

Report on an announced inspection of

HMYOI Warren Hill

14 – 18 September 2009

by HM Chief Inspector of Prisons

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Introduction

Warren Hill, near Woodbridge in Suffolk, is a young offender institution for remanded and convicted young people aged 15 to 18. It also holds a small number of long-term sentenced young people in the separate Carlford Unit. Despite a challenging and volatile population, this full announced inspection found that Warren Hill had improved considerably since our last full inspection and was now performing reasonably well in all the principal areas that we assess.

Warren Hill was an essentially safe place, but reception was still housed in a portakabin and new arrivals continued to be held inappropriately on the same unit as young people separated for poor behaviour. Safeguarding arrangements were sound and those at risk of self-harm were well cared for, but new anti-bullying measures were still bedding down. We were pleased that, as a result of robust governance, there had been no further instances of the forcible strip searching that we had criticised previously. However, routine strip searching still took place in some areas, and use of force had increased. Drug use was not a problem at Warren Hill.

The quality of accommodation was generally satisfactory, although difficult to supervise. Relationships between staff and young people were mostly good, but black and minority ethnic young people were less positive about staff than their white counterparts, and aspects of the diversity agenda remained underdeveloped. The personal officer scheme worked well. The chaplaincy and healthcare both provided a good service.

Most young people spent a sufficient amount of time out of their cells and were able to have a reasonable amount of association and exercise in the open air. The quality of education was good, but the education contract had recently changed and the establishment was struggling to mitigate this significant reduction in purposeful activity. There was too little vocational training but access to PE and the library was good.

Resettlement was effectively managed, with timely assessments and effective training plans. There was a range of resettlement opportunities, including good substance use support and help to maintain family ties, but staff had difficulty securing accommodation for young people on release. The Carlford Unit continued to provide an important resource for young people on long sentences, but it lacked a sense of direction and coherent national role. We therefore, once again, recommend to the Youth Justice Board that it sets out a clear national strategy for the management of serious young offenders and defines Carlford Unit's place within it.

This inspection has identified considerable progress at Warren Hill since our last full inspection and staff are to be commended on their achievements. However, the establishment badly needs investment in its infrastructure, particularly to replace the inadequate reception, first night and segregation facilities, and it is of concern that the education contract has been changed, leaving young people with less purposeful activity. Without support to remedy these deficits, Warren Hill will struggle to sustain its recent improvements.

Anne Owers
HM Chief Inspector of Prisons

January 2010

Fact page

Task of the establishment

Warren Hill holds remand and convicted young people aged from 15 to 18 years from the eastern area.

Area organisation

Eastern region (with the exception of the Carlford Unit)

Number held

159 Warren Hill and 28 Carlford (5 November 2009)

Certified normal accommodation

Warren Hill: 192

Carlford: 30

Single cells (1 x double on Carlford)

Operational capacity

221 (Warren Hill and Carlford)

Last inspection

7 to 21 September 2009

Brief history

Warren Hill opened in 1982 to accommodate Category C young offenders in a closed environment. It was part of Hollesley Bay Colony, the other part of the prison being an open youth custody centre/detention centre. When the Criminal Justice Act of 1991 came into force, the population of open young offenders dwindled, and in 1992 the open establishment was adapted to accommodate adult category Ds – initially as a minority but today the adult population is the majority within the open prison, with young offenders occupying one unit.

Warren Hill, together with the Carlford Unit (a Section 53 unit opened in January 2000), went all juvenile in October of the same year.

In April 2002, while retaining some shared services, HMP & YOI Hollesley Bay became two separate prisons. The open complex retained the name Hollesley Bay and the juvenile parts (Warren Hill and the Carlford Unit) became HMP & YOI Warren Hill.

Description of residential units

Warren Hill consists of four residential units and one first night centre.

The four residential units hold a total of 185 young people (3 x 45 and 1 x 50) aged 15 to 18 years old.

All the young people are located in single cell accommodation with in-cell sanitation and washing facilities. All four have had new 'single cubicle child friendly shower facilities' installed within the last five years.

All units are managed by a senior officer and a principal officer and overseen by the residential governor. Staff have been specifically trained to work with under-18s.

The Carlford Unit is located some distance from the main prison and houses up to 30 young people serving longer determinate sentences and also indeterminate sentences, including indeterminate sentences for public protection.

Healthy prison summary

Introduction

HP1 All inspection reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review *Suicide is Everyone's Concern*, published in 1999. The criteria 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.

Safety

HP3 The reception facility remained a poor environment, but reception staff continued to deal with late arrivals well and routinely raised concerns with the escort providers. There were inevitable consequences of lateness, including the lack of opportunity to have a shower before being locked up. New arrivals continued to be co-located with

recalcitrant young people. The induction process was thorough. Safeguarding and child protection arrangements were sound, with good involvement from the local authority, and young people at risk of self-harm were well cared for. The new procedures to tackle bullying, which was a significant problem, were not yet embedded. Security was well managed, but routine strip-searching still took place in a number of areas. Adjudications were well done and their use had decreased, but there was potential for less formal interventions to be used. The use of force was increasing, but the use of forcible strip-searching was now subject to approval by the governor. Young people in the care and separation unit were treated decently by staff, but they lacked care plans. Detoxification was rare, but procedures were safe and mandatory drug testing (MDT) was carried out without strip-searching, which was commendable. Overall, the establishment was performing reasonably well against this healthy prison test.

- HP4 There was effective liaison between the establishment and the escort providers about transport problems and escort and reception staff exchanged information about individual young people when they arrived. Young people complained that they had not been told where they were going or anything about Warren Hill before they arrived. There were a significant number of young people arriving late after long journeys during which they did not always have access to food or toilet breaks. Some young people were not given the opportunity to take a shower prior to attending court and they were also unlikely to get a shower if they returned from court after 8 or 9pm, as was sometimes the case. There was no video link available, but a system was being installed. This would go some way to reducing the number of young people spending disproportionate periods in escort vans for very short court appearances. A comprehensive pre-discharge interview was conducted with all young people as they departed through reception.
- HP5 The high throughput of young people in an inadequate reception facility had been a longstanding problem highlighted in several previous inspections. Nevertheless, reception staff mitigated the poor environment by their respectful approach with young people. Routine strip-searching continued to be part of the reception procedure, which was inappropriate.
- HP6 Young people spending their first night in custody were co-located with those who had been separated for disciplinary reasons. Although in our survey the majority of young people did not say they felt unsafe on their first night, this was an unacceptable arrangement. The prospect of a new build was more certain than it had been, but some interim measures were needed. The immediate needs of new arrivals were dealt with well and initial assessments were carried out with sensitivity, despite the environmental shortcomings. However, risk management plans needed to be improved. Young people requiring complex detoxification were not accepted at Warren Hill. In the previous six months, there had only been one post-detoxification reception and no other young people had required detoxification in that period. All necessary protocols and procedures had been well arranged and properly documented.
- HP7 Young people started their induction programme the weekday after their arrival and were fully engaged throughout the week. There was good involvement from across the establishment and use of peer support mentors. We observed some excellent induction sessions and young people confirmed their usefulness.

- HP8 There was a comprehensive safeguarding policy, which incorporated all the essential components of safeguarding. The safeguarding committee met monthly and was well attended by a number of departments, although the residential units were not always represented and healthcare staff rarely attended. There was good representation from the local authority and young people who acted as dedicated safeguarding representatives for each of the residential units, including Carlford. The committee routinely reviewed a wide range of monitoring information covering all required safeguarding areas. The establishment social worker ensured that work relating to looked-after children was efficiently managed.
- HP9 Child protection referrals came from a good range of sources, including effective screening of complaints, and there had been examples of staff confidently reporting concerns about the actions of other staff. Referrals were processed efficiently and procedures agreed with the local children's social care services ensured that they were investigated appropriately and strategy meetings took place as necessary. Internal investigations had taken place when recommended by the local authority and suitable and robust action had been taken. Internal attendance at child protection committee meetings needed improvement, although representation from the local authority was good.
- HP10 There were some weaknesses in the assessment, care in custody and teamwork (ACCT) process which had not all been identified through the establishment's quality assurance procedures. Initial assessments of young people varied in quality, although mostly addressed the primary concerns. Care maps were discussed and reviewed at every case review, but the majority failed to address the causes of the young person's difficulties. Staff observations were detailed and demonstrated good engagement with young people, but night observations were too predictable. Case reviews were child centred, multidisciplinary and well attended and young people told us they felt able to participate. However, case managers changed frequently and consequently there was a lack of consistency to the review process. Young people's views on the overall value of the ACCT process varied. Parents or carers were notified when an ACCT was opened and were kept informed, but they were not invited to reviews to provide information or to support the young person.
- HP11 Almost a third of young people in our survey said that they had been victimised at Warren Hill and staff told us that bullying was a significant problem. There were good efforts to identify the extent and nature of bullying through surveys and consultation with young people and action had been taken when problems had been identified. Monitoring arrangements were adequate and individual young people were discussed at the safeguarding and senior management meetings, as well as patterns and trends in bullying. A new anti-bullying policy had been introduced very recently, but there was evidence that it was not being implemented properly and staff were complaining that they did not understand the ethos of the policy and had not been adequately trained.
- HP12 A comprehensive behaviour management strategy had recently been introduced, but much of it was aspirational. Young people understood the rules and staff were observed to challenge poor behaviour appropriately. Adjudications were reducing, but still high in number, and some we examined were for minor matters which could have been more appropriately dealt with by less formal means. The quality of the evidence was often poor. Good efforts had been made to make hearings more age appropriate. Punishments were routinely quality checked and they appeared consistent and appropriate, with the exception of removal from wing, which was contrary to the

behaviour management policy. There were good governance arrangements and relevant data analysis and ethnic monitoring.

- HP13 There had been an increase in the use of force, although in the main it was used appropriately to prevent young people fighting. We came across some examples where force had been used improperly to secure compliance with an instruction. Planned incidents were dealt with well. A new policy on forcible strip-searching requiring the personal approval of the governor in charge seemed to have eradicated the practice. Data collection, monitoring and analysis of the use of force were efficient, but attendance at the use of force monitoring and review group needed improvement. The safeguarding department ensured that young people were debriefed after the use of force.
- HP14 The care and separation unit (Butley) was well organised and clean, although the exercise yard was grim. Young people on the unit were treated decently by staff. There were systems to encourage young people to behave well and they could attend activities off the unit if risk assessed as suitable, but this was rare. Reviews were carried out appropriately on the unit, but individual care planning and staged reintegration was considerably underdeveloped. Governance arrangements were good, as were data collection and analysis, but attendance at the segregation monitoring and review group was inconsistent.
- HP15 The MDT rate had been 0% for the previous six months and all evidence suggested that there was little availability of illegal substances in the establishment. MDT was carried out without strip-searching, which was commendable.

Respect

HP16 The living environment was reasonable and young people had good access to showers. The units held large numbers of young people and were a challenge for staff to supervise, but the activity centre mitigated the difficulties. Consultation arrangements were very good. Not all young people, especially those from black and minority ethnic groups, reported positive relationships with staff, but they said they had a member of staff to turn to with a problem. Personal officers were supportive. Some aspects of diversity, in particular sexual orientation and foreign national work, were underdeveloped, but race equality work was effective. The chaplaincy team provided good pastoral care, particularly to vulnerable young people. The rewards and sanctions scheme was motivational, but target setting needed improvement. Complaints were dealt with politely and young people were satisfied with the way they were dealt with. Young people were given ample food, but they complained about the quality. Health services continued to be age appropriate, but delivered in wholly unsuitable accommodation. The establishment was performing reasonably well against this healthy prison test.

HP17 The establishment generally showed signs of wear and tear, but, overall, the living environment was reasonable. Outside areas were generally tidy and most cells and communal areas were clean, but many cells were poorly decorated and there was a lot of graffiti. Not all cell furniture was in good condition, although all young people had been given curtains and duvets in their cells and considerable improvements had been made to the quality of the kit. Young people had good access to showers and telephones. Consultation arrangements were very good. The residential units holding

large numbers of young people were difficult to supervise and shouting out of the windows was a concern, despite the best efforts of staff. The separate association facility in the activity centre mitigated the difficult task of supervising large numbers of young people on the residential units during association periods.

- HP18 Young people gave diverse accounts of their relationships with staff, varying from very good to poor. However, the majority said they had someone to turn to if they had a problem. The views of young people from black and minority ethnic groups were noticeably less favourable in our survey. We observed some good interaction between staff and young people during association periods, although there were noticeable differences between the levels of engagement in the activity centre and the residential units.
- HP19 Personal officers had regular contact with the young people they were responsible for and generally attended meetings relating to their care. Case records were variable in quality and lacked detail. They did not demonstrate the weekly appraisals of young people that personal officers were required to carry out. Nevertheless, the majority of young people spoke positively about the support they received and it was evident from our survey results that personal officer work had improved.
- HP20 Young people had good access to the Independent Monitoring Board and the advocacy service. Young people reported that it was easy to make an application and our survey responses with regard to the complaints system were significantly better than the comparator. Responses to complaints in the sample that we examined were consistently good. Complaint boxes were emptied by a member of discipline staff, which compromised confidentiality. Monthly reports were compiled about complaints, but there was no analysis of complaints data to provide useful management information.
- HP21 Some bail information was provided by the on-site youth offending team (YOT) worker and advocates helped young people to get legal advice. However, there were no trained legal rights or bail officers and young people reported difficulties in contacting their own legal advisers as they were required to use their own pin credit at peak times of the day. Provision for legal visits was good.
- HP22 Young people understood the rewards and sanctions scheme, there were good differentials and young people were motivated by it. Young people complained that they were not always told of warnings and records in files confirmed this. Young people on bronze level mostly considered the process fair, but their regime was too restrictive with regard to access to telephones, fresh air and association. Target setting was too vague, although there was good monitoring of the scheme.
- HP23 Attendance at the equal opportunities and disability liaison committee meetings was irregular, there was no external membership and young people were not represented on the committee. The promotion of diversity around the establishment was impressive and cultural and religious festivals were celebrated throughout the year. Diversity issues relating to sexual orientation were not properly addressed.
- HP24 There was a comprehensive disability policy and a disability liaison officer provided some informal support to young people who had been identified as having a disability. However, information was not effectively communicated to residential staff to ensure appropriate individual care.

