<b>67%</b>
<b>9.12</b>	Is shouting through the windows a problem here?	<b>30%</b>	<b>61%</b>
<b>SECTION 10: HEALTH SERVICES</b>			
<b>10.1a</b>	Is it easy for you to see the doctor?	<b>64%</b>	<b>71%</b>
<b>10.1b</b>	Is it easy for you to see the nurse?	<b>74%</b>	<b>85%</b>
<b>10.1c</b>	Is it easy for you to see the dentist?	<b>49%</b>	<b>57%</b>
<b>10.4</b>	Do you have any emotional or mental health problems?	<b>28%</b>	<b>15%</b>
<b>10.6</b>	Did you have any problems with alcohol when you first arrived?	<b>8%</b>	<b>29%</b>
<b>10.7</b>	Have you received any help with any alcohol problems here?	<b>6%</b>	<b>29%</b>
<b>10.8</b>	Did you have any problems with drugs when you first arrived?	<b>28%</b>	<b>23%</b>
<b>10.9</b>	Do you have a problem with drugs now?	<b>11%</b>	<b>7%</b>
<b>10.10</b>	Have you received any help with any drug problems here?	<b>24%</b>	<b>29%</b>
<b>10.11</b>	Is it easy/very easy to get illegal drugs here?	<b>21%</b>	<b>50%</b>

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<b>SECTION 11: ACTIVITIES</b>			
11.1	Were you 14 or younger when you were last at school?	41%	20%
11.2	Have you ever been excluded from school?	92%	88%
11.3	Did you ever skip school before you came into custody?	72%	94%
Do you currently take part in any of the following:			
11.4a	Education?	78%	59%
11.4b	A job in this establishment?	15%	47%
11.4c	Vocational or skills training?	4%	19%
11.4d	Offending behaviour programmes?	10%	12%
11.4e	Nothing	8%	12%
11.6	Do you usually have association every day?	69%	81%
11.7	Can you usually go outside for exercise every day?	59%	63%
11.8	Do you go to the gym more than five times each week?	8%	0%
<b>SECTION 12: KEEPING IN TOUCH WITH FAMILY AND FRIENDS</b>			
12.1	Are you able to use the telephone every day?	45%	88%
12.2	Have you had any problems with sending or receiving letters or parcels?	43%	27%
12.3	Do you usually have one or more visits per week from family and friends?	34%	56%
12.4	Is it easy/very easy for your family and friends to visit you here?	34%	44%
12.5	Do your visits start on time?	47%	50%
<b>SECTION 13: PREPARATION FOR RELEASE</b>			
Do you think you will have a problem with the following, when you are released:			
13.1a	Finding accommodation?	25%	8%
13.1b	Getting into school or college?	25%	0%
13.1c	Getting a job?	49%	23%
13.1d	Money/finances?	25%	15%
13.1e	Claiming benefits?	11%	0%
13.1f	Continuing health services?	8%	0%
13.1g	Opening a bank account?	23%	0%
13.1h	Avoiding bad relationships?	17%	8%
13.2	Do you have a training plan, sentence plan or remand plan?	56%	56%
13.5	Do you have a caseworker here?	100%	94%
13.8	Have you had a say in what will happen to you when you are released?	41%	86%