Report on an announced short follow-up inspection of

HMP/YOI Foston Hall

Toscana Unit

28 September – 1 October 2009 by HM Chief Inspector of Prisons

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Introduction

The Toscana Unit is one of the four small units set up to hold young women under 18. This is its second inspection. The first inspection found that a good start had been made to provide a secure and stable environment for a very challenging population. This inspection confirmed that this remained the case.

The unit remained a safe environment. Routine strip-searching had ceased and safeguarding policies had been revised. However, some policies had yet to be implemented fully and there were still shortcomings in some of the procedures to manage self-harm and bullying. The lack of detoxification or stabilisation provision on the unit meant that young women requiring this initial support had to be moved a long way from home.

Good multidisciplinary relationships were the foundation of security and stability on the unit, though this had not yet been translated into coordinated and coherent care planning. Personal officer work was improving, with more emphasis on family contact. Health services, well integrated into the life of the unit, were good and age appropriate.

Young women had plenty of time out of their cells, though we continued to have concerns about the restrictions imposed on young women on the basic incentives level. There was a broad and well-balanced education curriculum. Accreditation of vocational skills had improved significantly and learning support was good. There were some innovative opportunities available in PE.

Resettlement work had been informed by a needs analysis and links with training providers and voluntary organisations had been improved, to provide post-release opportunities for young women. Training planning had improved, as had the Connexions and substance misuse services.

This is another good report on a unit that is doing good work with some very damaged and sometimes difficult young women. The greater challenge is to ensure that they have the support they need after release to make best use of the opportunities they have been able to access in custody.

Anne Owers HM Chief Inspector of Prisons December 2009

Fact page

Task of the establishment

The Toscana unit is a dedicated unit for 17 year old young women, within Foston Hall, catering for the care and management of young women, providing regimes designed to prevent them from re-offending and safeguarding and promoting their welfare. We maintain a safe and secure environment and promote health and maintain well-being, thus enabling personal development, and to that end we promote the Toscana ethos.

Ethos of the Toscana unit

TALK ABOUT YOUR

OPPORTUNITIES IN A

SAFE AND
CARING ENVIRONMENT TO HELP
ADDRESS OFFENDING BEHAVIOUR, WHERE STAFF
NURTURE HOPE AND PROVIDE
ASSURANCE THAT WE ARE HERE TO HELP

We provide
UNDERSTANDING, WE
NEVER ABANDON, WE ACKNOWLEDGE
INSECURITIES AND HELP ALL YOUNG WOMEN TO HAVE
TOLERANCE AND MAKE THE MOST OF THEMSELVES.

Prison Service operational area

East Midlands

Number held

Unlock roll at 28 September 2009: 11

Certified normal accommodation

16

Operational capacity

17

Date of last full inspection

31 March to 4 April 2008

Brief history

The unit opened in January 2006 and comprises a 16-room unit, with integrated reception, healthcare, substance misuse, youth offending team and education department, including hairdressing, cookery and IT classes.

Description of residential units

The unit has 16 residential rooms, all with en suite facilities. One of the rooms is also fitted out with bunk beds, to raise the operational capacity to 17.

There is also an intensive supervision room which is currently not being used and is deemed by the Youth Justice Board to be not fit for purpose.

Section 1: Healthy prison assessment

Introduction

HP1 All inspection reports include a summary of an establishment's performance against the model of a healthy prison. The four criteria of a healthy prison are:

Safety prisoners, even the most vulnerable, are held safely

Respect prisoners are treated with respect for their human dignity

Purposeful activity prisoners are able, and expected, to engage in activity that

is likely to benefit them

Resettlement prisoners are prepared for their release into the community

and helped to reduce the likelihood of reoffending.

HP2 Under each test, we make an assessment of outcomes for prisoners 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 by the National Offender Management Service.

...performing well against this healthy prison test.

There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.

...performing reasonably well against this healthy prison test.

There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns.

...not performing sufficiently well against this healthy prison test.

There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.

...performing poorly against this healthy prison test.

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

This Inspectorate conducts unannounced follow-up inspections to assess progress against recommendations made in the previous full inspection. Follow-up inspections are proportionate to risk. Short follow-up inspections are conducted where the previous full inspection and our intelligence systems suggest that there are comparatively fewer concerns. Sufficient inspector time is allocated to enable inspection of progress and, where necessary, to note additional areas of concern observed by inspectors. Inspectors draw up a brief healthy prison summary setting out the progress of the establishment in the areas inspected. From the evidence available they also concluded whether this progress confirmed or required

amendment of the healthy prison assessment held by the Inspectorate on all establishments but only published since early 2004.

Safety

- HP4 At the previous inspection, we found that the Toscana unit was performing reasonably well against the healthy prison test of safety. We made three main recommendations, of which one had been achieved and two had not been achieved. We made 33 other safety recommendations, of which 18 had been achieved, three had been partially achieved, 10 had not been achieved and two were no longer relevant. We have made seven further recommendations.
- HP5 Young women were still not receiving the written information produced by the unit about what to expect when they arrived. The video link was now used regularly for inter-prison contact and interviews with other professionals, but it was not fully used for court appearances where appropriate.
- There was still no provision for young women requiring stabilisation or detoxification to avoid placing them long distances from home. New arrivals were dealt with well. Routine strip-searching had ceased and took place only following risk assessment and with the approval of a governor. Some work had been done with Childline in relation to our recommendation about the need for peer supporters for new arrivals, but there was still no peer support. Initial vulnerability assessments were completed to a consistently good standard.
- HP7 The induction programme was delivered more efficiently and there was greater emphasis on young women completing the process promptly so that they could start their education and training programme without delay.
- HP8 The safeguarding children and child protection policies had been revised and agreed with Derbyshire Children's Social Care. The policies covered the essential elements underpinning effective joint working relating to safeguarding. However, Derbyshire Children's Social Care had not always been represented at unit safeguarding meetings and their support in investigations had not reflected the revised policies. There were signs of greater stability. Progress would need to be monitored and taken up with the local safeguarding children board if aspects of the policies were not implemented as agreed.
- HP9 We previously recommended improved attendance at safeguarding committee meetings by the security department, but their attendance and the submission of appropriate data remained sporadic. Regrettably, there were no young women acting as safeguarding representatives as the unit had not wished to take this recommendation forward.
- HP10 The unit progress meetings provided a forum for multi-agency review of individual young women and minutes demonstrated ongoing information exchange. However, there was still no system of individual care planning and review to coordinate the separate procedures for care and behaviour management, such as ACCT (assessment, care in custody and teamwork), anti-social behaviour, rewards and sanctions and training planning. There was, therefore, the potential for the different systems to conflict and there were examples of this.

- HP11 Procedural frailties in the child protection referral system, which we identified previously, had been remedied and there was adequate management oversight. There was good analysis of child protection referrals, which was appropriately monitored by the safeguarding committee.
- HP12 We previously reported that there was no evidence of serious bullying on the unit and that most disputes between the young women were associated with predictable tensions common to small living groups and that remained the case. Mediation was used in the management of group disagreements and tensions. More needed to be done to identify the nature and extent of victimisation and intimidating behaviour by improved consultation with the young women and confidential surveys.
- HP13 At the previous inspection, we identified shortcomings in the quality of ACCT documentation. There was now a quality assurance system in place, but it was not sufficiently robust and poor quality care maps had not been highlighted for attention. However, young women we spoke to who were being monitored using the ACCT process said that they were well cared for. Parents, carers or next of kin were now notified when their children self-harmed, which improved information sharing and provided additional support. Reviews were multidisciplinary, although personal officers did not always contribute. The planning of reviews needed improvement so that all those involved could contribute in the most appropriate way.
- HP14 The level of adjudications had reduced significantly since the previous inspection and the rewards and sanctions scheme was used as the main remedy for minor breaches of rules. Addressing the young women's misdemeanours as they occurred was a sensible approach. However, robust monitoring and governance of the tickets and points system, which was part of the rewards and sanctions scheme, was lacking.
- HP15 Use of force had reduced slightly and was principally to prevent young women from hurting themselves. Individual documentation was thoroughly checked by managers, and use of force was part of the remit of the safeguarding committee. The use of force was always followed by a discussion with a member of staff after young women had calmed down. The intensive supervision room had been used infrequently and it had recently been taken out of commission because it had been deemed unfit for purpose. Young women exhibiting challenging behaviour were separated in their own cell, which was preferable, but required better governance. There had been two occasions when a young woman had been placed in the adult segregation unit, which was unacceptable.
- HP16 Overall, the unit continued to perform reasonably well against this healthy prison test.

Respect

- HP17 At the previous inspection, we found that the unit was performing well against the healthy prison test of respect. We made 25 recommendations, of which 16 had been achieved, three had been partially achieved and six had not been achieved.
- HP18 Consultation arrangements with young women had improved, but whole unit meetings were still infrequent. Applications were deal with efficiently and the few formal complaints that were submitted were responded to appropriately.

- HP19 Relationships between staff and young women continued to be good, and supported by a genuinely multidisciplinary approach. We observed this clearly demonstrated at morning meetings and progress meetings.
- HP20 Efforts had been made to facilitate better attendance of personal officers at meetings relating to the care of the young women they were responsible for and this had improved for training planning meetings. There was still inadequate attendance at ACCT reviews. There had been a drive to encourage personal officers to establish contact with families and this was working well.
- Individual and diverse needs were efficiently identified and assessed during the reception and induction process and this was distilled into a useful document which explained how different levels of learning difficulty could affect daily life on the unit. However, it was not being used to best effect. Foreign national young women received good care and attention to their needs. Celebration of diversity was excellent. We recommended at the previous inspection that impact assessments should be completed without delay and this had still not been undertaken.
- HP22 The chaplaincy service and level of pastoral care had improved significantly with the arrival of the youth chaplain. Young women had greater access to corporate worship and valued the support of the chaplain, who was an integral part of the multidisciplinary work on the unit.
- HP23 An up-to-date health needs assessment and a comprehensive nursing skills assessment had been carried out. Young women benefitted from a full-time primary care nurse who was also a qualified children's nurse. They had good access to healthcare services with a female GP who visited the unit each week. There was no waiting list for dental services. All other specialist services were delivered on the unit. Mental healthcare was provided by the establishment healthcare team and the child and adolescent mental health service (CAMHS) as required.
- HP24 Overall, the unit continued to perform well against this healthy prison test.

Purposeful activity

- HP25 At the previous inspection, we found that the unit was performing reasonably well against the healthy prison test of purposeful activity. We made 12 recommendations, of which seven had been achieved, four had been partially achieved and one had not been achieved. We made two main recommendations which were both achieved.
- HP26 Young women continued to enjoy a good deal of time out of their cells. Staff interacted well with young women during association and there was a good range of recreational and educational activities.
- HP27 However, our recommendation concerning young women on the lowest level of the rewards and sanctions scheme had been rejected by the establishment. These young women were locked up from lunchtime until their breakfast the following day. This was inappropriate, particularly in light of the lack of coordination between the management of particularly vulnerable young women and disciplinary procedures.

- HP28 Following a thorough review, the education curriculum was broad and balanced. The core education curriculum included careers education, covering topics such as employment skills and money management.
- HP29 The achievement of nationally recognised qualifications had improved by over 140% in the previous year. Most of the core education curriculum was now accredited formally through recognised qualifications. There were opportunities for young women on shorter sentences and on remand, but there was further scope to accredit achievements in literacy and numeracy for this group. A small number of young women continued with their GCSE studies while on the unit.
- HP30 Additional learning support was coordinated and well targeted. High-quality support was provided for young women whose first language was not English. They also received an hour of formal ESOL (English for speakers of other languages) support each day.
- HP31 Individual learning plans had been revised to incorporate helpful information about the unit and its regime. Young women were aware of their generic targets, but some targets were not sufficiently specific.
- HP32 Young women benefitted from a good balance of PE activities and most gained some form of accreditation. A small number had benefitted from innovative activities such as canoeing while on ROTL. There was access to recreational PE at the weekends, but not in the evenings. Two sports and games officers had been trained, but there was no scheduled programme of outdoor activities, although young women were able to go outside every day.
- HP33 There was good access to the library.
- HP34 Overall, the unit continued to perform reasonably well against this healthy prison test.

Resettlement

- HP35 At the previous inspection, we found that the unit was performing well against the healthy prison test of resettlement. We made 13 recommendations, of which nine had been achieved, none had been partially achieved and four had not been achieved.
- HP36 A resettlement needs analysis had been completed and the resettlement policy had been revised.
- HP37 The use of ROTL was promoted through training planning meetings and formed an important part of the reintegration process for a few young women.
- HP38 Progress had been made in establishing links with training providers and charitable organisations. A number of external organisations, including the Army, visited the unit and there were plans for a national charity to provide work placements for young women on release.
- HP39 Staff continued to ensure that young women convicted of a sex offence were assessed for their treatment needs and had access to appropriate interventions.