- HP25 Attendance at the race equality action team (REAT) meetings by some departments was regular, but not so by others. Young people acted as REAT representatives and carried out their role enthusiastically. Young people we spoke to said they had not experienced racism in the establishment, but in our survey young people from black and minority ethnic groups reported significantly less favourably than their white counterparts on a number of areas relating to staff treatment. Allegations of racist behaviour were dealt with well. Impact assessments and ethnic monitoring were thorough, although equality of treatment by religion was not monitored. Young Muslims spoke well of the support they had received from the chaplaincy during Ramadan, but our survey highlighted other areas in which they felt they were treated unfairly. The provision for young foreign nationals was underdeveloped and staff were unclear about basic entitlements, such as international telephone calls. There was a lack of translated information in some areas.
- HP26 The lack of a coordinating chaplain for over two years had affected the overall planning, promotion and development of faith-based and non-denominational activities. Despite this, there were chaplains from a range of denominations who met the pastoral and faith needs of the population well. Corporate worship was well attended. The chaplaincy team delivered time-out, non-faith-based sessions for young people who were finding it difficult to cope with custody. The Muslim chaplain was working with staff and young people to raise awareness of different faiths and cultures. There were no links with local faith communities.
- HP27 Although most young people ate what was served, many of them complained about the quality. Budget cuts had resulted in less variety of food, but the quantity was ample and the menu included an evening snack. All diets were catered for and the menu included healthy options, which were promoted. Young people on special diets received individual attention from the catering manager and good attention was paid to young people with different needs relating to their religion. Consultation arrangements concerning food were particularly good.
- HP28 A health needs assessment had been carried out, but it was a combined document covering four prisons and lacked child focus. There were no children's nurses. The physical environment for the primary care centre was poor and compromised confidentiality. There was daily access to healthcare staff through wing visits and prompt access to GP appointments, although insufficient time for consultations. The wait for dental appointments was too long for children experiencing pain, with a wait of around four weeks for an urgent appointment. Pharmacy services were generally appropriate, but there were no pharmacy-led clinics. Monitoring of injuries by healthcare was particularly good and linked with safeguarding. The lack of a primary care mental health team was a cause for concern, although the child and adolescent mental health service team were providing a good substitute service. We observed a positive and caring attitude by nursing staff towards young people and they appeared to know their patients well.

Purposeful activity

- HP29 Young people continued to spend a reasonable amount of time out of their cell as residential staff were making good efforts to mitigate the impact of the changes to the education contract. Association and outdoor exercise were offered daily. However, young people on the basic level of the rewards and sanctions scheme spent too much

time locked up. The quality of teaching was generally good and young people behaved well, produced good work and gained some accreditations. There was insufficient vocational training. The PE programme was well balanced and suitable for young people and all young people were encouraged to take part. Access to the library was good and the librarian was very supportive. The establishment was performing reasonably well against this healthy prison test.

- HP30 Association and exercise were offered every day in accordance with the published timetable. Outdoor jackets were available, but the exercise areas were austere and barren. Take up of exercise was low because it was early in the morning and coincided with the serving of breakfast and the cleaning of cells. Staff engaged in standard activities on the wings during association, such as board games and table tennis. The facilities in the juvenile activity centre for young people on the gold level of the rewards and sanctions scheme were of a higher standard.
- HP31 Recent changes to the education contract meant that most young people were allocated to courses providing three hours of education and/or vocational training in the morning or the afternoon, although some got both. Residential staff were making reasonable efforts to provide constructive activity for young people when they remained on the units during the day. During the inspection, we observed staff organising wing activities and allowing young people to take showers or clean their cells during the day, but this was unplanned and it was difficult to assess how frequently such spontaneous activity took place. We calculated that the majority of young people were unlocked for between seven and eight hours each day, although the few on the basic level of the rewards and sanctions scheme could be unlocked for as little as four hours each day.
- HP32 Initial educational assessments were effective in identifying young people's learning needs and they were allocated to appropriate courses, assisted by information and guidance staff. It was commendable that the establishment continued to fund information and guidance staff posts following the withdrawal of the Department for Children, Schools and Families (DCSF) funding, but concerning that future funding was uncertain.
- HP33 The core curriculum was well planned, but there was insufficient vocational training. Young people with learning disabilities were effectively provided for and well supported by learning support assistants. Attendance was satisfactory and the few young people who refused to attend education were well managed. Young people behaved well and few were sent back to the wings for poor behaviour.
- HP34 The quality of teaching was generally good and this was reflected in the standard of work produced by young people. Most young people left the establishment with a nationally recognised qualification, regardless of their length of sentence or ability.
- HP35 The use of release on temporary licence (ROTL) for education purposes was developing well and there had been some interesting initiatives involving the local community, such as the fire break course, although only a few young people benefitted from this.
- HP36 The PE programme was well balanced and suitable for young people. The facilities were well managed. A wide range of qualifications was available and young people achieved well. There were well-established links with psychology and the young people substance misuse service, but links with healthcare were less well developed.

Young people who were reluctant to attend PE were encouraged to take part and well supported. PE staff had made efforts to reduce bullying in the gym showers, which had been reported as a problem, but supervision remained difficult due to the design of the showers.

- HP37 The library was well used, but it was not open at weekends. The librarian offered a range of useful activities and supported young people as they worked in the library. Young people who were identified as not using the library were encouraged to participate. The librarian was particularly sensitive to young people on the basic level of the rewards and sanctions scheme and ensured that they had access to extra books.

Resettlement

HP38 There was an up-to-date resettlement policy. Not enough was done with data from needs analyses and exit surveys. Resettlement was managed effectively by the resettlement policy committee. Release on temporary licence was used to good effect. Training planning was well organised and target setting was reasonable. There were problems securing accommodation for some young people. Visiting facilities were good, but young people did not get many visits. Family support workers offered good support. Good quality substance use services were linked well with other departments. Healthcare services prior to release were well planned. The establishment was performing reasonably well against this healthy prison test.

- HP39 There was an up-to-date resettlement policy. A needs analysis had been carried out, but the results had not been fully used to inform the development of the resettlement policy. An exit survey had been carried out, but the response rate was very low. The resettlement policy committee was well attended and served its monitoring function, but lacked community representation. There were effective links with community YOTs. The ROTL policy had been updated and ROTL was being promoted. There was no pre-release course.

- HP40 A dedicated casework team had recently been established to manage the training planning process. Senior managers attended 10% of reviews for quality assurance. The quality of the reviews varied, but not all departments contributed and family attendance was low. Target setting was reasonable and most young people knew their targets. There was a moderately wide range of non-accredited programmes. Securing accommodation for young people prior to their release was a problem and more needed to be done to provide specialist support. The future of the guidance team was uncertain and Connexions support was inadequate. However, the majority of young people left with an education placement to go to. Young people's healthcare needs were properly planned prior to release. The family services workers gave much needed support to young people who had children of their own. Financial advice for young people was ad hoc.

- HP41 Visits entitlements were inadequate. There was a low take up of visits and little consultation with visitors to find out why. The low take up was not surprising, however, since almost half the young people lived over a hundred miles away. A team of three family support workers helped young people to maintain contact with their families and offered families a direct telephone support service to report their concerns. They were engaged with a number of departments in the establishment,

but they had some concerns that not all young people had effective access to their service. There was a reasonably comfortable visitors' centre with staff to help visitors and free transport to and from the prison. The visits hall was newly decorated, provided refreshments and a crèche and there was a relaxed atmosphere. Visits started on time and visitors were positive about visits staff. Family days were held on the Carlford Unit and were much appreciated by families, but there were no family days at Warren Hill. Access to telephones was generally good, but young people on the bronze level of the rewards and sanctions scheme did not have daily access and this was unacceptable. Mail was managed efficiently.

- HP42 The Carlford Unit held young people who were serving indeterminate or long sentences, having been convicted of a serious offence, and they usually stayed for a significant period before being transferred to a young adult establishment. The unit was considered a safe place by young people. They had plenty of time out of their cell, but said they were often bored and attributed this to the reduction in education provision. Young people enjoyed the education they had, teaching was good and many young people achieved substantial qualifications, but the range of vocational provision remained narrow. There was a lack of specific interventions and care planning to meet the needs of this high-risk and needy group of young people. Since there was still no national strategy for the management of young people serving long sentences for serious offences, which we have been highlighting for several years, this was a national as well as a local issue.
- HP43 The drug strategy did not include alcohol and a recently completed needs analysis had not influenced service provision. Smoking cessation support and nicotine patches were available. The young people's substance misuse service delivered a full range of services, working closely with other departments. Group sessions were very well delivered. There were effective community links for the small number of young people who needed ongoing support with substance use problems.

Main recommendations

- HP44 **Young people should not be routinely strip-searched. Strip-searching should only be carried out after a thorough risk assessment has identified serious risk of harm to the young person or others, and on the authorisation of a duty governor.**
- HP45 **Pending the new build, interim measures should be taken to ensure that young people who are new to custody are not co-located with young people separated for disciplinary reasons.**
- HP46 **A properly planned and coordinated programme of activities should be provided to supplement the education and vocational training programme to ensure that all young people have a full and purposeful day.**
- HP47 **There should be a national strategy for the care and management of children and young people serving long sentences, including the role of the Carlford Unit. This should include referral criteria, staff recruitment, selection, training and staff supervision and support.**

Section 1: Arrival in custody

Courts, escorts and transfers

Expected outcomes:

Children and young people travel in safe, decent conditions and in a timely way to and from court and between establishments. During travel the individual needs of young people are recognised and given proper attention. Children and young people travel separately from adults.

- 1.1 Escort staff and establishment staff communicated effectively about problems relating to transport arrangements and exchanged information appropriately about individual young people. A significant number of young people arrived late at the establishment after long journeys and young people were not always given food on escort vans. Some young people did not have the opportunity for a shower before attending court and they were unlikely to get a shower if they returned after 9pm. The video link was not yet operational and young people spent disproportionate periods in escort vans for very short court appearances. A comprehensive pre-discharge interview was conducted with all young people as they departed through reception. Young people complained that they had not been told where they were going or anything about Warren Hill before they arrived.
- 1.2 We observed professional working relationships between reception staff and the two escort contractors, GSL and SERCO. Escorts to court were prioritised each morning and young people were taken to the reception area between 7.30 and 8.30am, depending on the courts they were travelling to. Young people told us they did not have an opportunity for a shower before leaving for court, which was confirmed by staff. They were also unlikely to get a shower if they returned from court after 9pm, which sometimes happened. The reception manager told us this was due to limited staff availability to unlock young people going to court before the general unlock time of 7.55am, while supervising the regime on the units.
- 1.3 Young people were issued with breakfast packs each evening and were expected to eat their breakfast before going to court (see section on catering). They could change into their own clothing at reception. The establishment had a good range of clothes, underwear, jackets and plimsolls for young people who did not have any clothing. We did not observe any young people transferring to other establishments, but were told by reception staff that they provided young people with information about the establishment they were travelling to and used the prisoner escort records to highlight any vulnerability to escort staff and the receiving establishment.
- 1.4 The majority of young people were transported to court on time. They experienced delays at court after their appearances, which influenced the time they arrived back at the establishment. At the time of the inspection, one young person had experienced a long journey to a London court for what he described as 'three minutes on the stand'. A new video link system had been installed at the establishment, but was not yet operational, and young people continued to spend disproportionate periods in escort vans for court appearances.
- 1.5 Young people were told at court where they were going following sentence, but many young people said they were not provided with any written information about Warren Hill and nothing had been produced by the establishment. One young person, commenting on his experience

of being transported to the establishment, wrote in his survey: 'I asked plenty of times where I was going but they just blanked me'.

- 1.6 The escort vans we observed were reasonably clean. Young people told us they were not handcuffed in the vehicles and reception and escort staff told us that young people were not transported with adults. We observed escort staff speaking respectfully to young people and relaying information to reception staff about the young person's mood during the journey. Vulnerable young people were located closest to escort staff in the back of the van and were encouraged to keep a light on during the journey. Some young people complained of feeling unsafe because of the lack of seatbelts in the cellular vehicles.
- 1.7 In our survey, 54% of young people said they were offered something to eat and drink, which was significantly better than the comparator of 34%. Escort records showed that young people were offered meals at court, but we were told by SERCO escort staff that they only carried water on the vehicles. GSL carried sandwiches. At the time of the inspection, one young person had been given lunch at the magistrates' court at 1pm and was not offered another meal until first night assessments were completed at the establishment at 8.30pm. This was unacceptable.
- 1.8 There was evidence that reception staff asked young people about their experience at court and transportation to the establishment and any issues were fed back to the contract delivery managers at the quarterly Prisoner Escort and Custody Service (PECS) meetings. An escort survey had been produced to provide the establishment with information about young people's experience under escort, but these were not consistently given to young people to complete.
- 1.9 Young people being discharged had the opportunity for breakfast and a shower and a change into their own clothing. They were not taken to reception until a responsible adult had arrived to collect them or, where appropriate, a taxi had arrived. A comprehensive pre-discharge interview was conducted by the duty manager to confirm their understanding of licence conditions and to identify any outstanding complaints. During one interview that we observed, a young person raised concerns about the educational provision and the fact that his cigarettes had been disposed of when he arrived. The response he received was not satisfactory. Furthermore, there was no collation or evaluation of outstanding complaints raised by young people or evidence that they had been referred elsewhere to be addressed.

Recommendations

- 1.10 All young people should be offered a shower before and after attending court.
- 1.11 Age-appropriate written information about Warren Hill should be developed by the establishment and provided to young people at court by youth offending team court officers.
- 1.12 Young people should not spend long periods in court cells and this should be monitored by the establishment and discussed at PECS meetings.
- 1.13 The video link should be fully used, when appropriate, at the earliest opportunity to reduce the number of young people attending courts unnecessarily.
- 1.14 All escort vans should carry snacks as well as water and these should be offered to young people at regular intervals.

- 1.15 Any outstanding complaints raised by young people prior to discharge should be responded to. Complaints should be monitored to identify and respond to trends where appropriate.

First days in custody

Expected outcomes:

Children and young people feel and are safe on their reception and introduction to the establishment. Their individual needs, both during and on release from custody, are identified and effective plans developed to meet those needs. During induction into the establishment young people are helped to understand establishment routines, are told how to access available services, are given a clear idea of what is expected of them and are helped to cope with imprisonment.

- 1.16 There had been no changes to the reception area since the previous inspection and it continued to be an inadequate facility for the number of movements through the area. Staff mitigated the poor environment by a respectful approach to young people. All new arrivals were routinely strip-searched, which was inappropriate. The Butley unit housed the first night centre and the separation unit and young people spending their first night in custody were inappropriately co-located with those separated for disciplinary reasons. However, the immediate needs of new arrivals were dealt with well and initial assessments were carried out with sensitivity. However, risk management plans needed improvement. We observed some excellent induction sessions, with involvement from across the establishment, and use of peer support mentors and young people confirmed the effectiveness of the induction programme.