- HP40 The training planning process continued to provide a sound basis to prepare young women for release. The quality of target setting in training planning reviews and some elements of pre-release preparation had improved. Efforts were made to ensure that young women were discharged with suitable accommodation. More effort was needed to encourage and facilitate the attendance of families at training planning reviews. The first family day was about to be held. Connexions support had improved significantly. Healthcare discharge planning for young women was effective and there were good links with the local community. Personal officers attended a good number of post-release reviews.
- HP41 A thorough needs analysis to inform the substance misuse strategy had been carried out and was regularly updated. A much greater range of age- and gender-appropriate services had been developed. The young people's substance misuse service (YPSMS) had good community links for individual young women and attended some post-release reviews. The establishment had made efforts to make mandatory drug testing (MDT) procedures less threatening for young women within existing national guidelines.
- HP42 Overall, the unit continued to perform well against this healthy prison test.

Section 2: Progress since the last report

The paragraph reference number at the end of each recommendation below refers to its location in the previous inspection report.

Main recommendation to the Youth Justice Board & the Primary Care Trust

2.1 The YJB and the primary care trust should work in partnership to ensure that the unit is able to accept, safely accommodate and treat substance-dependent young women requiring stabilisation or detoxification, to avoid the necessity to place young women long distances from their home area to access an appropriate service. (HP43)

Not achieved. Young women who needed stabilisation or detoxification were sent to Eastwood Park or New Hall. Clinical expertise was available on the unit, but 24-hour nurse cover to monitor young women in the early stages of detoxification and stabilisation was still not being provided.

We repeat the recommendation.

Main recommendations

to the governor

2.2 Young women should be strip-searched only on the basis of a thorough risk assessment that indicates this is necessary to protect them or others from harm. (HP40)

Achieved. Following a change in policy, routine strip-searching no longer took place. We found an example of strip-searching carried out appropriately following completion of a risk assessment. However, there was no central record showing how often and under what circumstances this procedure was carried out.

Further recommendation

- 2.3 A log should be kept containing relevant information about all incidents of strip-searching and this should be monitored by the safeguarding committee.
- 2.4 The current multi-systems of care planning should be amalgamated to provide one individual care plan for each young woman and a single system of review. (HP41)

Not achieved. The various aspects of individual care planning and behaviour management, such as ACCT, anti-social behaviour, rewards and sanctions and training planning, were separately recorded and discussed at multidisciplinary meetings. The weekly unit progress meetings provided an effective forum for a multidisciplinary review of individual cases. However, while the minutes of the meetings demonstrated ongoing information exchange, no course of action relating to the overall care of the young woman was decided. There was still no coordinated system for providing a coherent care plan which staff could implement and young women could understand. This lack of overall planning had the potential to lead to conflicting systems and an imbalance between care and control. A clear example of conflicting practice that we observed was a young woman who had lost her association time as a result of punishments imposed through the rewards and sanctions scheme, but was also being monitored for self-harm, as well as being supported and encouraged to mix on the unit after she had been the victim of bullying. An overarching care plan would have considered all

aspects of her behaviour and experience and ensured consistency of care and control across all unit activities.

We repeat the recommendation.

2.5 Family days should be held at least four times a year. (HP42)

Not achieved. There had been no family days, although planning for the first family day at the end of October was well advanced and invitations had been sent out. All the young women on the unit were involved in the preparations.

We repeat the recommendation.

2.6 Access to careers education and guidance, including regular input from Connexions, should be improved. (HP44)

Achieved. The input from the Connexions service had improved significantly since the previous inspection. The personal adviser attended the unit for two and a half days a week and had established strong relationships with the young women. The core education curriculum included careers education, covering topics such as employment skills and money management.

2.7 Levels of formal accreditation in education, ICT and vocational areas should be improved. (HP45)

Achieved. The level of accreditation achieved by young women had increased substantially since the previous inspection. The achievement of nationally recognised qualifications had improved by over 140% in the previous year. Most of the core education curriculum was accredited formally through qualifications recognised by employers and colleges of further education.

Other recommendations

to the Youth Justice Board

Courts, escorts and transfers

2.8 Escort providers should ensure that young women travelling to the Toscana unit are given information produced by the unit about what to expect before their arrival. (1.6)

Not achieved. Appropriate material had been produced by the unit and supplied to the escort providers to inform young women about what to expect. On arrival at the unit, young women were asked by reception staff if they had received this information and in all cases they said they had not. Escort providers were in fact not best placed to ensure that the available information was given to young women in court, but court officers from the youth offending team (YOT) were.

Further recommendation

2.9 YOT court officers should ensure that young women travelling to the Toscana unit are given information produced by the unit about what to expect before their arrival.

Training planning and remand management

2.10 Young women convicted of a sex offence should be assessed for their treatment needs and have access to appropriate interventions. (8.18)

Achieved. Since the previous inspection, two young women convicted of a sex offence had been held on the unit. Assessments had been completed in both cases, resulting in the provision of specialist input to address the offending behaviour.

Substance use

2.11 The adult-oriented procedures of mandatory drug testing are not appropriate for young women and should not be used. (8.36)

Not achieved. The establishment had made efforts to minimise the distressing aspects of mandatory drug testing (MDT). Young women were accompanied by a unit officer and stripsearches were no longer undertaken. The long-awaited review of MDT for young people, which was conducted by the Ministry of Justice and the YJB, had still not been published. **We repeat the recommendation**.

Other recommendations

to the governor

Courts, escorts and transfers

2.12 Young women should be given the opportunity to record their experience while under escort through a well publicised comments or complaints procedure. (1.7)

Not achieved. All young women were asked by reception staff about their experience of being transported to the unit, but few issues were raised and there was no procedure for recording and aggregating this information. There was no procedure for young women to comment directly and they were not advised on arrival about the complaints system. **We repeat the recommendation**.

2.13 A video link should be available for appropriate court hearings. (1.8)

Achieved. A video link was now available and had been used for the previous four months. Good use was being made of the link for inter-prison contact and for interviews with community based specialists. Some use had been made of it for court hearings, but there was scope to increase this.

Further recommendation

2.14 Greater use should be made of the video link for court-related work.

First days in custody

2.15 A peer based meet and greet support scheme should be introduced. (1.23)

Not achieved. Discussions had taken place with Childline about how to proceed with this initiative. However, staff had reservations about the value of peer support and preferred to offer new arrivals support from staff so had not proceeded with the initiative. **We repeat the recommendation**.

2.16 The induction process should be shortened so that young women can become actively involved in the regime more quickly. (1.24)

Achieved. The induction programme had been reduced from four to three days. There was a greater emphasis on getting new arrivals to complete the process in a timely manner so that they were able to begin their education and training programme without delay.

Additional information

2.17 We observed one young woman being admitted in the evening and she was treated well. Staff were patient and sensitive and took time to ensure that she understood everything that was happening. The reception officer conducting the initial interview put the young woman at her ease and managed to elicit relevant background information which was not contained in the accompanying information. The initial vulnerability assessments that we sampled were of a consistently good standard. E-Asset information was used well to inform the process.

Residential units

2.18 All young women should attend the unit consultative 'Have Your Say' meetings to discuss issues of interest and any emerging problems. The meeting should be chaired by a senior manager to encourage the involvement, ownership and investment of all young women in an agreed policy of acceptable behaviour. (2.10)

Not achieved. The unit consultative meetings were attended by a representative of the young women to put forward their views. The meetings covered an appropriate range of topics and there was opportunity for other items to be raised and discussed. We observed one meeting at which it was made clear that other young women were welcome to attend if they wanted to raise an issue of interest to them. Community meetings were held on an ad hoc basis to discuss issues of interest to all the young women, for example unit cleanliness. While these meetings were a positive initiative for young women, they were not recorded and there was no mechanism for following up agreed actions.

We repeat the recommendation.

Personal officers

2.19 Personal officers should attend training planning meetings and assessment, care in custody and teamwork (ACCT) reviews. (2.21)

Partially achieved. Greater efforts were made to organise meetings so that personal officers could attend and there had been an improvement in the number of training planning meetings attended by personal officers, which now occurred in approximately three-quarters of cases. However, personal officers attended fewer than one-third of ACCT reviews and there remained scope for improvement.

We repeat the recommendation.

2.20 The role of the personal officer should be extended to cover contact with families and pre-release work. (2.22)

Achieved. Personal officers were encouraged to establish and maintain greater contact with family members. New contact sheets had been introduced in the wing records which showed that some progress had been made in this respect. Personal officers sometimes accompanied young women on release on temporary licence (ROTL) and attended about half the first reviews in the community.

Additional information

2.21 We previously reported that relationships between staff and young women were very good and supported by a genuinely multidisciplinary approach. This remained the case and was well demonstrated at morning meetings and the weekly progress meetings.

Safeguarding

2.22 The safeguarding children and child protection policies should be signed by all departments and organisations with responsibilities set out in the policies to ensure that they are properly accountable. (3.8)

Achieved. The safeguarding children and child protection policies had been published in December 2008 and signed by the governor and a representative from Derbyshire Children's Social Care. The safeguarding policy had also been signed by the area manager. The policies were comprehensive and outlined the responsibilities of all parties to deliver services and facilitate effective joint working.

2.23 There should be trend analysis in all safeguarding areas to identify patterns or trends over time. (3.9)

Not achieved. The safeguarding committee met bi-monthly and was chaired by the head of unit, who was also head of safeguarding. The committee was provided with information by all safeguarding areas, with the exception of injuries to young people. However, child protection was the only area to monitor patterns and trends consistently. Other safeguarding areas, such as healthcare, provided the number of young women who had used the service and education provided the number of young women not attending. The minutes of the meetings held during 2009 recorded very limited discussion and analysis of the information provided. **We repeat the recommendation**.

2.24 A resident from the unit should be encouraged and enabled to attend safeguarding committee meetings while maintaining appropriate confidentiality. (3.10)

Not achieved. We repeat the recommendation.

Additional information

2.25 While the safeguarding and child protection policies covered all the essential components to underpin effective joint working, the safeguarding policy described joint training arrangements which had not been implemented. We were told that progress had been hampered over the previous few months by a hiatus in the liaison arrangements with Derbyshire Children's Social Care. We noted that a representative from the local authority had attended only one of the four safeguarding meetings during 2009 and the response to child protection referrals was not always as described in the revised strategy, although action had been taken in all cases. We

were told that recent changes to the liaison role had brought greater stability and consistency to the arrangements.

Further recommendation

2.26 The establishment should liaise with Derbyshire Children's Social Care to ensure that unit staff receive specialist training delivered by child protection professionals.

Bullying

2.27 A single safer custody officer for the unit should be appointed to oversee the operation of current anti-bullying, violence reduction and assessment, care in custody and teamwork (ACCT) procedures. The officer should have a job description, be trained, have dedicated time for the role, collect appropriate management information, provide comprehensive reports to the safeguarding committee and attend these meetings regularly. (3.25)

Achieved. The unit had not appointed a single person as safer custody officer, but had appointed lead and support officers who ensured that the new anti-social behaviour policy, which had replaced the anti-bullying policy in May 2008, was implemented. The safer custody manager for the whole establishment took the lead on ACCT procedures and also had overall responsibility for violence reduction. The new arrangements were working effectively.

2.28 Advocates should be informed of any young woman being victimised and should offer them support. (3.26)

Achieved. The advocate attended the unit for about an hour each week. Young women who were being victimised by others were referred to her, or she identified vulnerable young women from the unit observation book. Young women were offered limited support by the advocate.

2.29 Staff training should be accurately recorded and monitored by the safeguarding committee. (3.27)

Achieved. Information on staff training was a standing agenda item and was routinely discussed at the safeguarding meetings and based on accurate records provided.

Additional information

- 2.30 Following the previous inspection, we reported that there was no evidence of serious bullying on the unit and most incidents reported and dealt with as bullying were associated with predictable tensions common to small living groups. That remained the case. However, little was done to find out the nature and extent of victimisation and intimidating behaviour through consultation with the young women or confidential surveys.
- 2.31 A small team of staff had been trained to implement the new anti-social behaviour policy and they delivered individual sessions to the remainder of the staff group to ensure that the new policy was understood. The policy did not describe young women as bullies, but referred to their behaviour as anti-social and sought to encourage them to think about their actions and support them in making changes. Emphasis was placed on identifying victimisation at an early stage and preventing escalation. Young women were encouraged to talk about the tensions

that arose between them. In our survey, 73% of young women said that if they told a member of staff they were feeling victimised, it would be taken seriously, which was significantly better than the comparator of 37%.

- 2.32 From January to April 2009, 16 young women had been subject to anti-bullying measures. Only two young women had been placed on the second stage for action, which included loss of association and being locked in their cells. There was good governance of these procedures and a multidisciplinary group of staff met each week to consider individual young women. Young women were advised of the decisions made and the two we spoke to said they felt that the system was fair and helped them to realise the impact their behaviour had on others. While staff described their interventions with young women as 'mediation', they had not been formally trained in the practice.
- 2.33 The young women we spoke to who had been victimised by others said that they felt supported by staff.

Further recommendations

- 2.34 Efforts should be made to find out the nature and extent of victimisation and intimidating behaviour through consultation with the young women or confidential surveys.
- **2.35** Staff should be trained in mediation techniques.