Reception

- 1.17 There was an average of 42 discharges, 91 productions to court and 47 admissions each month. The reception area was a portakabin and consisted of two holding rooms, an office and a property store room and it was far too small to cope with the throughput of young people. Several years of repeated bids to fund a new build had finally resulted in a successful application, but at the time of the inspection there was no start date.
- 1.18 The rooms in reception were well decorated with pictorial and written information displayed in English (see diversity section). New arrivals were sometimes required to wait on the vans when there were too many young people to accommodate in the restricted space. Nevertheless, from our observations and reports from young people, we concluded that reception staff mitigated the poor environment by their respectful approach to young people.
- 1.19 Reception staff were notified by the Youth Justice Board (YJB) of young people who were arriving and escort staff attempted to provide an estimated time of arrival. Essential assessments and information were provided electronically and were mostly up to date. The YJB was contacted when information was not received or was out of date. Young people remained on enhanced observations on the first night unit until such time as staff had received all the information they needed.
- 1.20 All young people were asked if it was their first time in custody and were informed of what would happen next. The reception procedure included routine strip-searching, regardless of risk, which was inappropriate. However, we noted that strip-searches were conducted sensitively, which was confirmed by young people we spoke to. In our survey, 80% of young

people said they were treated well in reception, which was significantly better than the comparator of 69%.

- 1.21 We observed cell-sharing risk assessments being completed at the front desk of reception, which did not afford privacy. Attention was paid to current and historical offences, as well as any history of self-harming, which informed the overall risk assessment. Young people did not spend lengthy periods in reception.
- 1.22 A free reception pack was issued containing fruit juice, sweets, biscuits and writing material and young people were provided with water. One of the holding rooms contained reading material and computer games which young people could use while they were waiting.

First night

- 1.23 The Butley unit housed the first night centre and the separation unit and young people spending their first night in custody were co-located with those separated for disciplinary reasons and occasionally young people undergoing detoxification. This was a totally unacceptable arrangement which we have raised repeatedly in previous inspections. There were plans for a new building to house a separate first night centre, but this would take at least 18 months to complete.
- 1.24 Managers had not taken any interim measures to ensure that young people who were new to custody were not affected by the volatile behaviour of the more challenging occupants of the Butley unit. At the time of the inspection, two newly-admitted young people were located opposite a very vulnerable young person who had smashed up his cell.
- 1.25 Completion of vulnerability assessments was shared between reception and first night staff, depending on the number of new admissions. E-Asset and other assessments were reviewed and relevant information, particularly incidents of self-harm or other indicators of vulnerability, were recorded on the assessment form before the young person's arrival and used as prompts during the interview.
- 1.26 We observed one interview conducted in the principal officer's office in reception. Confidential information was held in the office and the young person had to sit in the doorway while the officer recorded the information directly on to the vulnerability assessment on the computer. Notwithstanding this, the interview was well conducted, the young person was alerted to the sensitive nature of some of the questions and was reassured throughout the process. Particular attention was paid to whether young people could read or write and to the bullying and suicide and self-harm procedures. Young people were told about the Samaritans' service and given written information on how to contact them.
- 1.27 The risk management plans following the vulnerability assessments that we examined were a little formulaic and largely identified the induction programme and the anti-bullying procedures as a means of reducing expressed anxieties. It was unclear from the assessments we reviewed whether referrals were made to the support services which had been identified in the risk management plan. There was quality assurance of these assessments to ensure that shortfalls were identified and good practice was shared and acted on by relevant staff and managers.
- 1.28 Following the assessment, young people were offered a free telephone call to their next of kin and a hot meal. In our survey, 91% of young people said they had been given a free telephone call on arrival and 92% said they had been given something to eat, which was significantly

better than the respective comparators of 83% and 82%. Files that we reviewed showed that this practice was consistently followed.

- 1.29 The use of the cell bell and the time of unlocking was explained and most young people were offered a shower (see section on courts, escorts and transfers). The cells were clean and well prepared.
- 1.30 The night staff we spoke to did not usually work on the Butley unit, but they had a good understanding of the needs of young people during their first night in custody and they had a reasonable handover from first night staff. A night observation support sheet was prepared for all young people, which indicated the number of observations to be made by night staff. The first morning interview was conducted by induction staff. They met each young person in private to go through the completed assessments and check that all the first night procedures had been conducted. The interview was thorough and addressed the young person's immediate needs and concerns. They were helped to set up a PIN phone account and to complete a visiting order so that they could have a weekend visit.
- 1.31 The rules and regime were explained and complemented by written information, which was also available in translated formats. Young people were encouraged to keep themselves and their cells clean and the cell points system and the rewards and sanctions scheme were explained. Safeguarding arrangements were discussed at length and young people were encouraged to talk to their personal officers, the Samaritans or safeguarding representatives. In our survey, 83% of young people said they felt safe on their first night. The first morning interview was an interactive process which was well conducted by staff.

Induction

- 1.32 The induction programme started on the following weekday and young people were kept fully engaged throughout the week-long rolling programme. There was input from across the establishment and use of the safeguarding and diversity representatives to offer initial peer support (see safeguarding and diversity sections).
- 1.33 We observed some excellent induction sessions. Seventy-eight per cent of young people said that the induction programme told them everything they needed to know, which was significantly better than the comparator of 67%. However, 63% of young people from black and minority ethnic groups said that the induction programme told them everything they needed to know, which was significantly worse than the comparator of 86%.
- 1.34 Young people were given an induction booklet containing written information and pictures of the establishment. Those who did not speak English could not undertake the full programme, but were provided with translated written information. The induction programme was conducted in a dedicated room which was suitable for group discussions and one-to-one interviews.
- 1.35 The induction programme was interactive, using videos and quizzes as well as one-to-one presentations. A tour of the establishment was offered. Appropriate breaks were scheduled throughout the day and refreshments provided. Young people who had been at the establishment in the previous three months were not required to complete the full programme, but were updated individually on any changes to the rules or regime.
- 1.36 During the induction programme, members of the safeguarding team and Barnardo's representatives gave young people a comprehensive overview of their roles and provided

reassurance that their safety and wellbeing was paramount. A video called 'out of control' was used to check young people's understanding of the impact of bullying and what to do if it occurred. Safeguarding and diversity young people representatives described how to report incidents of bullying, illustrated by their own personal experiences. Each young person was given a positive intervention plan wrist band as a reminder of the anti-bullying procedures.

- 1.37 Education staff did not participate in the induction programme, but induction staff conducted individual interviews at which an initial work allocation risk assessment was completed and forwarded to the head of learning and skills. These assessments were used during training planning meetings to identify the need for further support, such as referral to family support services or the young people's substance misuse service. Young people were given the opportunity to complete an evaluation form at the end of the programme, but no use was made of the information.

Recommendations

- 1.38 Cell-sharing risk assessments and vulnerability assessments should be conducted in private.
- 1.39 First night risk management plans should be relevant to the young person's needs and identified risks, and managers should monitor quality through a robust system of quality assurance.
- 1.40 Referrals should be made to support services in line with assessments and recorded in the history sheets.

Housekeeping point

- 1.41 Evaluation forms should be reviewed and analysed to improve the induction programme.

Section 2: Environment and relationships

Residential units

Expected outcomes:

Children and young people live in a safe, clean, decent and stimulating environment within which they are encouraged to develop independent living skills and learn to live in, and participate positively to, the community.

2.1 The residential units holding large numbers of young people were difficult to supervise and shouting out of the windows was a concern despite the best efforts of staff. The establishment generally showed signs of wear and tear, but, overall, the living environment was reasonable. Outside areas were generally tidy and most cells and communal areas were clean. Many cells were poorly decorated and had a lot of graffiti. Not all cell furniture was in good condition, although all young people had been given curtains and duvets in their cells and considerable improvements had been made to the quality of the clothing. Young people had good access to showers and telephones. Consultation arrangements were very good, although some young people did not feel well represented at the meetings.

Accommodation and facilities

- 2.2 The residential accommodation at the Warren Hill site comprised four residential units: Orwell, Alde, Deben and Gipping. Each had capacity for 45 young people, apart from Deben, which could accommodate 49. Butley unit, which acted as the first night and segregation unit, had capacity for 13 young people.
- 2.3 The task of supervising high numbers of boisterous adolescent boys was made more difficult by the physical design of the units, with narrow corridors and numerous blind spots. There was no camera coverage on the stairways. However, the option for some young people to attend the separate activity centre for association mitigated this and the atmosphere in the residential units was generally relaxed, with a reasonably high staff presence when groups of young people were congregating.
- 2.4 All young people were located in single cells which had screened in-cell sanitation. There was an ongoing redecoration programme, but many of the cells were poorly decorated, although reasonably clean, and graffiti was widespread despite routine cell checks by staff. Observation panels were free of obstruction. Time was scheduled in the daily programme for young people to clean their cells and they were supplied with suitable cleaning materials.
- 2.5 There was good quality solid furniture in the cells, but most of it was in a poor state of repair. There were no lockable cupboards. We received numerous complaints from young people about the poor ventilation in the cells due to the design of the new windows.
- 2.6 Young people had personal pictures and photographs on display in most of the cells. We did not find any inappropriate material on display. Each cell contained a television. Young people on the bronze level of the rewards and sanctions scheme were deprived of their television and were issued with a radio instead. All cells had wash basins which provided drinking water.

- 2.7 Cell bells were checked by staff each day to make sure they were working. During the night, we observed officers responding promptly when a young person rang his bell. Young people we spoke to expressed differing views on how quickly cell bells were answered. In our survey, 20% of young people said they were answered within five minutes, which was significantly worse than the comparator of 31%. The cell bell system was outdated and there was no central facility for checking response times.
- 2.8 The communal areas were somewhat cramped for association purposes. There was a reasonable amount of recreational equipment and the activities were well supervised by staff (see also section on time out of cell). The communal areas were also used as dining areas with folding tables. The outside areas were generally clean and tidy and the grounds were well kept.
- 2.9 Information about unit routines and procedures was displayed in all the residential areas. Some of this material had been produced by young people themselves and the content was relevant and age appropriate. There was no material in languages other than English (see diversity section).
- 2.10 Young people shouting at each other out of windows continued to be a problem. Posters which young people had produced were on display highlighting the problems this practice caused. Staff that we spoke to were aware of the issue, but most did not seem to know how to deal with it. We observed one night officer dealing with this problem very efficiently, but this was not typical of our experience during our night visit. In our survey, 44% of young people said that shouting out of windows was a problem.
- 2.11 There were two telephones on each of the units and three in the juvenile activity centre, which was sufficient to facilitate daily access to telephones. The telephones had hoods which afforded some privacy and notices were displayed that calls would be monitored. Young people were able to make a call for a maximum of 10 minutes, followed by a 15-minute wait before they could make another call. Young people complained that their conversations were cut short or they had to join the queue again if they were not successful in making a connection, but it provided fair access.
- 2.12 A young person liaison meeting took place every month. This was chaired by the residential governor and attended by young people's representatives from each of the units. Staff from different areas in the establishment attended regularly, including the catering manager and the family links worker, but healthcare was not represented. The agenda covered standing items such as bullying, rewards and sanctions, food and complaints. The minutes of these meetings were thorough and showed that the agenda was fully covered. However, a number of young people told us they did not feel that their views were adequately represented by the young people who attended the meetings as unit representatives. There was no formal system in operation to ensure that the representatives canvassed the views of young people in the units.

Hygiene

- 2.13 All young people had been issued with curtains and duvets and their mattress could be changed on request. Bedding was changed each week.
- 2.14 Young people had good access to showers and, in our survey, 92% of young people said they could shower every day, which was significantly better than the comparator of 56%. All the showers in the residential areas were in reasonable condition, but there was graffiti in some of the showers. Young people were locked in the individual shower rooms from the outside so that others could not get in to reduce the opportunity for bullying. Young people inside the

showers could unlock them from the inside and could leave their cubicles whenever they wished.

- 2.15 There were no laundry facilities on the units and clothing was laundered centrally once a week.

Clothing and possessions

- 2.16 There was a standard list on each of the units of possessions which young people were able to keep. Young people were issued with basic hygiene equipment on arrival, replacement items were freely available and there was also a good range to purchase from the canteen. There were substantial quantities of toiletries on display in many of the cells. Officers did not appear to keep track of these items and we were concerned that there was potential for bullying (see bullying section).
- 2.17 Young people could wear their own underwear, but had to use prison-issue outer garments. A large quantity of new kit had recently been purchased. The quality of the new clothing was good. Kit exchange took place weekly and young people were able to keep the same items they had been issued with initially.

Recommendations

- 2.18 CCTV should be installed in locations where supervision is otherwise difficult.
- 2.19 Cell furniture should be promptly repaired or replaced as necessary.
- 2.20 Lockable cupboards should be provided.
- 2.21 All cells should have adequate ventilation.
- 2.22 Residential staff should monitor the accumulation of personal items in cells to reduce the potential for bullying.
- 2.23 A system for checking the timeliness of cell bell responses should be introduced.
- 2.24 All staff should be made aware of the need to address the problem of shouting out of windows.

Housekeeping point

- 2.25 Graffiti should be removed from the shower areas.

Relationships between staff and children and young people

Expected outcomes:

Children and young people are treated with care and fairness by all staff, and are expected, encouraged and enabled to take responsibility for their own actions and decisions. Staff have

high expectations of all children and young people and have a role in setting appropriate boundaries. They listen, give time and are genuine in their approach.

2.26 Relationships between staff and young people were variable, but the majority of young people said that staff treated them with respect and they had someone they could go to with a problem. In our survey, there were some significant differences of view about staff treatment expressed by young people from black and minority ethnic groups.

2.27 In our survey, 79% of young people said that staff treated them with respect. However, the responses from young people from black and minority ethnic groups were significantly less favourable in some areas relating to staff treatment, with only 57% reporting that staff treated them with respect (see also diversity section).

2.28 There was little consistency in the accounts young people gave us of relationships with staff. There were also some inconsistencies in our observations. We observed some relaxed relationships between staff and young people during evening association in the activity centre, but this was less evident on the residential units where staff were in the main occupied in observing activities and supervising telephone calls and showers.

2.29 The majority of staff referred to young people by their first name, but we also heard some officers calling young people using only their surname. One young person wrote in his survey: 'The staff need better people skills to be able to interact with difficult young people. This would gain them respect and they would be less likely to be assaulted over silly things'.