Self-harm and suicide

2.36 The suicide and self-harm prevention annex to the safeguarding policy should be revised alongside the review of care planning to provide clarity about the relationship between the assessment, care in custody and teamwork (ACCT) process and individual care planning and review. (3.38)

Not achieved. One suicide prevention policy covered the whole establishment and contained nothing specific to the Toscana unit. The unit had not yet implemented an individual care planning and review process, covering all elements of care and behaviour management (see also 2.4).

We repeat the recommendation.

2.37 There should be a presumption that parents, carers or next of kin are notified when children or young people self-harm unless there are clearly documented reasons for not doing so agreed by a multidisciplinary staff group. When contact has been made, the response to this information should be recorded. (3.39)

Achieved. All parents and carers were notified when a young woman self-harmed after discussion at a multidisciplinary review meeting. The response to the contact was recorded on the ACCT observation sheets. We were told by a young woman that, while she had been initially reluctant for her parent to know about an incident of self-harm, she was pleased to be able to sit with the YOT worker when the telephone call was made to her mother, having discussed it fully with her beforehand.

2.38 The quality of ACCT documents should be audited regularly by the suicide prevention coordinator and a sample quality checked by the safeguarding committee. (3.40)

Partially achieved. ACCT documents were audited regularly by the safer custody manager responsible for suicide prevention across the establishment. However, this was primarily to ensure that the document had been fully completed rather than to check the quality of the entries and we came across no comments about the quality of the records. We were told that if entries on a document were considered to be particularly poor, an email was occasionally sent to the member of staff responsible. An ACCT case manager we spoke to said that they had never received any feedback on the quality of the assessment and review process. There was no quality check of ACCT documents by the safeguarding committee.

Further recommendation

2.39 The audit of ACCT documentation should be extended to include the quality as well as the regularity of the entries. The quality assurance process should be overseen by the safeguarding committee.

2.40 ACCT reviews should be multidisciplinary. (3.41)

Partially achieved. ACCT reviews were often multidisciplinary, but we came across some examples in which only residential officers had been in attendance with the young woman. However, there was no indication that attendance at reviews was planned to ensure consistency or that an initial decision had been made about which staff should attend and which should make written contributions. Personal officers did not make regular contributions and the case manager chairing the review changed regularly. However, case managers always knew the young person who was subject to the review due to the small size of the unit population.

Further recommendation

- 2.41 Staff participation at ACCT reviews should be planned, so that staff who have a relevant contribution can attend or provide a written contribution if appropriate.
- 2.42 A peer support scheme should be developed. (3.42)

Not achieved. There was no peer support scheme on the unit, although consideration had been given to a scheme and training had been arranged with Childline (see also 2.16). **We repeat the recommendation**.

2.43 There should be adequate first aid-trained staff working at night and emergency radio codes to ensure that healthcare staff are alerted to the nature of an emergency. (3.43)

Partially achieved. Night duty was undertaken by unit staff on a rota basis. Some staff had been trained in first aid, but we were told that it was difficult to release all staff for a four-day training course. Emergency radio codes were now in place.

Further recommendation

2.44 All night staff should be trained in first aid.

Additional information

- 2.45 We examined a small sample of ACCT documentation and found that initial assessment, care maps and records of reviews generally lacked sufficient detail. We came across some poor targets in our sampling exercise, such as 'For J to put effort into her attitude'. Some actions in the care maps placed responsibility inappropriately on the young woman, illustrated by the following action point 'to keep herself busy and not let her mind wander'. The observation logs gave a significant amount of detail. Night observations were fully described, but timings did not always vary to ensure that young women could not detect a regular pattern of observations.
- 2.46 Young women subject to ACCT monitoring said that they were well cared for.

Child protection

2.47 All child protection information reports should be copied to the unit manager and duty governor to maintain an element of management oversight independent of operational unit staff at the initial notification stage. (3.50)

Achieved. Twenty-four child protection information reports had been raised in 2009 and had all been signed by the head of the unit or the duty governor for the establishment. Governors had made additional comments on a number of referrals. All child protection information reports had been completed properly and had been agreed and signed by a representative of Derbyshire Children's Social Care.

2.48 All child protection information reports concerning allegations against staff should be passed to Derbyshire Children's Social Care for investigation. (3.51)

Achieved. There had been one allegation against a member of unit staff during 2009, which had been sent to Derbyshire Children's Social Care. The local authority designated officer had advised that it did not require external investigation and that an internal enquiry would suffice. This had been carried out and the final decision reported to the local authority.

2.49 The safeguarding committee should monitor the progress of all child protection information reports, including action taken and outcomes. (3.52)

Achieved. The child protection coordinator provided updates on child protection information reports to the safeguarding committee. Progress and outcomes were monitored and actions recorded.

2.50 There should be ongoing analysis of child protection information reports to identify patterns and trends to inform the development of the child protection policy. (3.53)

Achieved. Statistical data relating to child protection were comprehensive and analysis to identify patterns and trends had been carried out since January 2008.

2.51 All staff working with children should be trained in child protection and have enhanced Criminal Records Bureau clearance. (3.54)

Achieved. Unit records indicated that all staff working directly with young women had had enhanced CRB clearance. One residential officer had not been trained in child protection

through the juvenile awareness staff programme (JASP) training, but was awaiting a place on the course. No staff had attended child protection training provided by the local authority.

Additional information

- 2.52 Data showed that the disclosure of historical abuse was the most common reason for completing a child protection referral. Allegations against staff during the previous nine months had considerably reduced since the previous inspection.
- 2.53 Referrals came from a number of internal sources, including healthcare, the establishment youth offending team (YOT), the young people's substance misuse service (YPSMS), unit staff, the chaplaincy and a child and adolescent mental health service (CAMHS) worker. Young women could use a counselling service provided by CAMHS to help them following a disclosure of historical abuse. There were three young women using this service at the time of the inspection.

Race equality and diversity

2.54 All staff on the unit should be trained in diversity. (3.62)

Not achieved. The 'Challenge It, Change It' training was being delivered across the establishment. Some staff on the unit had attended the training, but not all had done so. We repeat the recommendation.

2.55 Young women should be regularly consulted about diversity issues, with diversity added to the 'Have Your Say' meetings as a standing agenda item. (3.63)

Achieved. Diversity had been added to the 'Have your say' meetings as a regular agenda item. A young woman representative from the unit attended the establishment diversity and race equality action team (DREAT) meetings and the unit manager had raised the need for the young woman to be involved in pre-meetings with prisoner representatives.

2.56 Impact assessments should be completed without delay. (3.64)

Not achieved. Guidance had been sought on completion of the revised impact assessments, but they had not been completed.

We repeat the recommendation.

Additional information

- 2.57 There were good systems for identifying the diverse needs of young women during reception and induction. Young women were asked about disabilities and the education department undertook a range of diagnostic work to identify any learning difficulties or disabilities and arrange for appropriate support. Information about each young woman was distilled into a useful document which explained how different levels of learning difficulty could affect daily life on the unit. It was not clear how this information was shared, particularly with residential staff. The celebration of diversity on the unit was very good, with the education department providing a strong lead.
- 2.58 The support provided to foreign national young women remained good. There were two foreign national young women on the unit during the inspection, one of whom did not speak English. Regular and appropriate use was made of telephone translation services. Staff were alert to

the potential for isolation created by the language barrier and the need to ensure that the young woman, who had no family in the country, had a weekly telephone call to her family overseas. Since the previous inspection, a member of the education team had undertaken ESOL (English for speakers of other languages) training and some excellent education support had been offered to the young woman who did not speak English.

Contact with the outside world

2.59 Mail should be opened only to check for unauthorised enclosures or to carry out legitimate or targeted censorship. (3.76)

Achieved. Five per cent of incoming and outgoing mail was randomly checked, as well as the mail of any young woman for whom child protection issues had been identified. Money orders were removed from mail and recorded in the main establishment.

Applications and complaints

2.60 There should be an audit trail so that staff ensure that applications are dealt with expeditiously. (3.82)

Achieved. Applications were dealt with using a three-page carbon copy form which allowed the young woman to keep a copy of her application as a receipt. The top copy was given with the response, while the middle sheet was held by the unit as a record to check progress. A log of applications was kept in the unit office. We did not receive any complaints about delays in dealing with applications.

2.61 Complaints should be analysed to determine patterns and trends. (3.83)

Achieved. An average of two complaints a month had been made since April 2009. These were reviewed by the head of unit and analysis was carried out. The completed complaints that we observed showed that they were being considered and responded to appropriately.

Health services

2.62 The primary care trust should ensure that an up-to-date health needs assessment, including child and adolescent mental health services, is carried out without delay to inform further healthcare development. (4.32)

Achieved. The primary care trust (PCT) had completed a health needs assessment which included provision of child and adolescent mental health services and an intention to extend the service.

- 2.63 A comprehensive nursing skills assessment should be carried out in conjunction with the primary care trust to ensure that the nurses on the unit have all the necessary nursing skills to meet the needs of the young women. (4.33)
- 2.64 Achieved. The unit benefitted from a full-time primary care nurse, who was also qualified as a specialist children's nurse. She was supported by a healthcare assistant. A nursing skills assessment had been carried out in conjunction with the PCT. The need had been identified for an additional 1.8 whole-time equivalent Band 5 nurses, which would ensure that sufficient cover was provided to meet the needs of the young women.

2.65 Clinical governance meetings to include staff management and accountability should be formalised with the primary care trust. (4.34)

Achieved. Bi-monthly clinical governance meetings with the PCT had been established and included staff management and accountability.

2.66 Regular clinical supervision for nursing staff should be formalised with the primary care trust. (4.35)

Achieved. Systems had been developed to ensure that clinical supervision was formalised and documented. The lead nurse provided clinical supervision for her staff and received clinical supervision from the head of healthcare in the main establishment.

2.67 Custody staff on duty on the unit should receive defibrillator training. (4.36)

Not achieved. At the time of the inspection, the PCT was in the process of securing a training provider and seeking funds from the unit budget. All staff had received resuscitation training and the establishment provided 24-hour healthcare. **We repeat the recommendation.**

2.68 Nursing staff should receive the relevant IT training necessary to maintain the care plans and lifelong condition register appropriately. (4.37)

Achieved. All staff had been trained in the use of SystmOne and were able to maintain care plans and lifelong condition registers.

2.69 A dental nurse should conduct dental triage with subsequent referral to the dentist. (4.38)

Achieved. Dental triage was being conducted each week by the dental nurse, with subsequent referral to the dentist as required.

2.70 The dental nurse should provide group oral health promotion as well as individual sessions. (4.39)

Achieved. The service level agreement had been revised to include the provision of more sessions, as well as a monthly group session specifically for oral health promotion.

2.71 Out-of-hours dental services should be improved. (4.40)

Achieved. Out-of-hours dental cover was provided by the establishment doctor or nurse practitioner and/or the local dental access centre. The dental team had established clear protocols for the management of out-of-hours dental emergencies by the healthcare team. Routine dental services were provided in the main establishment, with appointments for young women at the beginning or end of sessions. There was no waiting list.

2.72 The service level agreement for pharmacy provision between the provider and the prison should be reviewed to increase the involvement of the pharmacist and/or technician in administration of medicines, one-to-one sessions and health promotion. (4.41)

Partially achieved. A new provider of pharmacy services had been appointed in 2008 and the new service level agreement ensured that the pharmacy technicians included the unit in all

health promotion activities. The pharmacist and technicians had been closely involved in the administration of medicines, but young women did not have the opportunity to see the pharmacist for one-to-one sessions.

Further recommendation

- 2.73 Pharmacist-led clinics should be provided for young women on the unit.
- 2.74 Medicines issued for named patients should not be returned to stock. (4.42)

Achieved. Medicines issued for named patients were no longer returned to stock and compliance was being monitored.

Additional information

- 2.75 Healthcare services were commissioned by Derbyshire County Primary Care Trust. Primary care services were provided by the Prison Service and mental health services, including CAMHS, were provided by Derbyshire Mental Health Trust. General practitioner services were provided by Derbyshire Health United and a female GP visited the unit each week. Young women had good access to a small dedicated healthcare facility and a separate area for medicine administration.
- 2.76 Mental health care was provided by CAMHS, but was limited. This had been identified by the PCT in the health needs assessment and particular emphasis had been given to the development of additional services.
- 2.77 Discharge planning for young women was satisfactory and good links were maintained with the local community. YOT workers provided information and signposting to community services around the time of release.

Education, training and library provision

2.78 The availability of accreditation for young women on shorter sentences and remand should be increased. (5.13)

Partially achieved. Opportunities for young women on shorter sentences and on remand to gain formal accreditation had improved since the previous inspection. For example, the accreditation of achievements in ICT had increased significantly. However, there was further scope to accredit achievements in literacy and numeracy for young women on shorter sentences and on remand.

Further recommendation

- 2.79 There should be more accreditation in literacy and numeracy for young women on shorter sentences and on remand.
- 2.80 The amount of accreditation available above level one should be increased. (5.14)

Achieved. More accreditation was available at level two and young women had gained significant awards at level two in literacy and numeracy. Key skills, such as working with

others, problem solving and improving learning, had been introduced at level three, along with vocational qualifications, such as hairdressing and beauty therapy. A small number of young women continued with their GCSE studies while on the unit.