2.30 Not all staff displayed their names as well as their numbers on their uniforms. This needed to be remedied so that young people could easily identify and properly address staff when they needed help and to provide an additional safety measure.

2.31 Residential staff we spoke to were generally able to identify young people on their unit who they felt needed additional attention. There was evidence in wing files that we examined of good staff engagement with young people and particularly by education and psychology staff and the young people's substance misuse service team. They invariably took the time to make constructive, positive comments tailored to each young person and provided a balanced perspective if the young person had been behaving badly.

2.32 However, in our survey, only 42% of young people reported that staff had checked on them personally in the last week to see how they were getting on. In our discussion groups with young people, some said that there were members of staff they would avoid if they were in difficulty, but the majority said there was someone they could turn to. In our survey, 82% of young people said there was a member of staff they could turn to with a problem, which was significantly better than the comparator of 71%.

Recommendation

2.33 Staff should display their name as well as their staff number on their uniform.

Personal officers

Expected outcomes:

A designated officer is the central point of contact and support for each child and young person. This officer takes responsibility for their care and wellbeing by engaging with the child or young person and their network regularly.

- 2.34 Personal officers had regular contact with the young people they were responsible for and generally attended meetings relating to their care. Case records were variable in quality and lacked detail. They did not demonstrate the weekly appraisals of young people that personal officers were required to carry out. Nevertheless, the majority of young people spoke positively about the support they received from their personal officer and it was evident from our survey results that personal officer work had improved.
- 2.35 A comprehensive personal officer policy had been produced six months before the inspection, which described the personal officer role as central to the day-to-day care of young people and included detailed guidance about the essential elements of the role.
- 2.36 The policy emphasised the importance of the role of the personal officer in training planning arrangements. To support this, personal officers were allocated to individual young people, according to their availability to attend their initial training planning meeting. Subsequent reviews were organised taking account of the personal officers' shift patterns to facilitate their attendance. A buddy officer was also allocated to cover for personal officers when they were not available.
- 2.37 Some personal officers we spoke to said that the system of initial allocation meant that, although they were available to attend the first training planning meeting, they were not always on shift at the time of allocation and this sometimes resulted in a delay of several days before they could make contact with new arrivals. However, in our survey, all responses relating to personal officer work, including timeliness and regularity of contact, were significantly better than the comparators and all the young people we spoke to individually and in our group meetings, other than recent arrivals, knew who their personal officer was and had met them. Some young people we spoke to did not feel well supported by their personal officer, but the majority did. In our survey, 77% of young people said that their personal officer had helped them, which was significantly better than the comparator of 60% and showed a significant improvement on the comparator of 60% reported in the previous inspection.
- 2.38 Personal officers made good efforts to comply with the policy requirements to see the young people they were responsible for each week. In our survey, 83% of young people said they saw their personal officer at least once a week, which was significantly better than the comparator of 63%.
- 2.39 The quality of the records in the case files was variable. Records sometimes gave an impression of superficial contact rather than an account of a weekly appraisal and review of targets as set out in the personal officer policy. However, personal officers' comments were well balanced even when young people demonstrated consistently challenging behaviour. There was evidence that they tried to motivate young people to improve, but no evidence of seeking to identify the causes for bad behaviour when it was out of character. In all case files that we examined, targets set were formulaic, for example 'be polite', 'stop playfighting', and it was unclear how these targets were monitored.

- 2.40 There were no records in the files that we examined of discussions between personal officers and staff from other disciplines and no evidence of engagement with young people's families.
- 2.41 The frequency of management checks of wing case files varied and occasionally two months had passed without a check. With one exception, the checks consisted of a rubber stamp.
- 2.42 Personal officers generally attended training planning reviews and ACCT (assessment, care in custody and teamwork) reviews relating to the young people they were responsible for, although the extent of their engagement with the process varied considerably in the reviews we observed. The personal officer policy also described the personal officer's role within a system of multi-agency case conferencing to address young people's difficulties which could not be addressed in training planning reviews. However, there was no evidence that such a system was in operation (see also safeguarding section).

Recommendation

- 2.43 **Accounts of personal officer contact in case files should be comprehensive and balanced and contain an ongoing appraisal of the young person's progress against individual targets.**

Section 3: Duty of care

Safeguarding children

Expected outcomes:

The establishment provides a safe and secure environment, which promotes the welfare of all children and young people, protects them from all kinds of harm or neglect, and provides services that seek to ensure safe and effective care. The establishment is open to external agencies and independent scrutiny, including consultation with and involvement from children and young people and their families and the wider community.

- 3.1 There was a comprehensive safeguarding strategy which had been ratified by Suffolk Safeguarding Children Board (SSCB). Working arrangements between the establishment and the Board provided a sound basis for implementation of the strategy. The safeguarding committee meetings were well attended, although representation by unit staff was variable and healthcare rarely attended. The standing agenda was relevant and the committee routinely reviewed a wide range of information covering all required safeguarding areas, although there were some gaps in some areas. The use of young people as safeguarding representatives was an excellent initiative and they were well supported by the safeguarding team, but required further guidance and support to fulfil their role properly. An establishment social worker ensured that the needs of looked-after children were efficiently met.
- 3.2 The safeguarding strategy had been agreed in September 2008 and signed by the governor, area manager and a representative of the SSCB. The strategy was comprehensive and set out six core components of safeguarding: suicide and self-harm prevention, violence reduction, child protection, information sharing, staff recruitment and vetting, and staff training. The strategy described consultation arrangements with young people and their family or carers, work with individual young people and effective inter-agency working. The strategy also addressed important areas of work that linked with the safeguarding agenda, such as complaints procedures, public protection considerations (particularly the risk to children) and the importance of an integrated approach. There was a strong diversity element running through the strategy.
- 3.3 The safeguarding strategy set out clear terms of reference and an appropriate designated membership of the safeguarding committee which had been set up to implement the strategy. The committee met monthly and was chaired by the safeguarding team lead, who was also a member of the establishment's senior management team (SMT). Strategic safeguarding issues and patterns and trends emerging from safeguarding monitoring data were discussed.
- 3.4 The safeguarding committee had a broad internal membership. A representative from the SSCB was the only regular external member, but the August 2009 meeting was also attended by representatives from the advocacy team, the escort providers and a senior practitioner from family services. The meeting was attended regularly by a core group of staff from the chaplaincy, safeguarding and race equality teams and other managers with specialist functions, such as security. Attendance by unit staff representatives was variable and healthcare rarely attended.
- 3.5 The regular participation of young people representatives from all the residential units, including Carlford, was an excellent initiative. The young people safeguarding representatives

told us they felt able to contribute to the safeguarding meetings, were well supported by the safeguarding team and understood their role. However, they felt that they needed greater support and understanding from residential staff to carry out their role properly. The terms of reference of the safeguarding committee included responsibility for monitoring a wide range of statistical data produced by the safeguarding team to identify patterns and trends and report to the monthly SMT. A monthly statistical report was compiled covering all aspects of violence reduction, suicide prevention and the management of self-harm, bullying, complaints, cell-sharing risk assessments and rewards and sanctions broken down by age, ethnicity, nationality and faith. There were gaps in some areas of data analysis (see bullying and self-harm prevention sections). Information on child protection was limited to the number of referrals for that month, but the separate child protection committee considered child protection data. The safeguarding committee produced a monthly action plan which was continually updated. Minutes of the safeguarding committee meetings indicated discussion of all safeguarding areas and there was evidence of discussion of emerging patterns and trends requiring further investigation.

- 3.6 Copies of all reports of injuries (F213s) sustained by young people were sent to the safeguarding team. All reports were checked and those which fell into the category of unexplained or requiring further investigation were followed up. Only unexplained injuries were discussed at the safeguarding committee, which did not provide an accurate overview of the extent of injuries. Injuries sustained during restraint were not discussed and this was an important omission.
- 3.7 The safeguarding team was led by a senior manager whose work was directly supervised by the governor. The team was responsible for the strategic oversight of child protection, positive intervention planning (anti-bullying), suicide prevention and the management of self-harm, violence reduction and race equality. Members of the safeguarding team spent a good deal of time on the residential units offering advice and support to residential staff and supporting individual young people.
- 3.8 The local authority social worker attached to the establishment advised the safeguarding team and senior managers on child protection issues and the management of individual referrals. He had a caseload of approximately 35 looked-after children. He was responsible for ensuring that relevant local authorities fulfilled their responsibilities to children who were looked after or had leaving care entitlements and that the statutory reviews of looked-after children took place when required.. The safeguarding manager for the SSCB advised us that she had observed two looked-after children reviews for young people serving long sentences which had been managed very well. The governor and/or the safeguarding team lead represented the establishment at the main meetings of the SSCB and attended the Board's policy and procedures sub-group meetings. The two local authority representatives we spoke to said that there was genuine and meaningful partnership working with the establishment on issues that affected young people in custody at Warren Hill and the Carlford Unit.

Recommendations

- 3.9 **Healthcare and residential wing managers should ensure that there is always a nominated staff representative in attendance at all safeguarding committee meetings.**
- 3.10 **The safeguarding team and residential units should develop a joint protocol outlining how young people safeguarding representatives should fulfil their role on the units and the support they should receive from unit staff.**

- 3.11 The safeguarding committee should monitor all injuries sustained by young people, however caused.

Good practice

- 3.12 *It was an excellent initiative for young people to act as safeguarding representatives and attend safeguarding committee meetings so that they could participate in discussions which were not confidential.*

Child protection

Expected outcomes:

The establishment protects children and young people from maltreatment by adults or others in a position of power or authority.

- 3.13 There was a comprehensive child protection policy and the governor chaired a monthly multi-agency child protection committee meeting, which had oversight of its implementation. Internal attendance at these meetings needed improvement, although representation from the local authority was good. There were some gaps in data analysis. Child protection referrals came from a range of sources, including the effective screening of complaints, vulnerability assessments and use of force documentation. There were examples of staff confidently reporting concerns about the actions of other staff. Referrals were processed efficiently and procedures agreed with the local authority social care services to ensure that referrals were investigated appropriately and strategy meetings held as necessary. Internal investigations had been carried out when recommended by the local authority and suitable and robust action taken.
- 3.14 A comprehensive child protection policy had been developed with the SSCB and ratified by the governor, area manager and SSCB in July 2009. It had been agreed with the SSCB that there would be a joint annual review. The safeguarding team lead had management responsibility for overseeing the policy and ensuring that it was implemented effectively. There was a monthly child protection meeting with comprehensive terms of reference, which was chaired by the governor. The child protection committee reported to the safeguarding committee. The safeguarding manager from SSCB was a designated member of the child protection committee and she attended regularly. However, overall attendance at the meetings had been erratic. Minutes of the meetings indicated that all child protection referrals were discussed and any actions required allocated to an individual. The local authority safeguarding manager confirmed the effectiveness of the meetings from the local authority point of view. One dataset provided for the September 2009 meeting had divided allegations into 'professional' and 'other, including historical' and recorded the ethnicity of the young person making the allegation. There was no breakdown of the category of professional abuse, which was an omission.
- 3.15 Referrals came from a range of sources, including effective screening of complaints and staff reporting concerns about the actions of other staff. Referrals were processed efficiently by the establishment and referred appropriately to the local children's social care services for assessment and a decision on whether their child protection procedures should be instigated. Multidisciplinary strategy meetings were held promptly when a decision had been made that the threshold for investigation had been reached and the meetings were appropriately recorded. The local authority designated officer (LADO) confirmed that, if the outcome of the investigation resulted in a recommendation for the establishment to hold an internal

investigation, appropriate action was taken and the local authority was advised of the outcome. Records indicated that internal investigations were completed and suitably robust action taken when necessary.

- 3.16 In July 2009, the establishment had published a 'reporting wrong doing - whistleblowing policy' which clarified the responsibility of staff to report behaviour which might indicate the need for a child protection referral. The policy described internal procedures for raising concerns about possible child abuse and external routes direct to Suffolk Social Services or through a Prison Service hotline. The use of a Prison Service hotline had the potential to undermine the child protection referral procedure, which was designed to ensure independent intervention in child protection referrals by the local authority child protection services.
- 3.17 Young people were given information about support external to the establishment. In our survey, 76% of young people said they knew how to get in touch with their YOT worker, which was significantly better than the comparator of 60%. Unit notice boards displayed clear information on help and support which young people could receive from external services, such as the Samaritans and Child Line. However, there was no information about help available from the local authority or how to make contact with them directly. A number of young people we spoke to were not aware of the role of the advocates in the establishment, although it was advertised on unit notice boards.
- 3.18 The establishment had secure electronic and paper databases containing details of all investigations. Current child protection referrals were held securely in the governor's office to which only members of the SMT and the duty governor had access. A quality assurance check on all logs was carried out by the safeguarding team leader, the local authority safeguarding manager and the YJB monitor. The Prison Service area manager also made random checks.
- 3.19 The safeguarding team interrogated a number of sources to ensure that potential child protection referrals were identified, including vulnerability assessments, security reports, incidents of use of force and complaints (including racist incident report forms).
- 3.20 Sixty-seven front-line staff had completed child protection training during the previous year, of whom 23 had completed the relevant component of the JASP (juvenile awareness staff programme) training and the remainder had been trained by the local authority social worker based in the establishment.
- 3.21 Appropriate referrals were made when young people disclosed historical abuse or raised concerns about potential abuse of children in the community. All were referred to the Suffolk safeguarding manager, who was responsible for referring cases to the relevant local authority. Progress on these cases was reviewed at the monthly child protection meeting. Young people making disclosures were referred for support to various people in the establishment, including personal officers, members of the safeguarding team, the internal local authority social worker and in-house counsellors.

Recommendations

- 3.22 **Attendance at the monthly child protection meetings should be monitored and absences followed up to improve attendance.**
- 3.23 **Staff should report all concerns about young people with potential child protection implications through the establishment's child protection referral procedures or directly to the local authority.**

- 3.24 Young people should be given information about how to make a child protection referral directly to the local children's social care services.
- 3.25 The scope and detail of the data provided for the child protection committee meetings should be expanded so that patterns and trends can be explored, particularly in relation to allegations against staff.

Self-harm and suicide prevention

Expected outcomes:

Children and young people at risk of self-harm and suicide are identified at an early stage, and supported through a care and support plan to meet their individual identified needs. Assessment of risk of self-harm and ongoing vulnerability is a continuous process which is informed by staff and children and young people. Children and young people who have self-harmed or been identified as at risk of self-harm are encouraged to participate in appropriate purposeful activity.