2.81 The amount of additional support available should be increased, especially for young women whose first language is not English. (5.15)

Achieved. Additional learning support was coordinated and well targeted. Most young women made progress with literacy and numeracy, but this needed to be properly recorded. Well-qualified learning support assistants (LSAs) provided in-class support for young women whose levels of literacy and numeracy required development. High-quality support was provided for young women whose first language was not English, enabling them to achieve as well as their peers in practical lessons. They also received an hour of formal ESOL support each day.

2.82 Young women's progress should be monitored more formally. (5.16)

Achieved. Fortnightly tutorials were held with young women to discuss their progress in education and to update individual learning plans (ILPs). These tutorials, facilitated by LSAs, provided a good balance of academic and pastoral support. Issues raised during the tutorials were followed up through the education manager with the appropriate member of staff. Young women completed a simple tutorial progress form during the tutorial to help them focus and reflect on their recent performance.

2.83 Target-setting and the use of individual learning plans should be more consistent. (5.17)

Partially achieved. ILPs were comprehensive and had been revised to incorporate helpful information about the unit and its regime. Young women were aware of their generic targets, but some targets were not sufficiently specific to be properly measurable.

Further recommendation

- **2.84** Targets within ILPs should be specific and measurable.
- 2.85 There should be more engagement with employers. (5.18)

Partially achieved. Some progress had been made in establishing links with training providers and charitable organisations. A number of external organisations, including the Army, visited the unit. Plans were in place with a national charity to provide work placements on release.

2.86 The education department's policies should be implemented, monitored and evaluated. (5.19)

Achieved. A thorough review had resulted in a broad, balanced curriculum which provided young women with opportunities to gain skills and knowledge in a range of subjects. The tutorial policy and the policy on learning support, including ESOL, had been fully implemented. The self-assessment process had resulted in the production of a detailed evaluative report which was largely accurate in identifying the main strengths and areas for development.

Physical education and health promotion

2.87 Plans for the revised provision of PE should be implemented. (5.25)

Achieved. Young women benefitted from a balance of activities which provided experience of team games and opportunities to develop their individual health and fitness. Most young women gained some form of accreditation. A small number of young women had participated in innovative activities, such as canoeing, while on ROTL.

2.88 Staff should be trained to enable them to support young women in recreational activities during timetabled periods in the fresh air. (5.26)

Partially achieved. Although two sports and games officers had been trained, there were no scheduled outdoor activities in the evenings after lessons had finished. We observed young women walking aimlessly in circles in the grounds during evening association. Although staff were interacting well with the young women, it was a wasted opportunity to engage them in purposeful recreational outdoor activity.

Further recommendation

2.89 A programme of purposeful recreational outdoor activities should be developed.

Additional information

- 2.90 A thorough initial assessment of young women's abilities in literacy and numeracy was carried out and any additional needs were well provided for. Teaching was generally good and standards were particularly high in cookery, poetry and artwork. Young women behaved well in lessons and relationships between young women, teaching staff and officers were very good.
- 2.91 Following a thorough review, the curriculum was well planned and enabled young women to experience a wide range of academic and practical subjects, including independent living skills and resettlement-based topics, such as budgeting and money management. Particularly good attention was paid to equality and diversity.
- 2.92 Access to the library was good and included an innovative reading group which helped the young women to improve their reading and oral communication skills and which they enjoyed.

Faith and religious activity

2.93 All young women should have the opportunity to be supported by a chaplain or faith representative who contributes to their overall care and resettlement. (5.31)

Achieved. A part-time chaplain attended the unit several times a week and undertook group and one-to-one work. She met all new arrivals and arranged for their faith needs to be met. She organised enrichment activities and was well known to the young women. During the inspection, we saw young women approach her to discuss significant events. She attended training planning meetings, particularly if there was nobody else to support the young woman in a non-professional capacity. She attended the unit weekly progress meetings and it was clear that she was an integral part of the unit team.

2.94 Young women should not be required to book several days in advance to attend corporate worship. (5.32)

Achieved. A risk assessment was carried out after reception to determine a young woman's suitability to attend corporate worship with the adult women. Young women indicated on the day of the service if they wished to attend.

Time out of cell

2.95 Young women on the lowest level of the rewards and sanctions scheme should always be allowed to spend some time out of their cells on weekend afternoons. (5.38)

Not achieved. Young women on the basic level of the rewards and sanctions scheme were locked up at lunchtime at weekends and could not participate in any afternoon association activities. This meant that they were locked up from lunchtime until their breakfast the following day.

We repeat the recommendation.

Additional information

2.96 The young women on the unit generally benefitted from plenty of time out of their cells. During the week, there was a range of activities in the evenings and at weekends and staff interacted with the young women well, although it was unclear how the activities were planned and coordinated. We did not observe much use of the outside areas, although good use had been made of one area to create a garden which young women helped the part-time gardener to maintain. This included vegetables and fruit which were used in cookery lessons, as well as a pond and compost area which enabled the young women to learn about the environment.

Security and rules

2.97 There should be improved attendance by the security department at the safeguarding committee. All incident reports and security information relating to the unit and collated by the security department should be monitored, analysed and reported to the committee. (6.12)

Not achieved. Security staff did not attend the safeguarding meetings regularly. Very limited security information was provided at the meetings and sometimes no information was available.

We repeat the recommendation.

Discipline

2.98 Monitoring of disciplinary procedures should be improved to identify any trends. (6.25)

Partially achieved. Records of disciplinary procedures had improved through better monitoring, allowing monthly comparisons to be made. There was no evidence that this material had been used to identify patterns and trends. **We repeat the recommendation**.

2.99 Advocates should have a more prominent role in supporting young women through disciplinary hearings. (6.26)

Achieved. Although young women were always given the opportunity for an advocate to attend adjudications with them, they almost always declined.

2.100 More use should be made of the rewards and sanctions scheme in response to minor breaches of rules. (6.27)

Achieved. The revised rewards and sanctions scheme, which had been introduced 12 months earlier, had resulted in the level of adjudications reducing to a quarter of their former level.

2.101 Medical assessments should be undertaken on all young women at least 24 hours before adjudications. (6.28)

Not achieved.

We repeat the recommendation.

2.102 A published policy and procedures for minor reports, including regular management checks, should be produced, displayed and explained to young women at induction. (6.29)

This recommendation was no longer applicable as the use of minor reports had ceased.

2.103 The use of force log should be kept up to date and include all relevant detail. (6.30)

Achieved. The log contained an accurate, up-to-date and detailed record of all incidents of the use of force. Records showed that force was used on average twice a month, and there had been a slight reduction since the previous inspection. It was generally used spontaneously to prevent young women from hurting themselves.

2.104 All young women should be debriefed following the use of force and advocates should be considered for a role in this. (6.31)

Achieved. All young women were debriefed following the use of force. Advocates were considered for this purpose, but it was more common for unit staff to carry out this role. We observed good use being made of the snoozelum during the inspection when young women were agitated or upset.

2.105 There should be routine monitoring and management oversight of use of force incidents and documentation, and this should be reported to the safeguarding committee. (6.32)

Achieved. All incidents of the use of force were checked by managers. Monthly statistics on the use of force were produced, as well as the detailed log. Use of force was a standing agenda item at the safeguarding committee and there was evidence of detailed discussion in some individual cases.

Further recommendation

- **2.106** Oversight of the use of force should be included in the remit of the safeguarding committee.
- 2.107 There should be a log recording the use of separation and this should be monitored by the safeguarding committee. (6.33)

Not achieved. There was no log recording the use of separation, but the intensive supervision room, which was used for this purpose, was very rarely used and at the time of the inspection had been taken out of commission as a decision had been taken that it was not fit for purpose.

The intensive supervision room had last been used in March 2009 to try to manage a very challenging young woman and the design limitations of the room had been exposed. It was clear from discussions we had with staff that current practice on the unit was to manage young women who were threatening or aggressive in their own cells. There remained a need for good governance arrangements for the use of separation. There had been two occasions when a young woman had been relocated to the adult segregation unit. This was unacceptable. We repeat the recommendation.

Further recommendation

- 2.108 Young women should not be placed in the adult segregation unit.
- 2.109 Young women who request to be separated from others should be subject to individual care planning to address the problems rather than avoid them. (6.34)

No longer applicable. This practice had ceased. We were informed that, since the previous inspection, no young women had asked to be separated from other young women.

Rewards and sanctions

2.110 Young women should be informed when demotion within the rewards and sanctions scheme is being considered and a review meeting involving their personal officer should take place beforehand in an attempt to resolve any difficulties. (6.39)

Partially achieved. Young women were given a warning that their level on the scheme was going to be reviewed in time for them to prepare their contribution to the review process. The review considered input from a range of staff in the unit, but this did not always include their personal officer. Young women could appeal after the review if they believed they had been unfairly treated.

Further recommendation

2.111 Personal officers should always contribute to the rewards and sanctions review process.

Additional information

2.112 Staff were positive about the new rewards and sanctions scheme, saying that it gave them the opportunity to address poor behaviour immediately. The scheme worked on a ticket system and points earned and lost through red and green tickets were tallied daily. There was a scale of punishments relating to the points which could be imposed by unit staff on the same day, with the approval of the duty governor. Some punishments were severe, such as loss of evening association and in-cell television. The approval of the duty governor was a formality since it was based purely on the daily scores. No consideration was given to the individual circumstances of the young woman (see also 2.4) and she was not permitted to make any representations. Although we were told that warnings were often given before a red ticket was issued, there were few records of this. The issue of tickets was not monitored to ensure fairness in the application of the scheme or to identify any emerging patterns or trends.

Further recommendations

- **2.113** Young women should be given the opportunity to make representations before immediate sanctions are authorised.
- 2.114 Unit staff should ensure that the duty governor who authorises the sanctions is fully appraised of the young woman's circumstances as part of the process of authorisation.
- 2.115 Robust monitoring and governance arrangements should be put in place to ensure that punishments and sanctions resulting from the issue of red tickets are properly authorised, applied fairly and without discrimination and that any emerging patterns or trends are quickly identified and addressed.

Catering

2.116 New arrivals should be able to place a shop order within their first 24 hours. (7.9)

Not achieved. Canteen sheets were issued weekly to the young women showing how much they had to spend. There were no special arrangements for new arrivals to place a canteen order

We repeat the recommendation.

2.117 Requests from young women to have items added to the canteen sheet should be followed up and responded to in full. (7.10)

Achieved. A young woman from the unit attended the canteen and catering consultative meeting and minutes of the meetings showed that issues of interest to the unit had been raised.

Resettlement strategy

2.118 The resettlement policy should be finalised and the needs analysis completed and regularly kept up to date. (8.8)

Achieved. Progress had been made in the management of resettlement. The resettlement policy had been finalised and a needs analysis had recently been carried out. An example of the effectiveness of the needs analysis was the identification of the high rate of sexual exploitation among the young women, which had not previously been identified. A decision had consequently been made to arrange for a specialist local charity to deliver awareness training, so that staff could provide better support to young women who had been subject to sexual exploitation.

2.119 The use of release on temporary licence should be promoted as an important part of the reintegration process. (8.9)

Achieved. Young people were informed about the ROTL process during induction and it was a standard agenda item at training planning meetings. ROTL was being used to good effect in the small number of cases where it was appropriate.

Training planning and remand management

2.120 Targets set at planning reviews should be specific, measurable, achievable, realistic and time bound. (8.16)

Achieved. The introduction of e-Asset had involved the external auditing of the training planning process. Target setting was audited and it was clear from our sampling exercise that there had been some improvement since the previous inspection. Unit staff made good use of the Asset material, which was now available electronically, to inform the way they helped young women to prepare for their release .

2.121 Young women should be placed in suitable sustainable accommodation following discharge. (8.17)

Achieved. The unit-based YOT staff were assertive with their community-based colleagues to try to ensure that the standard of accommodation was always adequate. There had been no occasions when a young woman had been released without accommodation.

2.122 Efforts should be made to ascertain the reason for the low attendance by families at training planning meetings with a view to taking appropriate steps to improve this. (8.19)

Not achieved. Unit staff considered it the responsibility of the community-based YOT to ensure that family members received support to attend training planning reviews. Unit-based staff offered advice about eligibility for assisted prison visits, but provided no other support. **We repeat the recommendation**.

Additional information

2.123 The training planning arrangements continued to be efficiently run and the seconded YOT officers were well integrated into the unit. They played a significant role in helping young people to contribute to their individual plans and to implement the targets which had been set.

Substance use

2.124 The YPSMS should conduct a regular needs analysis to inform the unit's substance misuse strategy. (8.32)

Achieved. The YPSMS were conducting detailed population needs assessments every six months and the information was used to tailor and deliver appropriate interventions.

2.125 The YPSMS should develop its links with strategic planning groups in the community. (8.33)

Achieved. YPSMS workers attended the resettlement and aftercare provision forum locally and had developed good links with secure training centres. The unit covered a wide catchment area and few young women came from the local community.

2.126 The YPSMS should further develop age- and gender- appropriate services. (8.34)

Achieved. Since the previous inspection, the substance misuse awareness programme had been introduced, which was delivered to all young women and included an interactive DVD. The Best Choices pack, developed centrally, provided substance-specific interventions and was used for one-to-one work. There were additional work books, for example on binge drinking, in seven languages. Harm reduction and overdose prevention information was available. Young women spoke highly of the support they had received from workers.

2.127 Young women should have access to voluntary drug testing. (8.35)

Not achieved. The introduction of voluntary drug testing had been considered by the unit, but they had decided against it because of the limitations of the physical environment and the lack of demand. On the basis of available needs assessments and the absence of any drug use on the unit, we do not repeat this recommendation.

Section 3: Summary of recommendations

The following is a list of both repeated and further recommendations included in this report. The reference numbers in brackets refer to the paragraph location in the main report.

Main recommendation to the Youth Justice Board & the Primary Care Trust

First days in custody

3.1 The YJB and the primary care trust should work in partnership to ensure that the unit is able to accept, safely accommodate and treat substance-dependent young women requiring stabilisation or detoxification, to avoid the necessity to place young women long distances from their home area to access an appropriate service. (2.1)

Main recommendations

to the Youth Justice Board

- 3.2 YOT court officers should ensure that young women travelling to the Toscana unit are given information produced by the unit about what to expect before their arrival. (2.9)
- 3.3 The adult-oriented procedures of mandatory drug testing are not appropriate for young women and should not be used. (2.11)

Main recommendations

to the governor

- 3.4 A log should be kept containing relevant information about all incidents of strip-searching and this should be monitored by the safeguarding committee. (2.3)
- 3.5 The current multi-systems of care planning should be amalgamated to provide one individual care plan for each young woman and a single system of review. (2.4)
- 3.6 Family days should be held at least four times a year. (2.5)

Other recommendations

to the governor

Courts, escorts and transfers

- 3.7 Young women should be given the opportunity to record their experience while under escort through a well publicised comments or complaints procedure. (2.12)
- 3.8 Greater use should be made of the video link for court-related work. (2.14)

First days in custody

3.9 A peer based meet and greet support scheme should be introduced. (2.15)

Residential units

3.10 All young women should attend the unit consultative 'Have Your Say' meetings to discuss issues of interest and any emerging problems. The meeting should be chaired by a senior manager to encourage the involvement, ownership and investment of all young women in an agreed policy of acceptable behaviour. (2.18)

Personal officers

3.11 Personal officers should attend training planning meetings and assessment, care in custody and teamwork (ACCT) reviews. (2.19)

Safeguarding

- 3.12 There should be trend analysis in all safeguarding areas to identify patterns or trends over time. (2.23)
- 3.13 A resident from the unit should be encouraged and enabled to attend safeguarding committee meetings while maintaining appropriate confidentiality. (2.24)
- 3.14 The establishment should liaise with Derbyshire Children's Social Care to ensure that unit staff receive specialist training delivered by child protection professionals. (2.26)

Bullying and violence reduction

- 3.15 Efforts should be made to find out the nature and extent of victimisation and intimidating behaviour through consultation with the young women or confidential surveys. (2.34)
- **3.16** Staff should be trained in mediation techniques. (2.35)

Self-harm and suicide

- 3.17 The suicide and self-harm prevention annex to the safeguarding policy should be revised alongside the review of care planning to provide clarity about the relationship between the assessment, care in custody and teamwork (ACCT) process and individual care planning and review. (2.36)
- 3.18 The audit of ACCT documentation should be extended to include the quality as well as the regularity of the entries. The quality assurance process should be overseen by the safeguarding committee. (2.39)
- 3.19 Staff participation at ACCT reviews should be planned, so that staff who have a relevant contribution can attend or provide a written contribution if appropriate. (2.41)
- 3.20 A peer support scheme should be developed. (2.42)
- 3.21 All night staff should be trained in first aid. (2.44)

Race equality

- 3.22 All staff on the unit should be trained in diversity. (2.54)
- 3.23 Impact assessments should be completed without delay. (2.56)

Health services

- 3.24 Custody staff on duty on the unit should receive defibrillator training. (2.67)
- 3.25 Pharmacist-led clinics should be provided for young women on the unit. (2.73)

Education, training and library provision

- 3.26 There should be more accreditation in literacy and numeracy for young women on shorter sentences and on remand. (2.79)
- 3.27 Targets within ILPs should be specific and measurable. (2.84)

Physical education and health promotion

3.28 A programme of purposeful recreational outdoor activities should be developed. (2.89)

Time out of cell

3.29 Young women on the lowest level of the rewards and sanctions scheme should always be allowed to spend some time out of their cells on weekend afternoons. (2.95)

Security and rules

3.30 There should be improved attendance by the security department at the safeguarding committee. All incident reports and security information relating to the unit and collated by the security department should be monitored, analysed and reported to the committee. (2.97)

Discipline

- 3.31 Monitoring of disciplinary procedures should be improved to identify any trends. (2.98)
- 3.32 Medical assessments should be undertaken on all young women at least 24 hours before adjudications. (2.101)
- 3.33 Oversight of the use of force should be included in the remit of the safeguarding committee. (2.106)
- 3.34 There should be a log recording the use of separation and this should be monitored by the safeguarding committee. (2.107)
- 3.35 Young women should not be placed in the adult segregation unit. (2.108)

Rewards and sanctions

- 3.36 Personal officers should always contribute to the rewards and sanctions review process. (2.111)
- 3.37 Young women should be given the opportunity to make representations before immediate sanctions are authorised. (2.113)
- 3.38 Unit staff should ensure that the duty governor who authorises the sanctions is fully appraised of the young woman's circumstances as part of the process of authorisation. (2.114)
- 3.39 Robust monitoring and governance arrangements should be put in place to ensure that punishments and sanctions resulting from the issue of red tickets are properly authorised, applied fairly and without discrimination and that any emerging patterns or trends are quickly identified and addressed. (2.115)

Catering

3.40 New arrivals should be able to place a shop order within their first 24 hours. (2.116)

Training planning and remand management

3.41 Efforts should be made to ascertain the reason for the low attendance by families at training planning meetings with a view to taking appropriate steps to improve this. (2.122)

Appendix I: Inspection team

Fay Deadman Team Leader Angela Johnson Inspector Ian Macfadyen Inspector Ian Thomson Inspector

Mick BowenHealthcare inspectorSigrid EngelenSubstance use inspector

Martyn Rhowbotham Ofsted inspector

Appendix II: Population profile

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

Population breakdown by:

(i) Status	Number of juveniles	%
Sentenced	8	66.6
Convicted but unsentenced		
Remand	4 (inc 1 Detainee)	33.3
Detainees (single power status)	1 (RX)	
Detainees (dual power status)		
Total	12	99.9

(ii) Number of DTOs by age & sentence (full sentence length inc. the time in the community)

Sentence	4 mths	6 mths	8 mths	10 mths	12 mths	18 mths	24 mths	Total
Age								
15 years								
16 years								
17 years	1	2			2	1	1	7
18 years								
Total								7

(iii) Number of SECTION 53 (2)//91s (determinate sentences only) by age & sentence

Sentence	Under 2 yrs	2-3 yrs	3-4 yrs	4-5 yrs	5 yrs +	Total
Age						
15 years						
16 years						
17 years		-		-		
18 years				-		
Total						
						0

(iv)Number of EXTENDED SENTENCES UNDER SECTION 228 (extended sentence for public protection)

Sentence	Under 2 yrs	2-3 yrs	3-4 yrs	4-5 yrs	5 yrs +	Total
Age						
15 years						
16 years						
17 years			1			1
18 years						
Total						1

(iv) Number OF INDETERMINATE SENTENCES by age

Sentence	Section 90 (HMP)	Life sentence under section 91	Section 53 (1)	Section 226 (DPP)	Total
Age					
15 years					
16 years					
17 years					
18 years					
Total					0

(v) LENGTH OF STAY for UNSENTENCED by age

Length of stay	<1 mth	1-3 mths	3-6 mths	6-12 mths	1-2 yrs	2 yrs +	Total
Age							
15 years							
16 years							
17 years							
18 years							
Total							0

(vii) Main offence	Number of juveniles	%
Violence against the person	6	50
Sexual offences		
Burglary		

Robbery	3	25
Theft & handling		
Fraud and forgery		
Drugs offences	1	8
Driving offences		
Other offences poss of weapon Purgery	1 1	8 8
Breach of community part of DTO		
Civil offences		
Offence not recorded/ Holding warrant		
Total	12	99

(viii) Age	Number of juveniles	%
15 years		
16 years		
17 years	12	100
18 years		
Total	12	100

(ix) Home address	Number of juveniles	%
Within 50 miles of the prison	8	66.6
Between 50 and 100 miles of the prison	1	8
Over 100 miles from the prison	2	17
Overseas	1	8
NFA		
Total	12	99.6

(x) Nationality	Number of juveniles	%
British	11	91.6
Foreign nationals	1	8
Total	12	99.6

(xi) Ethnicity	Number of juveniles	%
White		
British	8	66
Irish		
Other White	1	8
Mixed		
White and Black Caribbean		
White and Black African		
White and Asian		
Other Mixed	2	17
Asian or Asian British		
Indian		
Pakistani		
Bangladeshi		
Other Asian	1	8
Black or Black British		
Caribbean		
African		
Other Black		
Chinese or other ethnic group		
Chinese		
Other ethnic group		
Total	12	99

(xii) Religion	Number of juveniles	%
Baptist		
Church of England	3	25
Roman Catholic	2	17
Other Christian denominations	1	8
Muslim		
Sikh		
Hindu		

Buddhist		
Jewish		
Other		
No religion	6	50
Total	12	100

Appendix III: Summary of questionnaires and interviews

Survey methodology

A voluntary, confidential and anonymous survey of a representative proportion of the population of children and young people (15–18 years) was carried out by HM Inspectorate of Prisons as part of an annual report on the young people's estate.

Choosing the sample size

At the time of the survey on 1st September 2009, the population of young people at HMYOI Foston Hall was 10. Questionnaires were offered to ten young people.

Completion of the questionnaire was voluntary. Refusals were noted and no attempts were made to replace them.

Interviews were carried out with any respondents with literacy difficulties. None of the respondents were interviewed during this visit.

Methodology

Every attempt was made to distribute the questionnaires to each respondent on an individual basis. This gave researchers an opportunity to explain the independence of the Inspectorate and the purpose of the questionnaire, as well as to answer questions.

All completed questionnaires were confidential – only members of the Inspectorate saw them. In order to ensure confidentiality, respondents were asked to do one of the following:

- have their questionnaire ready to hand back to a member of the research team at a specified time
- to seal the questionnaire in the envelope provided and hand it to a member of staff, if they were agreeable, or
- to seal the questionnaire in the envelope provided and leave it in their room for collection.

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.

Response rates

In total, eight respondents completed and returned their questionnaires. This represented 80% of children and young people in the establishment at the time. The response rate from the sample was 80%.

None of the young people refused to complete a questionnaire, one questionnaire was not returned and one was returned blank.

Comparisons

The following document details the results from the survey. All missing responses are excluded from the analysis. All data from each establishment has been weighted, in order to mimic a consistent percentage sampled in each establishment.

Presented alongside the results from this survey are the comparator figures for all children and young people surveyed in young offender institutions. This comparator is based on all responses from surveys carried out in four girls units since 2008.

Also included are statistically significant differences between the responses of young people surveyed at the unit in March 2009 and the responses of this September 2009 survey. It should be noted that, in order for statistical comparisons to be made between the most recent survey data and that of the previous survey, both sets of data have been coded in the same way. This may result in percentages from previous surveys looking higher or lower as some of our survey questions have changed. However, both percentages are true of the populations they were taken from, and the statistical significance is correct. It must also be borne in mind that the numbers of respondents in this comparator are very small.

In all the above documents, statistically significant differences are highlighted. Statistical significance merely indicates whether there is a real difference between the figures; that is the difference is not due to chance alone. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading, and where there is no significant difference there is no shading. Orange shading has been used to show a significant difference in demographic background details.

Summary

In addition, a summary of the survey results has been included, which shows a breakdown of responses for each question. Percentages have been rounded and therefore may not add up to 100%.

No questions have been filtered within the summary so all percentages refer to responses from the entire sample. The percentages to certain responses within the summary, for example 'not sentenced' options across questions, may differ slightly. This is due to different response rates across questions, meaning that the percentages have been calculated out of different totals (all missing data is excluded). The actual numbers will match up as the data are cleaned to be consistent.

Percentages shown in the summary may differ by 1 or 2 % from that shown in the comparison data as the comparator data have been weighted for comparison purposes.