3.26 A comprehensive suicide and self-harm prevention policy was implemented correctly by staff and monitored by the monthly safeguarding committee. Formal monitoring through the ACCT process was appropriate and started without delay. The quality of initial assessments was variable, although most identified the primary concerns. ACCT reviews were timely, well managed and well attended, but frequent changes of case manager made ongoing assessment and planning inconsistent. The majority of care maps failed to specify actions to address the causes of the young person's difficulties and data analysis did not include the reasons for opening ACCT documentation. Post-closure care maps were contrastingly better. There was good observation and support by residential and specialist staff, which was appropriately recorded. Families were notified and kept informed when their children were being monitored for self-harm, as were youth offending teams (YOTs), but they were not invited to reviews. Young people's views on the value of the ACCT process varied.

3.27 The establishment had a comprehensive suicide and self-harm prevention policy linked to the safeguarding strategy. The policy had been published in October 2008 and approved by the governor and area manager. It described the procedures clearly and gave detailed information on how staff should respond to a young person if his behaviour caused concern and actions to be taken to keep the young person safe. The role of individual staff and departments was clearly described. Staff we spoke to understood their responsibilities and knew how the policy should be implemented and this was reflected in the comprehensive observations recorded in the ACCT documentation. We also came across a number of meaningful entries recording the duty governor's interactions with young people on ACCTs.

3.28 There had been a drive to train all staff in the ACCT foundation course since March 2009 and 120 members of staff from a range of disciplines had completed it, but the establishment was not able to tell us what percentage of the workforce had been trained. From April to July 2009, 55 ACCT documents had been opened spread fairly evenly across the units, with the exception of Carlford which had only had two opened in July. Analysis of the number of ACCT documents opened each month showed no apparent patterns or trends and the number of open ACCTs at any one time had remained similar. The data analysis did not include an analysis of the reasons given by the young person for self-harming. The majority (70%) of ACCTs were opened within six weeks of a young person's arrival at the establishment, of which 20% were opened within the first 36 hours. The majority of acts of self-harm related to superficial cutting.

- 3.29 The Samaritans' service was well publicised on the wings and staff ensured that calls could be made when requested by young people.
- 3.30 We examined a sample of open and recently closed ACCTs. Most ACCTs were opened as a result of threats of self-harm rather than young people harming themselves. All initial assessments were completed promptly and mostly identified the primary concerns, but the quality of the assessments was variable. In the main, they simply reflected what the young person had said, but did not properly assess the difficulties or make a judgement on the underlying cause of the young person's anxieties. Care maps were also variable in quality and action points were often designated to unit staff in general rather than named staff. The appropriateness of location and activities to keep young people occupied were considered in every case. One assessment mentioned that the young person had been bullied, but there was no mention of appropriate action being taken.
- 3.31 Young people were monitored by staff as required, with most comments in files demonstrating meaningful staff engagement, although some entries were too brief. Night observations were carried out as prescribed, but some were too predictable.
- 3.32 ACCT reviews were held on time and were well attended by healthcare, personal officers and young people's substance misuse workers. The reviews that we observed were child centred and young people told us they felt able to participate and understood the process. The two case reviews we observed were managed sensitively by the senior officer, but in both cases they did not know the young person. There was no expectation that the case manager would be consistent in reviews since the task was allocated according to the availability of senior officers on the day of the review.
- 3.33 Post-closure reviews took place, but not always on time and one was 12 days late. They were well attended by a multidisciplinary group of staff and there were some good quality plans to help young people continue to cope, which were surprisingly better than care maps in open ACCTs.
- 3.34 The safeguarding manager carried out frequent checks of ACCT documentation and the safeguarding committee had also undertaken random quality checks. All closed documents contained quality assurance sheets and weekly feedback was given to officers and the safeguarding team on the quality of the documentation. However, the poor quality of care maps was rarely identified as an issue to be addressed. We spoke to four young people, three of whom were on open ACCTs. Two of them did not like the process and said they did not tell staff their problems because they did not trust them. One young person said he would approach staff and he thought that being on an ACCT had helped him. One young person said 'nothing ever happens', but others said they noticed that officers were talking to them more during the day. All young people said that they were checked regularly at night.
- 3.35 There was no peer support at the time of the inspection, but training was taking place in readiness to introduce a peer support scheme the following month. Young people with an assessed need were referred to the mental health in-reach team for support, but there were no specialist counselling services (see healthcare section).
- 3.36 There was a dedicated telephone helpline that invited families or other visitors to report any concerns they had about a young person. Young people's families were not invited to attend ACCT reviews, but were consulted by the safeguarding team throughout the period of concern for the young person's safety. YOTs were advised of developments by the safeguarding team after every review and were asked to pass on information to the young person's family, when appropriate.

Recommendations

- 3.37 Data analysis in relation to incidents of self-harm should include an analysis of the reasons given by the young person for self-harming.
- 3.38 Case managers should ensure that appropriate action is taken when links are made between self-harm and bullying.
- 3.39 Staff observations should take place with agreed frequency, but should not be too predictable.
- 3.40 The ACCT case manager should be consistent throughout the time an ACCT is opened.
- 3.41 Staff participation at ACCT reviews should be planned, so that it is known who should attend and who should provide written contributions.
- 3.42 Care maps should address the young person's particular difficulties and demonstrate that all sources of help and support have been explored, including family involvement. There should be clear lines of accountability for all agreed actions.
- 3.43 Management checks and quality assurance reports should pay particular attention to the quality of care maps and this should be monitored by the safeguarding committee.
- 3.44 Families/carers should be invited to ACCT reviews if agreed, after consultation with the young person, that they could offer valuable additional support.

Housekeeping point

- 3.45 Post-closure reviews should take place on time.

Bullying

Expected outcomes:

There is an establishment culture that promotes mutual respect among staff and children and young people. Children and young people feel safe from bullying and victimisation. Active and fair systems to prevent and respond to bullying behaviour are known to staff, children and young people and visitors. Children and young people's views help to develop and promote a safe environment.

- 3.46 Almost a third of young people in our survey said that they had been victimised at Warren Hill and staff told us that bullying was a significant problem. There were good efforts to identify the extent and nature of bullying through surveys and consultation with young people and action had been taken when problems had been identified. Monitoring arrangements were adequate and individual young people, as well as patterns and trends in bullying, were discussed at the safeguarding and senior management meetings. A new anti-bullying policy had been introduced very recently, but there was already evidence that it was not being implemented properly and staff were complaining that they did not understand the basis of the policy and had not been adequately trained.

- 3.47 A new, comprehensive policy entitled Positive Intervention Plan (PIP) had replaced the previous anti-bullying policy in August 2009, just prior to the inspection. The policy aimed 'to address unacceptable behaviour and support vulnerable young people'. The policy had clear links with other relevant policies, such as behaviour management and suicide prevention and management of self-harm.
- 3.48 The key message in the policy was that young people traditionally labelled as bullies or victims had specific needs and required understanding, support and appropriate interventions from a range of sources. There was emphasis on promoting positive behaviour through the use of incentives rather than punishment, although the establishment continued to use sanctions to deal with unacceptable behaviour. Young people affected by bullying were offered support and interventions, including a time out session offered by the chaplaincy team for young people who were vulnerable for a variety of reasons. There was an underlying expectation that all staff and young people would behave appropriately and report unacceptable behaviour by anyone in the establishment, including visitors. Staff were expected to look for potential tension between young people, intervene early and try to de-escalate conflict.
- 3.49 The positive intervention plan introduced in the policy was modelled on ACCT procedures. The PIP procedures included an initial assessment, care maps with actions and targets and a weekly review process.
- 3.50 It was too early to assess the effectiveness of the new approach, but it represented some significant changes to the management of bullying. All residential staff and operational managers had received an hour's training from members of the safeguarding team, who were responsible for the implementation of the policy. A significant number of staff told us they did not understand the new policy or how it would reduce the impact of bullying in the establishment and that they had found the training inadequate. This was at odds with the expressed view of managers that the training and the new policy had been well received by staff and there were clear indications that further work was needed to secure staff confidence and enable them to implement the procedures as intended.
- 3.51 In our survey, almost a third of young people said that they had been victimised by another young person or a group of young people since they had arrived at the establishment. Staff and young people we spoke to said bullying was a significant problem. In our survey of the young people who reported bullying, the main type of victimisation reported was insulting remarks (15%) followed by physical abuse (12%). Ten per cent of young people said that it involved having their canteen or property stolen, which was significantly worse than the comparator of 3%, and 13% said they were victimised when they were new, which was significantly worse than the comparator of 6%.
- 3.52 The establishment had made good efforts to identify the extent and nature of bullying. There were regular consultation meetings with groups of young people and all young people were invited to complete an exit survey before they left, although the response to this was poor. There was a dedicated telephone helpline which invited visitors or others with concerns about a young person to report it. There was evidence that action had been taken in response to young people's concerns, for example, that bullying took place during daily movements, in the juvenile activity centres and in the showers, and as a result of these consultations changes had been made to the management of these areas.
- 3.53 The safeguarding team had investigated the impact of the no-smoking policy and the shouting out of windows to try to understand and analyse the effects of bullying. Conclusions drawn from these projects had been incorporated into reviews of the violence reduction policies. The

safeguarding team also monitored cell-sharing risk assessments and complaints to identify areas of concern.

- 3.54** The safeguarding team presented monitoring reports, including the location of perpetrators and victims, to the monthly safeguarding committee who discussed individual young people and analysed the monitoring reports for patterns and trends. No particular patterns or trends had been highlighted for attention. The data analysis did not extend to the type of bullying behaviour. We were concerned that the considerable amount of shower gels displayed in young people's cells were an indication of bullying. This had been considered by the safeguarding team who had formed the view that young people retained them for decoration, and not the proceeds of bullying. They were making efforts to replace them with other types of cell decoration.
- 3.55** There were quality assurance checks by unit managers, the safeguarding team and the violence reduction coordinator. It was clear the new anti-bullying procedures were not being properly implemented.
- 3.56** We examined a small sample of PIP documents across three of the residential units. The majority of PIPs were opened following concerns expressed by young people, although some had been referred to the process by staff. The quality of the documentation was poor and there were many omissions in the basic information recorded and some delays in completion of the documents. Only two young people had been referred for specific interventions – one had been referred for counselling and the other for the JET (juvenile estate thinking) programme. The recording of initial assessment interviews with young people was sometimes incomplete and there was little evidence of discussion with young people about the causes of their behaviour. There were very few action points, which were generally formulaic and did not have a named member of staff against them.
- 3.57** Only one of the seven initial PIP reviews completed had been attended by people other than one officer and the young person. There had been no reviews in one of the cases and three reviews had taken place more than a week after the initial assessment. Subsequent reviews were held irregularly, were attended by residential staff only and did not pursue the actions and targets agreed at the initial review. There was no evidence of the intended multidisciplinary consultation and the only additional contribution was from one of the substance misuse workers.
- 3.58** PIPs contained agreements on how frequently staff should monitor a young person. Not all the cases reviewed had meaningful comments, highlighting both positive and negative behaviour. One case had no history sheet entries for three weeks.
- 3.59** We spoke to three young people who were subject to the PIP process, all of whom were uncertain about its purpose. They remembered their reviews and felt that they had been given every opportunity to contribute to discussions. They knew they had targets, but could not remember them and did not have them written down. They all said that their personal officer had been very involved in the process.

Recommendations

- 3.60** The data analysis relating to bullying should be extended to include the type of bullying behaviour.

- 3.61 Staff training needs in relation to the PIP procedures should be assessed and a suitable programme of training developed and delivered so that the procedures are understood and all staff are familiar with their individual responsibilities for implementation.
- 3.62 A robust system of quality assurance should be introduced to ensure that the PIP procedures are being implemented properly and promptly.

Good practice

- 3.63 *The establishment had listened to young people's comments about bullying 'hot spots' and had reviewed and changed the management of these areas.*

Diversity

Expected outcomes:

All establishments should be aware of and meet the specific needs of minority groups and implement distinct policies or action plans, which aim to represent their views, meet their needs and offer peer support to ensure all children and young people have equal access to all facilities. Multiple diversity needs should be recognised and met.

- 3.64 The establishment had comprehensive policies covering all aspects of diversity. Diversity was well promoted on notice boards throughout the establishment. The equal opportunities and disability committee had clear terms of reference and was well supported by the senior management team, but discussions focussed on staff rather than young people. Attendance by staff representatives was irregular and there was no external or young people representation. Sexual orientation was not properly addressed. Religious festivals were celebrated throughout the year. Not all staff had been trained in diversity.
- 3.65 The establishment's 2009/10 equal opportunities policy gave a commitment to fair and equal treatment of all staff and young people. The policy covered all aspects of diversity and was complemented by separate policies on race, disability and foreign nationals. It was intended to review and update the policy annually.
- 3.66 The SMT gave strong leadership on diversity. There was full support from the governor and the deputy governor was the strategic diversity lead. The members of the SMT had operational responsibility for different areas, but there were no action plans to support the development of these areas. The promotion of diversity on notice boards across the establishment, including the administration offices, was impressive. The establishment reported that 60% of staff had received race and diversity training.
- 3.67 The equal opportunities and disability liaison committee met bi-monthly, chaired by the deputy governor. The committee had clear terms of reference, designated internal representation and an appropriate standard agenda. However, attendance by representatives was irregular and the Carlford Unit had not been represented at any of the four meetings in 2009. There were no external representatives and no young people representatives.
- 3.68 Minutes of the equal opportunities and disability liaison committee meetings showed that a wide range of issues were addressed, although most of the discussions focussed on staff rather than young people. Discussions about young people related mainly to general disability

issues and individual young people were not discussed. There had been no discussions about sexual orientation.

- 3.69 Cultural and religious festivals were celebrated throughout the year and young people were expected to respect those who wished to participate. Efforts were made to enable young people to celebrate festivals of their choice. In addition to traditional religious festivals, a Gypsy and Roma traveller month had been celebrated in June 2008 and a Black History awareness month in October 2008. Aldeburgh Music visited the Carlford Unit each year to conduct music workshops, which embraced different cultures and musical tastes.

Recommendations

- 3.70 There should be action plans covering the development of all aspects of diversity.
- 3.71 All staff should be trained in all aspects of diversity.
- 3.72 Managers should monitor attendance at the equal opportunities and disability liaison committee and take action to ensure that all designated representatives or substitutes attend meetings as required.
- 3.73 Efforts should be made to engage community representatives on the equal opportunities and disability liaison committee.
- 3.74 Young people should be recruited, selected and appropriately trained and supported to become members of the equal opportunities and disability liaison committee.