Section One: About you

Q1	How old are you?	
	15	0%
	16	
	17	
	18	
		0 70
Q2	Are you a British citizen?	
	Yes	••
		100%
	No	0%
0 2	le English very first lenguage?	
Q3	Is English your first language? Yes	1000/
	No	
	NO	0%
Q4	What is your ethnic origin?	
	White - British	. 75%
	White - Irish	
	White - Other	
	Black or Black British - Caribbean	
	Black or Black British - African	
	Black or Black British - Other	
	Asian or Asian British - Indian	
	Asian or Asian British - Pakistani	
	Asian or Asian British - Bangladeshi	
	Asian or Asian British - Other	
	Mixed Race - White and Black Caribbean	
	Mixed Race - White and Black African	
	Mixed Race - White and Asian	
	Mixed Race - Other	
	Chinese	
	Other ethnic group	
		. 070
Q5	Do you consider yourself to be Gypsy/Romany/Traveller?	
	Yes	. 17%
	No	. 83%
00	What is seen religion 0	
Q6	What is your religion?	400/
	None	
	Church of England	
	Catholic	
	Protestant	
	Other Christian denomination	
	Buddhist	
	Hindu	
	Jewish	
	Muslim	
	Sikh	. 0%

Q1	Voc	00/
	Yes	
	No	100%
	Section Two: About your contance	
	Section Two: About your sentence	
Q2	Are you sentenced?	
	Yes	
	No - unsentenced/on remand	. 25%
Q3	What is the length of your sentence?	
	Not sentenced	. 29%
	Four months	
	Six months	
	Eight months	
	12 months	
	18 months	
	Two years	
	Two to four years	
	Four years or more	
	Indeterminate sentence for public protection (ISSP / DPP)	
	use the date of your next parole board.) Not sentenced	. 0% . 14% . 29%
Q5	How long have you been in this establishment? Less than one month	. 57% . 0% . 0%
Q6	How many times have you been in a YOI, secure children's home or secure training centre before? None Once Two to five More than five	. 0% . 14%

Q/	Have you been to any other YOI during this sentence?	
	None	
	One	14%
	Two	0%
	Three	0%
	More than three	0%
	Section Three: Courts, transfers and escorts	
- 4		
Q1	On your most recent journey, was the van clean?	
	Yes	
	No	
	Don't remember	14%
	Not applicable	0%
00		
Q2	On your most recent journey, was the van comfortable?	00/
	Yes	
	No	
	Don't remember	
	Not applicable	0%
Q3	Did you feel safe on your most recent journey?	
Q.J	Yes	710/
	No	
	Don't remember	0%
Q4	On your most recent journey, were there any adults (over 18), or any you of a different gender, travelling with you?	ing people
	Yes	43%
	No	57%
	Don't remember	0%
O.E.	On your most recent journey, how long did you spend in the yea?	
Q5	On your most recent journey, how long did you spend in the van?	00/
	Less than one hour	
	One to two hours	
	Two to four hours	
	More than four hours	
	Don't remember	0%
Q6	On your most recent journey, were you offered a toilet break if you need	ed it?
~~	My journey was less than two hours	
	Yes	
	No	
	Don't remember	14%

Q/	On your most recent journey, were you offered anything to eat or drink? My journey was less than two hours	67%
	Yes	
	No	
	Don't remember	
Q8	On your most recent journey, how did you feel you were treated by the esc staff?	ort
	Very well	14%
	Well	
	Neither	
	Badly	0%
	Very badly	
	Don't remember	
Q9	When you left court, were you told that you would be coming to this	
	establishment? (Please tick all that apply to you.)	0.007
	Yes, someone told me	
	Yes, I received written information	
	No, I was not told anything	
	Don't remember	0%
	Section Four: Your first few days here	
Q1	How long were you in reception?	
	Less than two hours	
	Two hours or longer	
	Don't remember	0%
Q2	Were you seen by a member of healthcare staff in reception?	
	Yes	100%
	No	
	Don't remember	0%
Q3	When you were searched, was this carried out in an understanding way? Yes	710/
	No	
	Don't remember	0%
Q4	Overall, how well did you feel you were treated in reception?	E 7 0/
	Very well	
	Well	
	Neither	
	Badly	
	Very badly	
	Don't remember	0%

Q5	When you first arrived here, did staff the following things? (Please tick all			h any of
			6 Money worries	O%
			Feeling low/upset/needing	
	Loss of property	29 /0	• •	
	Havein a much lanes	00/	someone to talk to	
			Health problems	
	young people		Getting phone numbers	
	Letting family know where you are	86%	Staff did not ask me about any of these	
Q6	When you first arrived here, did you (Please tick all that apply to you.)	have a	any of the following problems?	
		71%	Money worries	0%
			Feeling low/upset/needing	
	Loss of property	1 7 /0	someone to talk to	
	Housing problems	Ω0/		
			Health problems	
	Needing protection from other		Getting phone numbers	29%
	young people		I did not have any problems	4.407
	Something to eatA free phone call to friends/family. Information about the PIN telephor Information about feeling low/upse Don't remember	ne syst	tem	86% 100% 86% 100% 71% 14%
Q8	Someone from healthcare Peer support/peer mentor/Listener The prison shop/canteen Don't remember	o you /Sama	• • • • • • • • • • • • • • • • • • • •	29% 100% 43% 14% 0%
Q9	Did you feel safe on your first night a		establishment?	710/
	Don't remember			U%

Q10	How soon after your arrival did you go on an induction course?	•••
	I have not been on an induction course	
	Within the first week	
	More than a week	
	Don't remember	14%
Q11	Did the induction course cover everything you needed to know about the	
	establishment?	
	I have not been on an induction course	0%
	Yes	86%
	No	14%
	Don't remember	0%
	Section Five: Daily life and respect	
	Section rive. Daily life and respect	
Q1	Can you normally have a shower every day if you want to? Yes	1000
	No Don't know	
Q2	Is your cell call bell normally answered within five minutes?	
	Yes	
	No	
	Don't know	0%
Q3	What is the food like here?	
	Very good	0%
	Good	57%
	Neither	29%
	Bad	
	Verv bad	
		070
Q4	Does the shop/canteen sell a wide enough variety of products? I have not bought anything yet	20%
	Yes	
	No	
	Don't know	0%
OF	How easy is it for you to attend religious services?	
Q5	How easy is it for you to attend religious services? I don't want to attend religious services	0%
	Very easy	
	Easy	
	Neither	
	Difficult	
	Very difficult	
	Don't know	0%

Q6	Please answer the following questions about	reliaion:		
	3 4 ·······	Yes	No	Don't Know/not applicable
	Do you feel your religious beliefs are respected?	71%	0%	29%
	Can you speak to a religious leader in private if you want to?	86%	0%	14%
Q7	Please answer the following about staff here:			
		Yes		No
	Is there a member of staff you feel you can	86%		14%
	turn to for help if you have a problem?			
	Do most staff treat you with respect?	86%		14%
	Section Six: Health	care		
Q1	What do you think of the overall quality of the	healthcare?		
	I have not been to healthcare			13%
	Very good			
	Good			
	Neither			
	Bad			
	Very bad		••••••	0%
Q2	Is it easy to see the following people if you ne	ed to:		
		Yes	No	Don't know
	The doctor?	50%	38%	13%
	The nurse?	100%	0%	0%
	The dentist?	71%	14%	14%
	The optician?	25%	38%	38%
	· · · · · · · · · · · · · · · · · · ·			
	The pharmacist?	43%	43%	14%
Q3	Have you had any problems getting your med	ication?		
	I am not taking any medication			25%
	Yes			
	No			
Q4	Please answer the following about alcohol:			
		Yes		No
	Did you have problems with alcohol when you first arrived here?	25%		75%
	Do you have problems with alcohol now?	13%		88%
	Have you received any help with alcohol	25%		75%
	problems in this prison?	2070		1070
	אוסטופוווס ווו נוווס אווסטוו:			

Q5	Please answer the following about drugs:			
		Yes		No
	Did you have problems with drugs when you first arrived here?	25%		75%
	Do you have problems with drugs now?	0%		100%
	Have you received any help with drugs	25%		75%
		25 /0		7 3 70
	problems in this prison?			
Q6	How easy is it to get illegal drugs here?			
	Very easy			
	Easy			13%
	Neither			0%
	Difficult			13%
	Very difficult			
	Don't know			
	DOTT KNOW	•••••	• • • • • • • • • • • • • • • • • • • •	50 /0
Q7	Do you feel you have any emotional or men	-		
	Yes			
	No			50%
Q8	If you have emotional or mental health prob	olems, are you b	peing helpe	d by any of
	the following people?			
	I do not have any/I am not getting any I	nelp		25%
	Doctor			13%
	Nurse			25%
	Psychiatrist/psychologist			
	Counsellor			
	Other			
	Ou let	•••••	•••••	1370
	Ocation Occasio Anniloctions			
	Section Seven: Applications	s and compia	ints	
Q1	Do you know how to make an application?			
	Yes			100%
	No			
	7.00	•••••	• • • • • • • • • • • • • • • • • • • •	0 /0
Q2	Is it easy to make an application?			
	Yes			88%
	No			
	Don't know			076
Q3	Please answer the following about applicati	ions:		
. =	3	I have not	Yes	No
		made an	. 55	
	Danier factor Park and Control of the Control	application	E -7 0/	4.407
	Do you feel applications are sorted out fairly?	29%	57%	14%
	Do you feel applications are sorted out	33%	67%	0%
	promptly (within seven days)?			

Q4	Yes			88%
	No			
Q5	Is it easy to make a complaint?			
	Yes			
	No			
	Don't know			30%
Q6	Please answer the following about complain			
		I have not made a complaint	Yes	No
	Do you feel complaints are sorted out fairly?	50%	38%	13%
	Do you feel complaints are sorted out promptly (within seven days)?	50%	50%	0%
	Have you ever been encouraged to withdraw a complaint?	50%	13%	38%
Q7	Can you speak to the following people when	you need to?	,	
		Yes	No	Don't kno
	A peer mentor/peer support/Listener	63%	13%	25%
	A member of the IMB (Independent Monitoring Board)	63%	13%	25%
	An advocate (an outside person to help you)	88%	0%	13%
	Section Eight: Rewards & Sanct	ions, and Di	scipline	
04	What level of the rewards and constitute calls		- m 2	
Q1	What level of the rewards and sanctions sch Don't know what the rewards and sancti			0%
	Enhanced (top)			
	Standard (middle)			
	Basic (bottom)			
	Don't know			
Q2	Do you feel you have been treated fairly in y sanctions scheme?	our experienc	e of the re	wards and
	Don't know what the rewards and sancti	ions scheme i	s	0%
	Yes			88%
	No			13%
	Don't know			0%
Q3	Do the different levels of the rewards and sa change your behaviour?	nctions scher	ne encoura	age you to
	Don't know what the rewards and sancti	ions scheme i	S	0%
	Yes			
	No			
	Don't know			

Q4	Have you had a 'nicking' (adjudication) since you have been in this establishment?	
	Yes	25%
	No	
	Don't know	0%
Q5	If you have had a 'nicking' (adjudication), was the process explained you?	clearly to
	I have not had an adjudication	75%
	Yes	
	No	0%
Q6	If you have been physically restrained (C & R), how many times has since you have been in this establishment?	this happened
	I have not been restrained	75%
	Once	13%
	Twice	
	Three times	
	More than three times	0%
Q7	If you have spent a night in the segregation/care and separation unit you treated by staff? I have not been to the segregation unit	100%
	Well	0%
	Neither	0%
	Badly	0%
	Very badly	0%
	Section Nine: Safety	
Q1	Have you ever felt unsafe in this establishment?	
	Yes 38%	
	No 63%	
Q2	If you have ever felt unsafe, in which areas of this establishment do ever felt unsafe? (Please tick all that apply to you.)	you/have you
	Never felt unsafe 71% At meal times	
	Everywhere 0% At healthcare	0%
	Segregation unit 0% Visit's area	
	Association areas 29% In wing showers	
	Reception area 0% In gym showers	
	At the gym14% In corridors/stairwells	
	In an exercise yard 0% On your landing/wing	
	At work 0% In your cell	14%
	At education 0%	

Q3	Has another young person or group o establishment? (E.g. insulted or assau	ulted		
	Yes 1 No 8			
		• • • • • • • • • • • • • • • • • • • •		
Q4	If yes, what did the incident(s) involve (Please tick all that apply to you.)	/wha	t were they about?	
	Insulting remarks (about you, your family or friends)	13%	Because of drugs	0%
	Physical abuse (being hit, kicked or assaulted)		Having your canteen/property taken	0%
	Sexual abuseBecause of your race or ethnic	0% 0%	Because you were new hereBecause you are from a different	0%
	origin Because of your religious beliefs	0%		0%
	Because you have a disability	0%	Because of my offence / crime	0%
Q6	Has a member of staff or group of sta	ff vict	timised you in this establishment	?
	(E.g. insulted or assaulted you) Yes 1	3%		
	<i>No</i> 8			
Q7	If yes, what did the incident(s) involve (Please tick all that apply to you.)	/wha	t were they about?	
	Insulting remarks (about you, your family or friends)	13%	Because of drugs	0%
	Physical abuse (being hit, kicked or assaulted)		Having your canteen/property taken	0%
	Sexual abuse Because of your race or ethnic			
	origin		part of the country	
	Because of your religious beliefs			
	Because you have a disability		·	0%
Q9	If you were being victimised who wou No one		u tell? Teacher/education staff	25%
	Personal officer		Gym staff	
	Wing officer		Listener/Samaritan/Buddy	
	Chaplain 1		Another young person here	
	Healthcare staff1		Family/friends	
Q10	Do you think staff would take it seriou victimised?	ısly if	you told them you had been	
	Yes			75%
	No			

Q11	Is shouting through the windows a proble	m here?			
	Yes				13%
	No				88%
	Don't know				0%
Q12	Have staff checked on you personally in th	ne last week	to see how	you ar	e getting
	on?				==0/
	Yes No				
	Section Ten: Ac	tivities			
Q1	How old were you when you were last at s	chool?			
Q I	14 or under				100%
	15 or over				
Q2	Please answer the following questions abo	out school:			
		Yes	No	Not	t applicable
	Have you ever been excluded from school?	57%	29%		14%
	Did you used to truant from school?	43%	43%		14%
Q3	Do you currently take part in any of the fol (Please tick all that apply to you.)	•			000/
	Education				
	A job in this establishment				
	Vocational or skills training Offending behaviour programmes				
	I am not currently involved in any of the				
Q4	If you have been involved in ANY of the fo	llowing activ			
	think they will help you when you leave pr	ison? Not been	Yes	No	Don't
		involved	res	NO	Don't know
	Education	25%	63%	13%	0%
	A job in this establishment	50%	25%	13%	13%
	Vocational or skills training	25%	50%	13%	13%
	Offending behaviour programmes	38%	38%	25%	0%
	Chemaing behaviour programmes	0070	0070	2070	070
Q5	Do you usually have association every day				40007
	Yes				
	No				
	Don't know	•••••		• • • • • • • • • • • • • • • • • • • •	0%

Q6	How many times do you usually go to the gym each week?	00/
	Don't want to go	
	None	
	One to two times	
	Three to five times	
	More than five times	0%
	Don't know	13%
Q7	Can you usually go outside for exercise every day?	
	Don't want to go	0%
	Yes	50%
	No	38%
	Don't know	
	Section Eleven: Keeping in touch with family and friends	
Q1	Are you able to use the telephone every day, if you want to?	
	Yes	75%
	No	
	Don't know	
Q2	Have you had any problems with sending or receiving mail (letters or	narcole)2
QZ	Yes	
	No	
	Don't know	
	DOTT KNOW	0 70
Q3	How easy is it for your family and friends to visit you here?	0=0/
	Very easy	
	Easy	
	Neither	
	Difficult	0%
	Very difficult	38%
	Don't know	0%
Q4	How many visits have you had, from family or friends in the last month	າ?
	I don't get visits	50%
	None	0%
	One	38%
	Two	
	Three	
	More than three	
	Don't know	
Q5	Do your visits usually start on time?	
40	I don't get visits	50%
	Yes	25%
	No	25%
	Don't know	0%

Q6	How are you and your family/friends usually I don't get visits				25% 0% 13% 0%
	Section Twelve: Preparati	on for re	lease		
Q1	When did you first meet your personal office I still have not met him/her				100% 0%
Q2	How often do you see your personal officer' I still have not met him/her At least once a week Less than once a week				75%
Q3	Do you feel your personal officer has helped I still have not met him/her Yes				75%
Q4	Do you have a training plan? Not sentenced Yes No Don't know				50% 25%
Q5	Please answer the following about training p	plans: I don't have a training plan	Yes	No	Don't know
	Were you involved in development your training plan?	25%	25%	13%	38%
	Do you understand the targets that have been set in your training plan? Can you see your training plan when you want to?	25% 25%	38% 63%	25% 13%	13% 0%
Q6	Has your YOT worker been in touch since your Yes				63%

Q7	Yes No			
Q8	Please answer the following about your releas	se:		
		Yes	No	Don't knov
	Have you had a say in what will happen to you when you are released?	25%	50%	25%
	Are you planning on going to school or college after release?	50%	25%	25%
	Do you have a job to go to on release?	0%	63%	38%
Q 9	Do you know who to contact to get help with a	any of the f	ollowing for	when you
	leave? (Please tick all that apply to you.)			740/
	Finding accommodation			
	Getting into school or college			
	Getting a job			
	Help with money/finances			
	Help with claiming benefits			
	Continuing health services			
	Opening a bank account			
	Avoiding bad relationships			
	I don't know who to contact			29%
Q10	Do you think you will have a problem with any (Please tick all that apply to you.)			
	Finding accommodation			63%
	Getting into school or college			
	Getting a job			63%
	Money/finances			50%
	Claiming benefits			63%
	Continuing health services			
	Opening a bank account			
	Avoiding bad relationships			
	I won't have any problems			
Q11	Is there anything you would still like help with	ı before you	ı are release	ed?
	Yes			
	No			
	Don't know			
	- ····			

Q12	What is most likely to stop you offer	ıding i	n the future?	
	Not sentenced	25%	,	38%
			can ask for advice)	
	Nothing it is up to me	0%	Having a YOT worker or social	50%
			worker that I get on with	. •
	Making new friends outside	25%	Having children	. 0%
	Going back to live with my family	13%	Having something to do that isn't crime	
	Getting a place of my own	38%		
	Getting a job	38%	Getting into school/college	. 38%
	Having a partner (girlfriend or	25%	Talking about my offending	0%
	boyfriend)		behaviour with staff	. •
	Staying off alcohol/drugs	25%	Anything else	. 0%
Q13	Do you want to stop offending?			
	•			. 25%
Q14	Have you done anything, or has anything that you think will make you less like	_	• • •	ment,
	Yes			. 25%
	No			. 50%



Survey responses from children and young people: HMYOI Foston Hall (Toscana Unit) 2009

Survey responses (missing data has 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 percent highlighted in green is significantly better than the comparator.	І СҮР		II CYP	I CYP
	Any percent highlighted in blue is significantly worse than the comparator.	HMYOI Foston Hall	le's	Foston Hall ber 2009	Foston Hall 2009
	Any percent highlighted in orange shows a significant difference in demographic details.	I Fost	Young people' comparator	HMYOI Foston H September 2009	I Fost
	Percentages which are not highlighted show there is no significant difference.	нмүо	Young	HMYO Septe	HMYOI Fosi March 2009
	Number of completed questionnaires returned	8	42	8	6
SECTIO	ON 1: ABOUT YOU				
1.1	Are you 18 years of age?	0%	2%	0%	14%
1.2	Are you a foreign national?	0%	7%	0%	
1.3	Is English your first language?	100%	89%	100%	100%
1.4	Are you from a minority ethnic group (including all those who did not tick White British, White Irish or White Other category)?	10%	31%	10%	14%
1.5	Do you consider yourself to be Gypsy/Romany/Traveller?	14%		14%	
1.6	Are you Muslim?	0%	11%	0%	
1.7	Do you have any children?	0%	0%	0%	0%
SECTIO	ON 2: ABOUT YOUR SENTENCE				
2.2	Are you sentenced?	73%	83%	73%	86%
2.3	Is your sentence 12 months or less?	33%	44%	33%	29%
2.4	Do you have less than six months to serve?	11%	48%	11%	50%
2.5	Have you been in this prison less than a month?	44%	25%	44%	14%
2.6	Is this the first time that you have been in a YOI, secure children's home c secure training centre before'	0%	51%	0%	86%
2.7	Have you been to any other YOI during this sentence?	11%	33%	11%	86%
SECTIO	ON 3: COURTS, TRANSFERS AND ESCORTS				
For you know:	r most recent journey, either to or from court, or between prisons, we want to				
3.1	Was the van clean?	0%	50%	0%	0%
3.2	Was the van comfortable?	0%	18%	0%	0%
3.3	Did you feel safe?	67%	70%	67%	71%
3.4	Did you travel with any adults (over 18) or anyone of a different gender?	44%	37%	44%	
3.5	Did you spend more than four hours in the van?	11%	4%	11%	14%
For thos	se who spent two or more hours in the escort van:				
3.6	Were you offered a toilet break if you needed it?	25%	46%	25%	0%
3.7	Were you offered anything to eat or drink?	0%	50%	0%	
3.8	Were you treated well/very well by the escort staff?	67%	61%	67%	71%
3.9	Did someone tell you where you were going when you left court?	89%		89%	
3.10	Did you receive written information about where you were going when you left court?	0%		0%	
SECTIO	ON 4: YOUR FIRST FEW DAYS HERE				
4.1	Were you in reception for less than two hours?	100%	80%	100%	86%
4.2	Were you seen by a member of healthcare staff in reception?	100%	86%	100%	100%

	Any percent highlighted in green is significantly better than the comparator. Any percent highlighted in blue is significantly worse than the comparator. Any percent highlighted in orange shows a significant difference in demographic details. Percentages which are not highlighted show there is no significant difference.	HMYOI Foston Hall CYP	Young people's comparator	HMYOI Foston Hall CYP September 2009	HMYOI Foston Hall CYP March 2009
	Number of completed questionnaires returned	8	42	8	6
4.3	When you were searched was this carried out in an understanding way?	67%	73%	67%	100%

Key to t	adies				
	Any percent highlighted in green is significantly better than the comparator.	CYP		ICYP	ΙСΥР
	Any percent highlighted in blue is significantly worse than the comparator.	on Hall	e,e	Foston Hall ber 2009	on Hall (
	Any percent highlighted in orange shows a significant difference in demographic details.	HMYOI Foston Hall CYP	Young people' comparator		l Foston I 2009
	Percentages which are not highlighted show there is no significant difference.	НМУО	Young peop comparator	HMYOI Septem	HMYOI
	Number of completed questionnaires returned	8	42	8	6
4.4	Were you treated well/very well in reception?	100%	72%	100%	86%
When yo	but first arrived, did staff ask if you needed help or support with any of the				
4.5a	Not being able to smoke?	100%	60%	100%	
4.5b	Loss of property?	33%	10%	33%	
4.5c	Housing problems?	0%	14%	0%	
4.5d	Needing protection form other young people?	11%	14%	11%	
4.5e	Letting family know where you are?	89%	60%	89%	
4.5f	Money worries?	0%	20%	0%	
4.5g	Feeling low/upset/needing someone to talk to?	67%	57%	67%	
4.5h	Health problems?	44%	40%	44%	
4.5i	Getting phone numbers?	33%	43%	33%	
4.6	Did you have any problems when you first arrived?	89%	100%	89%	100%
When yo	ou first arrived, did you have problems with any of the following:				
4.6a	Not being able to smoke?	67%	72%	67%	67%
4.6b	Loss of property?	11%	14%	11%	17%
4.6c	Housing problems?	0%	23%	0%	33%
4.6d	Needing protection form other young people?	0%	2%	0%	0%
4.6e	Letting family know where you are?	56%	33%	56%	33%
4.6f	Money worries?	0%	10%	0%	33%
4.6g	Feeling low/upset/needing someone to talk to?	44%	36%	44%	100%
4.6h	Health problems?	33%	12%	33%	17%
4.6i	Getting phone numbers?	33%	50%	33%	
When yo	ou first arrived, were you given any of the following:				
4.7a	A reception pack?	100%	58%	100%	
4.7b	The opportunity to have a shower?	89%	61%	89%	
4.7c	Something to eat?	100%	81%	100%	
4.7d	A free phone call to friends/family?	89%	76%	89%	
4.7e	Information about the PIN telephone system?	100%	55%	100%	
4.7f	Information about feeling low/upset?	67%	39%	67%	
Within y	our first 24 hours, did you have access to the following people or services:				
4.8a	The chaplain or religious leader?	33%	49%	33%	14%
4.8b	Someone from healthcare?	100%	76%	100%	71%
4.8c	A Peer Mentor, Listener or The Samaritans?	44%	20%	44%	0%
4.8d	Did you have access to the prison shop/canteen?	11%	7%	11%	14%
4.9	Did you feel safe on your first night here?	67%	72%	67%	71%
For thos	e who had an induction:				
4.10	Did you go on an induction course within your first week?	56%	80%	56%	71%
4.11	Did the induction course cover everything you needed to know about the establishment?	89%	73%	89%	71%
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Key to	tables				
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	Any percent highlighted in blue is significantly worse than the comparator.	HMYOI Foston Hall CYP	e's	all	Foston Hall 2009
	Any percent highlighted in orange shows a significant difference in demographic details.	Fosto	oung people's omparator	HMYOI Foston H September 2009	Fosto 2009
	Percentages which are not highlighted show there is no significant difference.	MYOI	Young peop comparator	HMYOI Septem	HMYOI Fos March 2009
	Number of completed questionnaires returned	8	≻ δ	<u></u> Ξ <i>ω</i>	6
SECTIO	DN 5: DAILY LIFE HERE				
5.1	Can you normally have a shower everyday if you want to?	100%	96%	100%	100%
5.2	Is your cell call bell normally answered within five minutes?	100%	55%	100%	50%
5.3	Do you find the food here good/very good?	56%	31%	56%	29%
5.4	Does the shop/canteen sell a wide enough variety of products?	67%	49%	67%	33%
5.5	Is it easy/very easy for you to attend religious services?	100%	60%	100%	71%
					7170
5.6a	Do you feel your religious beliefs are respected?	67%	57%	69%	
5.6b	Can you speak to a religious leader in private if you want to?	89%	62%	89%	
5.7a	Is there a member of staff you can turn to with a problem?	89%	68%	89%	
5.7b	Do most staff treat you with respect?	89%	67%	89%	100%
SECTIO	N 6: HEALTHCARE				
6.1	Do you think the overall quality of the healthcare is good/very good?	90%	70%	90%	86%
6.2a	Is it easy for you to see the doctor?	50%	50%	50%	50%
6.2b	Is it easy for you to see the nurse?	100%	77%	100%	71%
6.2c	Is it easy for you to see the dentist?	67%	42%	67%	71%
6.2d	Is it easy for you to see the optician?	27%	27%	27%	14%
6.2e	Is it easy for you to see the pharmacist?	44%	31%	44%	
6.3	For those on medication:	38%	47%	38%	17%
	Have you had any problems getting your medication?				1770
6.4a	Did you have any problems with alcohol when you first arrived?	27%	23%	27%	
6.4b	Do you have any problems with alcohol now?	10%	10%	10%	
6.4c	Have you received any help with any alcohol problems here?	27%	16%	27%	
6.5a	Did you have any problems with drugs when you first arrived?	27%	39%	27%	50%
6.5b	Do you have any problems with drugs now?	0%	19%	0%	
6.5c	Have you received any help with any drug problems here?	27%	24%	27%	50%
6.6	Is it easy/very easy to get illegal drugs here?	10%	14%	10%	
6.7	Do you feel you have any emotional or mental health problems?	50%	35%	50%	
If you fe the follo	el you have emotional or mental health problems, are you being helped by any owing:	of			
6.8a	Do not have any/not getting any help	0%	20%	0%	
6.8b	Doctor?	0%	30%	0%	
6.8c	Nurse?	20%	20%	20%	
6.8d	Psychiatrist/psychologist?	80%	60%	80%	
6.8e	Counsellor?	50%	20%	50%	
	DN 7: APPLICATIONS AND COMPLAINTS	23,3		33,0	
7.1	Do you know how to make an application?	100%	74%	100%	
7.2	Is it easy to make an application?	90%	65%	90%	
For thos	se who have made an application:				
7.3a	Do you feel applications are sorted out fairly?	83%	83%	83%	
1	,		/-		