Race equality

- 3.75 The 2008/09 race equality annual report demonstrated the establishment's commitment to race equality. However, in our survey, young people from black and minority ethnic groups responded significantly less favourably than their white counterparts to a number of questions about their treatment by staff. The monitoring of a wide range of essential functions and access to activities was impressive, as was the number of impact assessments undertaken. A group of enthusiastic young people acted as race equality action team (REAT) representatives and regularly attended REAT meetings. They had all received appropriate training, but would have benefitted from ongoing support from staff. Racist incident report forms from a variety of sources were thoroughly investigated, approved by the deputy governor and monitored by one of three independent organisations. Young people found to have been racially offensive were targeted for intervention, but more needed to be done with young people convicted of racially motivated offences.
- 3.76 The comprehensive race equality policy and supporting policies were published in the race equality annual report for 2008/09. The action plan in the annual report was updated every month by the race equality action team (REAT). A race equality communications strategy had been published in July 2009.
- 3.77 Young people from black and minority ethnic groups that we spoke to during the inspection did not report racist abuse towards them by staff, but reported occasional verbal abuse from other young people. They said they were confident that young people who were racially abusive would be challenged by staff and appropriate action taken to prevent further abuse. However,

in our survey, there were several areas in which responses from young people from black and minority ethnic groups were significantly lower than the comparator for white young people. Young people from black and minority ethnic groups indicated perceptions of unfair treatment by staff in relation to their treatment regarding the rewards and sanctions scheme, adjudications, and the use of force. In addition, they reported considerably less favourably with regard to respectful treatment by staff and helpfulness by their personal officer. There was no evidence to substantiate discriminatory treatment, but the perceptions were concerning and warranted investigation by the establishment.

- 3.78 There was a full-time race equality and equal opportunities officer (REO), who was supported by a deputy, who also acted as the violence reduction coordinator. The REOs were well known to staff and young people and their work was effectively promoted around the establishment, with displays on unit notice boards. There were quarterly consultation meetings with black and minority ethnic young people who told us that they were valuable forums, where they were able to express their views freely on a wide range of issues. The REOs organised the celebration of cultural and religious festivals and gave advice to senior members of staff if there was a racist element to incidents involving black and minority ethnic young people.
- 3.79 The REAT met monthly and was chaired by the deputy governor, or by the governor in her absence. Minutes of the meeting indicated good attendance by a core group of staff from the safeguarding team, and the REO and her deputy. However, attendance by representatives from across the establishment was irregular. The meeting had recently been attended by a representative of the Ipswich and Suffolk Council for Racial Equality.
- 3.80 The establishment had appointed a young person from each unit, including Carlford, as race equality representatives. They had a clear role and responsibilities and received training from the REOs on the work of the REAT, receiving a certificate to mark completion of a course in 'Managing and promoting race equality' at Warren Hill. Their attendance at REAT meetings was good and a section of the meeting was set aside for their contributions. We observed part of a REAT meeting where the young people were encouraged to make a contribution to the discussion. However, the minutes of the meetings also showed that young people frequently brought personal matters to the table, rather than representing the views of their unit and it was unclear how they ensured that they consulted young people on their unit to represent them. The representatives we spoke to said they enjoyed the role and were clear about what was expected of them, but would have valued the opportunity to meet more regularly as a group, particularly prior to REAT meetings.
- 3.81 The establishment produced comprehensive data analysis which was discussed at REAT meetings. A wide range of key areas were monitored to identify possible discrimination. The recent reports we examined showed that nothing had been highlighted for action and all areas were within the range of what was acceptable.
- 3.82 Between April 2008 and March 2009, the establishment had undertaken 10 race equality impact assessments and had a further 11 planned for completion by December 2009. All the assessments had involved focus groups of black and minority ethnic young people. Their comments had been recorded and action points raised to address areas of concern. Details of the assessments had been made available to young people through the REOs and REAT representatives.
- 3.83 During the same period, 74 racist incident report forms (RIRFs) had been submitted. The majority of complaints were from young people who felt staff had treated them unfairly. The second highest category of RIRFs had been completed by staff who had witnessed young people racially abusing other young people. All RIRFs were thoroughly and promptly

investigated by the REO, interested parties informed of decisions and completed documentation monitored and signed by the deputy governor or governor in her absence. Comprehensive independent monitoring and quality assurance of all RIRFs was carried out by the Independent Monitoring Board, Ipswich and Suffolk Council for Racial Equality and Barnardo's advocates.

- 3.84 The education department had developed an Open College Network course 'Prejudice and Discrimination', which was suitable for all young people, but targeted particularly at those who had demonstrated prejudiced or racist views and behaviour. Sixty-one young people had completed different levels of the course.
- 3.85 REOs were not advised of young people who had committed racially aggravated offences and therefore could not advise staff on the units how to manage the risk they might pose to others, or refer them to appropriate services and interventions.

Recommendations

- 3.86 Perceptions of staff treatment and care should be regularly discussed with young people.
- 3.87 Managers should monitor attendance at the REAT and take action to ensure that all designated representatives or substitutes attend meetings as required.
- 3.88 Efforts should be made to engage more community representatives on the REAT.
- 3.89 Young people who are REAT representatives should have the opportunity to meet as a group and be given guidance by the REOs and unit staff so that they are able to represent other young people more effectively.
- 3.90 The REOs should be advised of all young people who have committed racially aggravated offences and work with case managers to develop appropriate individual management plans.

Good practice

- 3.91 *The education department had developed an Open College Network course 'Prejudice and Discrimination', which was suitable for all young people, but targeted particularly at those who had demonstrated prejudiced or racist views and behaviour. Sixty-one young people had completed different levels of the course.*

Foreign nationals

- 3.92 The foreign nationals policy had been produced in August 2009, just prior to the inspection, and services for foreign national young people were seriously underdeveloped. The foreign nationals coordinator had not been given dedicated time to establish systems or raise awareness of the needs of foreign national young people. Translation services were reasonably well used in some areas, but language difficulties were still a barrier to individual understanding and there was limited translated information on display. Foreign national young people who did not receive visits were unaware that they could have a free international telephone call each month.

- 3.93 The foreign nationals policy had been written in August 2009 and the majority of staff and young people were unaware of its existence. The policy described the needs of foreign national young people, but services for them were seriously underdeveloped at the time of the inspection. Minutes of the August 2009 REAT meeting recorded that the development and implementation of services for foreign national young people were to be strategically managed by the REAT, but this had not yet started.
- 3.94 A foreign nationals coordinator had been in post for six weeks at the time of the inspection. He had not been given any profiled time to set up the necessary systems or raise the awareness of staff and young people of the needs of foreign national young people. He had informal administrative support, but a system for managing immigration documentation and related work had not yet been established.
- 3.95 Staff whom we spoke to had some awareness of the basic needs of foreign national young people for contact with family and friends and access to translated information if English was not their first language. They were not always aware of individual foreign national young people located on their wings or across the establishment. The coordinator told us that he and residential staff felt they would benefit from some training.
- 3.96 Sixteen foreign national young people were in the establishment at the time of the inspection, although it had not been established whether they were of interest to the United Kingdom Border Agency (UKBA). No young people had been held beyond their sentence in the previous 12 months. Links had been established with UKBA, who had visited the establishment for the first time in August 2009 to undertake assessments. Links had not yet been established with independent immigration advice and support agencies.
- 3.97 We met six of the foreign national young people, who were not aware who the foreign nationals coordinator was and had not been provided with information about their immigration status. Those who could not receive visits were unaware of their entitlement to make telephone contact with family members abroad. Two Vietnamese young people we spoke to were purchasing their own international phone cards, despite not receiving any visits since their reception at the beginning of the year.
- 3.98 We reviewed the history sheets and spoke to some of the foreign national young people for whom English was not their first language. It was evident that staff showed a lack of understanding about the barriers that these young people experienced in accessing the regime and understanding staff and other young people. Translation services were not used frequently enough by personal officers, particularly when trying to determine the reason for deterioration in the young person's behaviour.
- 3.99 There was very little translated information on display, but there was reasonably good use of the Big Word at training planning meetings, on reception, first night and induction. However, the first morning interview with a Vietnamese young person who spoke very little English had not been conducted using translation services. In another case, health screening had been carried out using another young person as interpreter.
- 3.100 There were no foreign national representatives or support forums and it was suggested by the coordinator that the diversity representatives were accessible to foreign national young people and that this was adequate.

Recommendations

- 3.101 The foreign nationals policy should be distributed to staff, who should receive training to ensure they are fully aware of the needs of foreign national young people.
- 3.102 Sufficient time should be allocated to the foreign nationals coordinator to fulfil the role.
- 3.103 Young people who are foreign nationals and immigration detainees should be properly identified so that service provision can be targeted.
- 3.104 Young people who are foreign nationals should be provided with information about their immigration status in their own language.
- 3.105 There should be regular contact with accredited, independent immigration advice and support agencies with an appropriate specialism for issues relating to children.
- 3.106 Interpretation services should be used regularly for non-English speaking young people, particularly in relation to personal officer work and to translate important notices and written information.
- 3.107 Support groups and peer support mentors should be made available to foreign national young people.

Housekeeping point

- 3.108 The foreign nationals coordinator should have administrative support.

Disability

- 3.109 The establishment had a comprehensive disability policy, with a part-time disability liaison officer (DLO) who had a clear range of responsibilities. Young people with disabilities were identified through reception questionnaires, community YOTs and healthcare and education assessments. They were all interviewed by the DLO and offered additional support, although the nature of the support was unclear. Unit staff were not given written information about a young person's disability and there were no care plans to ensure that the support they needed was delivered.
- 3.110 The disability policy had been approved by the governor in March 2009. The policy outlined the establishment's commitment to its legal obligations and how it would respond to the needs of young people with a disability. It covered areas such as searching, emergency evacuation and guidance for wheelchair users. There was specific guidance for young people, staff and visitors. The equal opportunities and disability liaison committee was responsible for monitoring disability issues (see diversity section).
- 3.111 There was a part-time disability liaison officer (DLO), whose role was well publicised on notice boards throughout the establishment. The DLO kept a database of young people with a declared disability. At the time of the inspection, there were 22 young people on the list, of whom 10 had dyslexia or a learning disability, two had physical disabilities and 10 were unspecified.

- 3.112 All young people were invited to complete a disability questionnaire at reception and those who declared a disability were interviewed by the DLO and healthcare within a week of arrival. Young people with disabilities were also identified by information from community YOTs and by the establishment's healthcare and education assessments. Information from the DLO's initial interview was shared with staff on the units, but there was no written assessment and no indication in the wing files that we examined that staff knew of the disability. When we checked, staff on one unit where a young person with a declared physical disability resided said that they were not aware of this. Young people with disabilities did not have a care plan to ensure that the support they needed was delivered.
- 3.113 The establishment was able to adapt cells for young people with a visual or mobility impairment, but could not accommodate a young person with an acute hearing condition.
- 3.114 A portable hearing loop was provided for visitors who requested it and this facility was advertised at the visitors' entrance.

Recommendations

- 3.115 There should be written assessments of young people with disabilities which should be available to all staff in contact with young people.
- 3.116 All young people with disabilities should have care plans to ensure that the support they require is delivered.

Religion

- 3.117 Equality of treatment was not monitored by religion and there was a lack of attention to this aspect of diversity by the equality and diversity team. Staff had not been trained in religious diversity. Young Muslims spoke well of the support they had received from the chaplaincy during Ramadan, but our survey highlighted other areas in which they felt they were treated unfairly.
- 3.118 While religion was frequently recorded in the minutes of the equal opportunities and disability committee, there was repeatedly 'nothing to report' regarding religion and there were no other policies which outlined how the religious needs of young people were met.
- 3.119 The chaplaincy team worked hard to ensure that all young people had their religious needs met. Muslim young people we spoke to said they felt supported in practising their faith, particularly during Ramadan.
- 3.120 There had been no specific training for staff, but there were ongoing cultural awareness sessions that staff could attend if they chose to (see section on faith). Although the religious profile of the population was referenced in the SMART data, there was no specific monitoring of treatment by faith and no specific strategy for dealing with discrimination on the grounds of religion. In our survey, responses from Muslim young people were significantly worse than the comparator in a number of areas, including being treated with respect, having a member of staff to turn to with a problem, being adjudicated on and being restrained.

Recommendation

- 3.121 All staff should be trained in religious diversity and the way this interacts with cultural and racial identities.

Sexual orientation

- 3.122 Sexual orientation was included in the equal opportunities policy, but did not feature in any aspect of the establishment's diversity agenda.

- 3.123 Although sexual orientation was included in the equal opportunities policy, it was not included as an agenda item at the meetings and there had been no consideration of how issues relating to sexuality could be tackled with this age group. Consequently, there was nothing in place to support young gay men or monitor discrimination against them.

Recommendation

- 3.124 Strategies for preventing and dealing with discrimination on the basis of sexual orientation should be in operation.

Contact with the outside world

Expected outcomes:

Children and young people are helped and encouraged to contact family and friends through regular access to mail, telephones and visits in order to develop, maintain and strengthen relationships.

- 3.125 Visits entitlements were inadequate, but the majority of young people had few visitors and reasons for this had not been explored. The considerable distance between the establishment and their home may have been a contributory factor for many young people. A team of three family service workers contributed significantly to young people maintaining and developing contact with their families. The visits environment enabled families and young people to enjoy relaxed visits. Visitors were treated well and could speak to staff or report concerns using a special telephone line. There was a reasonable visitors' centre and free transport. The mail delivery system was efficient. The views of young people we spoke to about problems with access to the telephones conflicted with our survey results, which indicated good access. Young people on the bronze level of the rewards and sanctions scheme did not have daily access to a telephone or family visits and this was not acceptable.

- 3.126 Visits took place on Saturday and Sunday afternoons from 2 to 4pm and on Wednesday afternoons for young people on remand and those on the gold level of the rewards and sanctions scheme. Sentenced young people were entitled to two two-hour visits a month and unconvicted young people up to three half-hour sessions each week, or an amalgamation of this on one visit. These entitlements were inadequate.

- 3.127 Young people were provided with visiting orders and information about visits sessions and directions to the establishment, which they were helped to complete and send to their nominated visitors. Staff contacted family members of newly arrived young people to help them to book an early visit and they were able to collect their visiting order from the gate. Visits were booked by telephone and there was no problem getting through when we rang and there was capacity to book a visit that weekend. There was no prison visitors' scheme.
- 3.128 In our survey, 36% of young people said they had had two or more visits in the last month, which was significantly worse than the comparator of 48%. We calculated that an average of 15 young people had received visits each weekend over the previous six months. No work had been carried out to explore the reasons for the low take up of visits and individuals were not monitored to ascertain who did not get visits. The most recent visitors' survey had been conducted two years previously and there were no visitor comment books or feedback forms available. Almost half the young people lived over 100 miles from the establishment. The cut-off time for visitors to arrive was 3pm, although staff showed flexibility on a case-by-case basis. Young people were brought to the visits hall when their visitor had booked in at the visitors' centre, so that they did not spend lengthy periods waiting for their visitors. Random strip-searching of young people still took place after visits and this was inappropriate (see also section on security).
- 3.129 The visitors' centre was open an hour before and after the visits sessions and was staffed by operational support grades (OSGs) to assist visitors with any enquiries. It provided ample lockers for visitors and comfortable seating, as well as facilities for disabled visitors and baby changing. There were no refreshments provided in the centre. A free bus service was provided for families who had booked from Ipswich station, which arrived in plenty of time for the start of visits. However, the bus left the establishment at about 3.30pm, so visitors had to leave early if they wanted to use the service. We were told that this enabled staff driving the bus to return to help with the end of the visits session.
- 3.130 Visitors were searched sensitively. When the drug dogs were present, the dog handler allowed visitors to sit down so that the dog could reach the full length of the visitor, rather than jumping up if they were standing. This had recently been introduced as staff were aware that the dog frightened some visitors. Young people were placed on closed visits following an indication from the drug dog without other supporting evidence. There was good liaison between the public protection team and the security department which oversaw visits.
- 3.131 The spacious visits hall had been newly decorated. It had private booths at the rear for legal visits and four closed visits booths (see security section). The hall could accommodate up to 35 visits at a time. The environment was relaxed and there was a range of toys and games for children of all ages. We observed young people having appropriate physical contact with their visitors and they were able to hold their own children during the visit. A supervised crèche and refreshment kiosk were staffed by the family service workers on Wednesday afternoons and by volunteers at weekends. Information about the establishment, services for families and a number of policy statements were displayed in the visits hall and visitors' centre.
- 3.132 The visits hall was supervised by an appropriate number of staff, some of whom worked on the residential units, which sometimes gave families the opportunity to speak to staff who knew their children. The small number of visitors we spoke to were positive about their experience and told us that visits rarely started late. They were complimentary about staff in the visits hall and felt they could approach them if they had any concerns. Visits staff were alert to the impact that visits could have on young people and told us that they could generally identify those young people who might need some time with them at the end of a visit.

- 3.133 There was a team of three enthusiastic family service workers who contributed significantly to young people maintaining and developing contact with their families. A range of leaflets in translated formats was available for families in the visitors' centre and the family service workers' contact details were printed on visiting orders, together with details of the concern telephone line for families. The concern telephone line was checked daily, but it was rarely used as families tended to contact the family service workers directly. Their first contact with young people was during the induction programme and they had recently started to meet young people individually during the programme.
- 3.134 While the family services team were engaged with a range of departments, such as sentence planning, chaplaincy and visits, they said they could not be confident they were reaching all the young people who would have benefitted from their service.

Mail

- 3.135 Young people could send two free letters each week. Young people who had families in other countries could exchange these for an airmail letter, but they were not all aware of this. In our survey, 42% of young people said they had problems with sending or receiving mail, which was significantly worse than the comparator of 32%. Their main complaint was that visiting orders did not arrive at the correct address. If this happened, visiting orders were issued at the gate. Staff could not explain the poor perceptions of young people about their mail, but said that recent postal strikes had had an impact on mail delivery and they had noticed a reduction in incoming mail.
- 3.136 Mail was collected by OSGs each day, franked and sent to nearby HMP Hollesley Bay where it was posted. Incoming mail was collected each morning, including Saturdays, from Hollesley Bay and distributed on the wings by the afternoon on the same day.
- 3.137 Recorded mail was logged and a random sample of 10% of mail was read and details of young people whose mail had been monitored were sent to the security department. The OSGs said that they were confident in identifying potential child protection issues and were able to consult safeguarding staff.

Telephones

- 3.138 In our survey, 86% of young people said that they could use the telephone every day, which was significantly better than the comparator of 50%. However, during the inspection, young people told us that they had difficulty using telephones on Thursdays when all PINs were credited. We observed association on a Thursday evening and the queues, although well supervised by staff, were a source of frustration for the young people. Young people on the bronze level of the rewards and sanctions scheme did not have daily access to a telephone and this was unacceptable.
- 3.139 Family service workers were able to make telephone calls on young people's behalf, particularly when parents were concerned that they had had no contact. Young people told us that welfare calls were not permitted, but residential staff told us that they would be facilitated.

Recommendations

- 3.140 All young people should be entitled to at least one visit each week and there should be no upper limit set on the number of visits a remanded young person is entitled to.

- 3.141 There should be an analysis of why the take up of visits is so low, to identify which young people are not receiving visits, and referrals should be made to the family services team to facilitate more contact with their families.
- 3.142 Frequent and regular feedback of visitors should be sought through surveys, feedback forms and comments books and appropriate action should be taken as a result of the feedback.
- 3.143 Families using the bus service should not be required to leave the visits session early to return to the train station.
- 3.144 Young people on the bronze level should have daily access to telephones.
- 3.145 Young people should be made aware of when they can make a welfare telephone call and staff should record the details of welfare calls that have been facilitated.

Housekeeping points

- 3.146 There should be a prison visitors' scheme.
- 3.147 Refreshments should be available in the visitors' centre.

Applications and complaints

Expected outcomes:

Applications and complaints are taken seriously as demonstrated by the effective procedures that are in place, which are easy to access and use, with timely responses provided. Children and young people feel safe from repercussions when using these procedures and are aware of, and know how to use, the appeal mechanisms that are available to them. Independent advocates are easily accessible and assist young people in making applications and complaints.

3.148 The administrative arrangements for applications and complaints were generally efficient, but there was no audit trail for applications. Our survey responses with regard to the complaints system and fairness were all significantly better than the comparator, although during the inspection we received different views from young people who were dissatisfied. Responses to complaints in the sample that we examined were consistently good. Complaint boxes were emptied by a member of discipline staff which compromised confidentiality. There was no analysis of complaints to provide useful management information. Young people had good access to the Independent Monitoring Board and the advocacy service.

- 3.149 Age-appropriate posters about the applications and complaints procedures were displayed on each unit, together with information about the role of the Independent Monitoring Board, the advocates and the Prisons Ombudsman.
- 3.150 Application forms were freely available on the residential units. Completed application forms were handed to an officer who recorded details of the application on a unit log and forwarded the application to the appropriate area in the establishment for response. The log was checked and signed by a senior officer at regular intervals. There was no audit trail in the application log which did not record when the application was passed on and it was not possible to tell from the record whether the application had been dealt with. The majority of applications related to

money issues and the PIN phone system, or requests to see specialist staff. There was an average of 10 applications a day on each of the units. In our survey, 90% of young people said that it was easy to make an application, which was significantly better than the comparator of 80%.

- 3.151 There were complaint boxes in each of the residential areas and complaint forms, including those for confidential access, were readily available. In our survey, 93% of young people said they knew how to make a complaint and 84% said it was easy, which were significantly better than the respective comparators of 78% and 72%. Complaint boxes were emptied each day by a member of discipline staff, which compromised confidentiality. Approximately 90 complaints were generated in the establishment each month. These were collated into monthly reports and distributed to each member of the SMT. There was no formal analysis of these data for use by the SMT. From our own observation, complaints about the rewards and sanctions scheme appeared to figure prominently.
- 3.152 The majority of complaints were dealt with within the required timescale. Ten per cent of all complaints were routinely sampled by a governor to ensure that responses were fair. The standard of replies to complaints which we examined was consistently polite and helpful. In our survey, 49% of young people said they thought complaints were sorted out fairly, which was significantly better than the comparator of 36%. However, in our discussion groups young people expressed little confidence in the complaints system. They felt that their views were not taken seriously and said they did not believe they would receive a fair response.
- 3.153 The written replies to complaints which young people received contained information about how to make an appeal if they wanted to, but in reality there were very few appeals.
- 3.154 There had been a change in the contract for the advocates' service since the previous inspection. The number of staff employed had reduced, but the remaining advocates spent more time in the establishment. They provided general support to young people, particularly liaising with outside agencies, and they also attended four or five adjudications a month. The monthly referral rates to the advocates had reduced and the most recent monthly figure of 27 referrals was about half that under the previous contract.
- 3.155 Young people had good access to the Independent Monitoring Board (IMB). In our survey, 52% of young people said they could speak to the IMB when they needed to, which was significantly better than the comparator of 29%.

Recommendations

- 3.156 The complaints boxes should be emptied by a non-uniform member of staff.
- 3.157 There should be a monthly analysis of complaints to identify patterns and trends. This management information should be used appropriately to identify areas for improvement.

Housekeeping point

- 3.158 There should be a clear audit trail for applications to ensure that they are dealt with promptly.

Legal rights

Expected outcomes:

Children and young people understand their status and legal rights and can freely access legal services and exercise their rights.

- 3.159** Provision for legal visits was good, but otherwise services for legal rights were limited. A YOT worker provided bail information and assistance to young people on remand and the independent advocacy service provided by Barnardo's also helped young people to obtain legal advice. There were no trained legal services or bail information staff.
- 3.160** Assistance for young people requiring legal advice and bail information was limited. There were no trained legal rights or bail information officers, although a YOT worker provided assistance with bail and advocates provided some help and guidance.
- 3.161** Young people relied on their own legal representatives for advice, but reported difficulties in contacting their solicitors because they had to use their own telephone credit at the most expensive times of the day. Staff told us that young people could apply to have a free call to their legal representatives, but young people appeared to be unaware of this.
- 3.162** We did not meet any young people who were representing themselves in court. Staff indicated that young people could apply for free stamps and stationery in this event.
- 3.163** There was limited legal information in the library, which did not hold lists of local or specialist solicitors. There was an up-to-date DVD version of Archbalds and other legal information specified in the Prison Service Order, but there were no age-appropriate resources or reference materials on other aspects of the law, such as family matters.
- 3.164** Provision for legal visits was good and young people knew that they could have a family member or carer present during a legal visit if they wished.

Recommendations

- 3.165** There should be trained legal services and bail information staff.
- 3.166** All young people should be able to contact their legal advisers free of charge.
- 3.167** The library should stock appropriate legal reference materials and details of specialist solicitors, including immigration lawyers.

Section 4: Health services

Expected outcomes:

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

4.1 The health needs assessment was a combined document covering four prisons and it lacked child focus. There were no children's nurses. The physical environment of the primary care centre was poor and compromised confidentiality. Access to healthcare staff was good and GP appointments were arranged promptly, although there was insufficient time for consultations. The wait for dental appointments was too long for young people experiencing pain. Support and monitoring of young people with lifelong conditions required development. The lack of a primary mental health team was a cause for concern, although the child and adolescent mental health service team were providing a good substitute service. Effective use was made of the electronic clinical information system. Monitoring of injuries by healthcare was particularly efficient. All nursing staff we observed had a positive and caring attitude towards young people and appeared to know their patients well.

Joint working with the NHS

- 4.2 The health needs assessment had been updated in July 2008. It covered the four Suffolk prisons but had no clear focus on the specific needs of young people. Plans to develop a child-focussed healthcare strategy for Warren Hill were in the very early stages. The partnership board met quarterly and included senior staff from the four prisons for which the primary care trust (PCT) commissioned services and was not focussed on the needs of young people.
- 4.3 Young people were positive about ease of access to clinical services. The majority of healthcare was delivered from the primary care centre. The physical environment of the department was unsuitable for the delivery of a modern primary care service. The waiting area was untidy and had ripped padding on the bench seating. Young people had to walk through the nurses' office, which was also the room where medication was stored, to reach the consultation / treatment room. Medication was stored in the nurses' office, which also housed computers containing information on young people's health. The most current version of the Children's British National Formulary was available. The head of healthcare did not have a designated office.
- 4.4 Keys to the metal cupboards in which medication was stored were kept in a tin on the work surface in the nurses' room, which did not afford adequate security. On two occasions during the inspection, we found this tin unlocked when there were no clinical staff in the department, potentially giving access to all medication, including controlled drugs. All nursing staff had their own keys to the key tin and there was no way of auditing access to medication. This room also provided the only area for healthcare staff to prepare their drinks and drink-making items were on the same work surface as clinical equipment. There was no evidence that thermolabile products had been stored in appropriate conditions. Staff were unsure how to record the temperatures and were unaware that they should reset the maximum and minimum temperatures each day after recording. The record sheet indicated that only the current temperature was being recorded rather than the maximum and minimum and the member of staff we spoke to was not aware of the correct range.

- 4.5 The consultation / treatment room was cluttered and unwelcoming. There was no telephone in the room. Staff told us that a telephone interpretation service was used when necessary to assist in clinical consultations, but this had to take place in the nurses' room, which afforded less confidentiality. We also heard of instances when young people had been used to translate for their peers, which was inappropriate.
- 4.6 The dental surgery was cramped with poor ventilation. The equipment was about 10 years old, but worked satisfactorily. Cross-infection controls appeared satisfactory, although there was no space in the existing healthcare area for a separate decontamination room. There was no evidence that the PCT had carried out a surgery inspection in the previous three years. Debris was visible on the floor and there were no cleaning arrangements in place at the time of the inspection. As a result of the long-term sickness of the cleaner responsible for the healthcare department, the only cleaning was done by healthcare staff themselves. This was inappropriate and exposed young people to increased risk of infection.
- 4.7 There was a converted cell on the Butley unit where healthcare staff carried out first night healthcare screening. This room was cluttered and required thorough cleaning. The wash basin was particularly dirty.
- 4.8 We were told about the plans for a building project that would include improved, modern healthcare facilities. However, in the meantime, the environment was inadequate to deliver care to young people.
- 4.9 All nursing staff we observed had a positive and caring attitude towards young people and appeared to know their patients well. Young people treated healthcare staff with respect.
- 4.10 Young people's ethnicity was recorded at reception. The use of electronic clinical records meant that a wealth of information on young people was available, but this did not appear to be used in a constructive way to monitor service use. Data were broken down to provide valuable information about young people who had been injured.
- 4.11 Healthcare staff appeared to have good informal relationships with staff in other areas of the establishment, but formal links were not well developed. Healthcare staff informed the PE department if young people were not able to participate fully in physical activity and regularly attended ACCT (assessment, care in custody and teamwork) reviews. However, they rarely attended training planning meetings and there was no formal arrangement for sharing information between healthcare and discipline staff (see resettlement section).