	Any percent highlighted in green is significantly better than the comparator. Any percent highlighted in blue is significantly worse than the comparator. Any percent highlighted in orange shows a significant difference in demographic details.	HMYOI Foston Hall CYP	Young people's comparator	MYOI Foston Hall CYP eptember 2009	YOI Foston Hall CYP ch 2009
	Percentages which are not highlighted show there is no significant difference.			Iσ	HMY
	Number of completed questionnaires returned	8	42	8	6
7.3b	Do you feel applications are sorted out promptly (within 7 days)?	100%	53%	100%	

Key to t	adies				
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	Any percent highlighted in blue is significantly worse than the comparator.	n Hall	s ₋ e	Foston Hall CYP ber 2009	n Hall
	Any percent highlighted in orange shows a significant difference in demographic details.	Fosto	peopl	Fosto	Foston 2009
	Percentages which are not highlighted show there is no significant difference.	HMYOI Foston Hall CY	Young people's comparator	HMYOI Foston H September 2009	HMYOI Fos March 2009
	Number of completed questionnaires returned	8	42	8	6
7.4	Do you know how to make a complaint?	90%	94%	90%	100%
7.5	Is it easy to make a complaint?	50%	68%	50%	
For thos	e who have made a complaint:				
7.6a	Do you feel complaints are sorted out fairly?	80%	62%	80%	50%
7.6b	Do you feel complaints are sorted out promptly (within 7 days)?	100%	61%	100%	
7.6c	Have you ever been encouraged to withdraw a complaint?	20%	36%	20%	50%
Can you	speak to the following people when you need to:				
7.7a	A peer mentor or Listener?	60%	45%	60%	
7.7b	A member of the IMB (Independent Monitoring Board)	60%	24%	60%	
7.7c	An advocate (an outside person to help you)	90%	55%	90%	50%
SECTIO	N 8: REWARDS AND SANCTIONS, AND DISCIPLINE				
8.1	Are you on the enhanced (top) level of the reward scheme?	10%	33%	10%	29%
8.2	Do you feel you have been treated fairly in your experience of the reward scheme?	90%	53%	90%	29%
8.3	Do the different levels make you change your behaviour?	60%	49%	60%	29%
8.4	Have you had a 'nicking' (adjudication) since you have been here?	27%	33%	27%	86%
8.5	Was the 'nicking' (adjudication) process explained clearly to you?	100%	75%	100%	
8.6	Have you been physically restrained (C & R) since you have been here?	27%	19%	27%	50%
8.7	For those who had spent a night in the segregation/CSU: Did the staff treat you well/very well?		0%		
SECTIO	N 9: SAFETY				
9.1	Have you ever felt unsafe in this prison?	40%	30%	40%	50%
9.3	Has another young person or group of young people victimised (insulted or assaulted) you here?	10%	18%	10%	50%
If you ha	ave felt victimised by another young person/group of young people, did the incide	nt			
9.4a	Insulting remarks?	10%	5%	10%	50%
9.4b	Physical abuse?	0%	5%	0%	14%
9.4c	Sexual abuse?	0%	5%	0%	0%
9.4d	Racial or ethnic abuse?	0%	0%	0%	0%
9.4e	Your religious beliefs?	0%	0%	0%	0%
9.4f	Your disability?	0%	0%	0%	
9.4g	Drugs?	0%	0%	0%	0%
9.4h	Having your canteen/property taken?	0%	0%	0%	0%
9.4i	Because you were new here?	0%	5%	0%	14%
9.4j	Being from a different part of the country than others?	0%	0%	0%	14%
9.4k	Gang related issues?	0%	0%	0%	
9.41	Your offence/crime?	0%	3%	0%	
9.6	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	10%	28%	10%	29%
If you had involve:	ave felt victimised by a member of staff/group of staff members, did the incident				
9.5a	Insulting remarks?	10%	12%	10%	0%

Key to t	ables				
	Any percent highlighted in green is significantly better than the comparator.	СҮР		СУР	СУР
	Any percent highlighted in blue is significantly worse than the comparator.	HMYOI Foston Hall	s,el	Foston Hall ber 2009	Foston Hall 2009
	Any percent highlighted in orange shows a significant difference in demographic details.	Fost	peop rator	Fost ber 2	Fost 2009
	Percentages which are not highlighted show there is no significant difference.	нмуоі	Young people's comparator	HMYOI Foston H September 2009	HMYOI Fost March 2009
	Number of completed questionnaires returned	8	42	8	6
9.5b	Physical abuse?	0%	2%	0%	14%
9.5c	Sexual abuse?	0%	0%	0%	0%
9.5d	Racial or ethnic abuse?	0%	10%	0%	0%
9.5e	Your religious beliefs?	0%	0%	0%	
9.5f	Your disability?	0%	0%	0%	
9.5g	Drugs?	0%	2%	0%	0%
9.5h	Having your canteen/property taken?	0%	0%	0%	0%
9.5i	Because you were new here?	0%	7%	0%	14%
9.5j	Being from a different part of the country than others?	0%	6%	0%	0%
9.5k	Gang related issues?	0%	3%	0%	
9.51	Your offence/crime?	0%	7%	0%	
9.9	If you were being victimised by another young person or a member of staff wou you be able to tell anyone about it?	ld 60%	68%	60%	33%
9.10	If you did tell a member of staff that you were being victimised do you think it would be taken seriously?	73%	37%	73%	29%
9.11	Is shouting through the windows a problem here?	10%	24%	10%	
9.12	Have staff checked on you personally in the last week to see how you are gettir on?	¹⁹ 73%	60%	73%	33%
SECTIO	N 10: ACTIVITIES				
10.1	Were you 14 or younger when you were last at school?	100%	36%	100%	67%
10.2a	Have you ever been excluded from school?	56%	80%	56%	83%
10.2b	Have you ever truanted from school?	44%	76%	44%	67%
Do you o	currently take part in any of the following:				
10.3a	Education?	60%	96%	60%	100%
10.3b	A job in this establishment?	10%	23%	10%	0%
10.3c	Vocational or skills training?	40%	28%	40%	100%
10.3d	Offending behaviour programmes?	50%	43%	50%	
	e who have taken part in the following activities, whilst in this prison: hink that they will help you when you leave prison?				
10.4a	Education?	86%	79%	86%	
10.4b	A job in this establishment?	50%	80%	50%	
10.4c	Vocational or skills training?	63%	90%	63%	
10.4d	Offending behaviour programmes?	57%	75%	57%	
10.5	Do you usually have association everyday?	100%	77%	100%	80%
10.6	Do you go to the gym more than five times each week?	0%	7%	0%	0%
10.7	Can you usually go outside for exercise everyday?	50%	63%	50%	0%
SECTIO	N 11: KEEPING IN TOUCH WITH FAMILY AND FRIENDS				
11.1	Are you able to use the telephone every day?	73%	70%	73%	33%
11.2	Have you had any problems with sending or receiving letters or parcels?	27%	49%	27%	17%
11.3	Is it easy/very easy for your family and friends to visit you here?	50%	38%	50%	67%
11.4	Have you had two or more visits in the last month?	10%	33%	10%	67%

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	Number of completed questionnaires returned	8	42	8	6
11.5	Do your visits start on time?	27%	41%	27%	

Key to t	adies				
	Any percent highlighted in green is significantly better than the comparator.	СУР		СУР	СУР
	Any percent highlighted in blue is significantly worse than the comparator.	n Hall	S ₋ e	n Hall	n Hall
	Any percent highlighted in orange shows a significant difference in demographic details.	HMYOI Foston Hall CY	Young people's comparator	HMYOI Foston Hall September 2009	l Foston Hall 2009
	Percentages which are not highlighted show there is no significant difference.	НМҮО	Young peop comparator	HMY O	HMYOI Fost March 2009
	Number of completed questionnaires returned	8	42	8	6
11.6	Are you and your visitors treated well/very well by visits staff?	27%	45%	27%	67%
SECTIO	N 12: PREPARATION FOR RELEASE				
For thos	e who have met their personal officer:				
12.1	Did you meet your personal officer within the first week?	100%	59%	100%	50%
12.2	Do you see your personal officer at least once a week?	73%	88%	73%	
12.3	Do you feel your personal officer has helped you?	73%	62%	73%	100%
12.4	Do you have a training plan?	50%	70%	50%	
For thos	e with a training plan:				
12.5a	Were you involved in the development of your training plan?	38%	67%	38%	
12.5b	Do you understand the targets set in your training plan?	50%	86%	50%	
12.5c	Can you see your training plan when you want to?	86%	45%	86%	67%
12.6	Has your YOT worker been in touch since you arrived here?	60%	81%	60%	100%
12.7	Do you know how to get in touch with your YOT worker?	90%	83%	90%	100%
Please a	answer the following about your preparation for release:				
12.8a	Have you had a say in what will happen to you when you are released?	27%	43%	27%	83%
12.8b	Are you going to school or college on release?	50%	71%	50%	67%
12.8c	Do you have a job to go to on release?	0%	10%	0%	17%
Do you l	know who to contact for help with the following, in preparation for your release:				
12.9a	Finding accommodation	67%	60%	67%	
12.9b	Getting into school or college	67%	60%	67%	
12.9c	Getting a job	44%	73%	44%	
12.9d	Help with money/finances	67%	52%	67%	
12.9e	Help with claiming benefits	44%	56%	44%	
12.9f	Continuing health services	56%	52%	56%	
12.9g	Opening a bank account	56%	48%	56%	
12.9h	Avoiding bad relationships	33%	52%	33%	
Do you t	hink you will have a problem with the following, when you are released:				
12.10a	Finding accommodation?	60%	38%	60%	
12.10b	Getting into school or college?	27%	24%	27%	
12.10c	Getting a job?	60%	46%	60%	
12.10d	Help with money/finances?	50%	58%	50%	
12.10e	Help with claiming benefits?	60%	28%	60%	
12.10f	Continuing health services?	50%	24%	50%	
12.10g	Opening a bank account?	40%	17%	40%	
12.10h	Avoiding bad relationships?	40%	28%	40%	
12.11	Is there anything you would still like help with before you are released?	50%	40%	50%	67%
For thos	e who were sentenced:				
12.13	Do you want to stop offending?	100%	91%	100%	100%

	Any percent highlighted in green is significantly better than the comparator.	I CYP		I CYP	I CYP
	Any percent highlighted in blue is significantly worse than the comparator.	on Hall	s,el	ton Hal 2009	ston Hall 19
	Any percent highlighted in orange shows a significant difference in demographic details.	I Foston	y people's arator	l Fos nber	1 Fost
	Percentages which are not highlighted show there is no significant difference.	НМҮОІ	Young compar	HMYO Septen	HMYC March
	Number of completed questionnaires returned	8	42	8	6
12.14	Have you done anything or has anything happened to you here that you thin will make you less likely to offend in the future?	^k 38%	46%	38%	80%