Clinical governance

- 4.12 The head of healthcare was a registered general nurse (band 7), who was supported by a team leader who was a registered general nurse (band 6). The team also included a substance misuse nurse (band 6) and five band 5 registered general nurses. There were two vacancies for primary mental health nurses in the primary care nursing team. Although there were no vacancies for general primary care nurses, we were told that there was not enough capacity in the team to cover duties such as routine clinics for young people with lifelong conditions and attendance at training planning meetings. Twenty-four hour nurse cover was provided. None of the nurses was a registered children's nurse.
- 4.13 There were plans to introduce clinical supervision for the primary care nurses. The CAMHS team received clinical supervision through their employing trust. Healthcare staff could receive training from the prison and the PCT. Records of training were maintained and staff had

attended mandatory training from the PCT. Staff had been trained in intermediate life support and child protection. Plans had been developed to care for young people in line with national service frameworks, but these had not been implemented because staff did not have the capacity to run routine clinics. No nurses had received training in the management of asthma or epilepsy and only the head of healthcare had been trained in the management of patients with diabetes.

- 4.14 Emergency equipment, including automated emergency defibrillators, was available in the primary care centre and the healthcare room on the Butley unit. Emergency equipment, but no automated emergency defibrillator, was available on the Carlford Unit. Emergency equipment was regularly checked and records of checks maintained.
- 4.15 Staff told us that the establishment could borrow specialist health equipment from the local community stores and seek advice from community occupational therapists when necessary.
- 4.16 An electronic clinical information system was used effectively. Access was password protected and all staff had been trained to use the system. Entries were contemporaneous and the system automatically identified the professional making the entry and the date and time of the entry. Specific templates had been added to the system to meet the needs of the service. Recording of injuries was particularly good, with entries in text and on body maps clearly identifying type and position of injuries. This information could be analysed in a number of ways, including type of injury and location of the young person who had received the injury. Information that was not entered on to the system directly could be scanned. If a young person was transferred to an establishment which did not use the same electronic system, a summary of their care was printed and put in a clinical record folder to accompany them. The few remaining hard copies of clinical records were appropriately stored.
- 4.17 There was no separate health forum for young people. Healthcare staff rarely attended the young people's liaison meetings, where health was a standing item on the agenda. We examined the minutes of six meetings and healthcare had only been represented at one meeting.
- 4.18 Arrangements for young people wishing to make a complaint about their healthcare were unnecessarily complicated. Young people made few complaints about healthcare. We were told that only two complaints had been made in the previous 18 months and most issues were resolved before they reached the complaint stage. The policy for gaining patient consent and determining if a young person was competent to provide informed consent was not sufficiently clear. It contained detailed guidance covering an extensive range of information relating to the provision of consent, which, while valuable, did not constitute a policy on when a young person's consent was needed.

Primary care

- 4.19 All young people were seen by a member of healthcare staff on arrival and received a health screen in the healthcare room on the Butley unit. The health screening provided sufficient information to address immediate health needs. Nicotine replacement therapy was available. If other first night prescribing was required, either the GP who visited the unit or the out-of-hours service was contacted, depending on the time of day. Young people's GPs in the community were not routinely contacted unless nurses identified a need or the GP requested this, and so there was a reliance on young people to describe their health history and needs. If a young person had an identified health need, he was allocated a GP appointment for the next day that the GP was due to attend. No routine secondary health screening was carried out by nurses.

Young people were given a leaflet describing healthcare services, but this was not age appropriate and the terminology was out of date.

- 4.20 Young people applied for healthcare appointments in writing or by reporting 'special sick' to wing officers. The written application form contained pictorial images as well as text. Young people handed completed forms to wing staff. Healthcare had already identified the problem of confidentiality and boxes had been ordered for each wing so that healthcare applications remained confidential.
- 4.21 The GP attended Warren Hill four mornings a week and the Carlford Unit once a week. Each clinic only lasted for half an hour, which was not sufficient. We observed one GP clinic where some consultations took three minutes. One young person with a mental health condition, who had arrived the previous evening and was not previously known to the GP, only had a nine-minute consultation. The clinic appeared rushed and nurses described this time of day as hectic. All young people attended at the beginning of the clinic and there were no appointment times. Health promotion information was available in the healthcare waiting room. The healthcare application form included an option to attend a health promotion clinic. In practice, this clinic did not run and there was a waiting list of 16 young people, the longest of whom had been waiting for 29 weeks. There were nurse-led clinics for smoking cessation, sexual health (including chlamydia and gonorrhoea) and Hepatitis B.
- 4.22 The management of young people with life-long conditions needed development, either by recruiting appropriately trained staff or training existing staff. An electronic pro forma had been produced for the assessment and management of young people with asthma, but when we examined the records of young people known to be asthmatic, there was no evidence that it had been used. In the absence of routine clinics, care for young people with life-long conditions was arranged on an ad hoc basis, either when a young person presented with a problem or if a request for a repeat prescription resulted in a GP appointment.
- 4.23 Waiting lists were managed electronically. Some were too long and some presented information in a confusing way. While the waiting list for the internal sexual health clinic was short, the list for the visiting sexual health clinic was long, with 20 young people on the list, one of whom had waited 11 weeks. The waiting list showed two young people waiting for mental health assessments for 13 and 14 weeks, but their clinical records demonstrated that they had received prompt assessments.
- 4.24 Young people who were unwell were seen by a nurse who visited all wings each day. The nurse carried out assessments in the young people's cells and was always accompanied by an officer, which did not afford young people an appropriate degree of confidentiality while talking to the nurse or being examined. There were no triage protocols or algorithms in use. There were no formal arrangements to support young people with long-term physical or mental health conditions, and we were told that it was difficult to find an appropriate space to work with young people on the units.

Pharmacy

- 4.25 Pharmacy services were provided by a local pharmacy. A pharmacist visited the prison every three weeks and a technician visited for approximately three hours a week. Prescription items were supplied promptly, often the same day, but there were no pharmacist-led clinics. Prescribing was appropriate to the population. A number of procedures and policies were in place, but there did not appear to be any records to confirm that these had been read and signed by staff.

- 4.26 Medication was issued by one of the nurses. Controlled drugs were administered from the healthcare centre, while other medications were taken to young people in their cells in the presence of an officer, which compromised patient confidentiality. Medication was supplied as five-daily, weekly, fortnightly or monthly in possession and few patients required supervised administration. In-possession risk assessments were carried out and regularly reviewed by nursing staff. There was a policy for in-possession medication.
- 4.27 There was no evidence that thermolabile products had been stored in appropriate conditions. The record sheet indicated that only the current temperature had been recorded rather than the maximum and minimum and the member of staff we spoke to was not aware of the correct range. We were told that date checking of stock was carried out, but an expired medication was found in the fridge.
- 4.28 Patients could receive medication out of hours on the authority of the local out-of-hours doctors' service. There was no dual labelling of stock items or audit trail of what had been removed from the cupboard. Items appeared to be issued and labelled for named patients only when the required item was not held in stock. The pharmacist reported that he did not bring in the faxed prescriptions to compare against the originals.
- 4.29 A limited list of medication was available to supply young people on special sick, such as two paracetamol or two ibuprofen. There were only a few patient group directives (PGDs) which prevented patients having access to more potent medication than would otherwise be available without a prescriber. Very few over-the-counter remedies appeared to be available without consulting the doctor. A medicines and therapeutics committee, which covered the other three local prisons as well as Warren Hill, met bi-monthly, although at the time of the inspection there had been no meeting for four months and there were no minutes available. The committee was attended by the support pharmacist and there was representation from the PCT. The committee received a summary of prescribed items and audits were carried out when abusable products were prescribed.
- 4.30 Prescriptions were handwritten on standard prescription and administration charts. The charts that we examined frequently did not record dates, diagnoses and number of days' treatment to be supplied. On a number of charts, the number 1 had been written in the number of days treatment box. This was interpreted by staff as one month's treatment and medication issued accordingly, even though the chart had indicated one day's supply.
- 4.31 The controlled drug register was not compliant with current regulations. At the time of the inspection, the key to the controlled drugs was on a hook inside the medicines cupboard, with no audit trail to record who had used it.

Dentistry

- 4.32 There was one session of dentistry each week, with an average of seven patients per session. One session a month was allocated to patients on the Carlford Unit. The sessions were provided by the same dentist and dental nurse team and cover for leave was provided by other dentists from the same private provider.
- 4.33 All requests to see the dentist were placed on the waiting list by administration staff. There was no formal triaging of requests, but those thought to be urgent were given priority. On the day of the inspection, the waiting list had 47 names, of which seven had been deemed urgent. The longest wait for urgent treatment had been four weeks, which was unacceptable, and for

routine treatment 13 weeks. There was a separate waiting list for the Carlford Unit, which had six names on it, none requiring urgent treatment, with the longest wait 10 weeks.

- 4.34 The full range of treatments available under the NHS was provided, including orthodontic treatment. No figures were available for failure to attend rates and no work was done to determine the reasons for patients failing to attend appointments. There was no protocol for providing out-of -hours dental cover.
- 4.35 During the treatment session, we observed that the dentist carried out root canal treatment without using a rubber dam, which was contrary to clinical guidelines. Dental records were appropriately annotated, but were stored as loose sheets stapled together, rather than in envelopes. Young people arriving at the establishment did not receive initial dental screening to identify their oral health needs. Oral health information was provided on a one-to-one basis by the dentist. No general oral health promotion was provided and dental staff did not contribute to general health promotion.

Inpatient care

- 4.36 There was no facility for inpatients.

Secondary care

- 4.37 The nurse who carried out the initial health screen at reception asked young people if they had any outstanding medical appointments. If they had, it was explained that arrangements would be made for them to attend the appointment, although it might be necessary to change the date.
- 4.38 The healthcare administrator arranged external appointments and there was no evidence of cancellation or delay of appointments. Arrangements were sometimes made for a parent or carer to attend an external appointment with a young person.

Mental health

- 4.39 Mental health awareness training for staff was provided externally. Eleven staff had completed the training, including three psychology staff, five senior officers, two officers and one substance misuse worker.
- 4.40 At the time of the inspection, there were no primary mental health nurses in post as both posts were vacant (see section on clinical governance). The CAMHS team was providing primary mental health support for young people in the short term, but we were concerned that delays in recruitment would affect their ability to manage their own caseload.
- 4.41 The CAMHS team included a CAMHS psychiatrist who provided 12 planned sessions a year and up to six emergency visits, two nurses (one four days a week and one full time), a part-time clinical psychologist and a part-time clinical psychology assistant. A counselling service was provided by three part-time counsellors who offered bereavement and trauma counselling. The CAMHS on-call service covered the establishment when CAMHS staff were not on duty. This service had been used three times in the past year.
- 4.42 Access to mental health services was usually by referral to the primary mental health team, who carried out initial mental health screening. At the time of the inspection, all assessments

were being undertaken by the CAMHS team. New referrals were discussed and allocated at weekly meetings attended by the primary mental health and CAMHS teams. Alternate meetings were attended by a counsellor.

- 4.43 The CAMHS team carried a caseload of 12 young people at Warren Hill and two young people on the Carlford Unit. They asked the young people for their consent to share appropriate information if this was necessary. Previous care providers were routinely contacted by the team.
- 4.44 If required, a care programme approach was initiated or continued for young people and community staff were encouraged to maintain contact while young people were in custody. If appropriate, CAMHS staff contacted families for further information or the family service worker made contact on their behalf. Contact with family or carers of looked-after children was made through family services or a social worker.
- 4.45 We were told that transfer to mental health services for assessment or treatment was rare and there had been no such occasions for more than a year. If a young person required additional support, he would probably be transferred to an establishment with an inpatient unit.
- 4.46 The CAMHS team were in the process of planning a health awareness event to mark World Mental Health Day which all young people at Warren Hill would have the opportunity to attend. The objective was to raise young people's awareness of mental health and promote positive mental health through a variety of competitions and activities. It was hoped to provide a similar, but smaller, event for young people on the Carlford Unit who would be unable to attend the main event, but would be encouraged to enter the competitions.

Recommendations

- 4.47 A strategy focussing on the health needs of young people should be developed.
- 4.48 Health services should be delivered in an environment that is consistent with the promotion of health and wellbeing, has appropriate infection control facilities and provides appropriate levels of privacy and confidentiality for young people.
- 4.49 When translation is required for healthcare services, this should be provided by a professional service, either by telephone or a visiting translator. Other young people should not be used for this purpose.
- 4.50 A suitably designed and equipped dental surgery and decontamination room should be included in the plans for the new healthcare block.
- 4.51 A full dental surgery inspection should be carried out by or on behalf of the PCT.
- 4.52 There should be an information-sharing protocol between healthcare staff and other disciplines within the establishment.
- 4.53 Primary mental health nurses should be recruited as soon as possible.
- 4.54 A skill mix review should be carried out to ensure there are sufficient nurses in post with appropriate skills and experience to deliver the required child-centred service.

- 4.55 Nurse-led clinics, including those for young people with life-long conditions, should be run by nurses with appropriate training and experience.
- 4.56 A defibrillator should be available on the Carlford Unit.
- 4.57 There should be a patient forum for young people to meet healthcare staff.
- 4.58 The NHS complaints system should be made accessible and age appropriate.
- 4.59 There should be a clear policy on the assessment of young people's capacity to give consent for healthcare treatment and how consent should be obtained.
- 4.60 Young people's GPs and other relevant care agencies should be contacted with appropriate consent at the start of custody, for relevant information to ensure continuity of care.
- 4.61 Following reception screening, a further health assessment should be carried out no longer than 24 hours after a young person arrives in custody, but not on the same night.
- 4.62 GP clinics should allow for appropriate consultation and administration time.
- 4.63 The waiting time for the sexual health clinics should be reduced.
- 4.64 Young people reporting 'special sick' should be able to see a member of healthcare staff in private.
- 4.65 Triage algorithms should be developed and introduced.
- 4.66 Young people should have direct access to advice from appropriately trained pharmacy staff.
- 4.67 All prescriptions should be legally written, including the quantity and date prescribed, and the signature of the prescriber. Medication should not be supplied beyond the authorised period of treatment.
- 4.68 The use of general stock should be audited so that stock supplied can be reconciled against prescriptions issued. The responsible pharmacist should have professional control of the stock supplied and a dual labelling system should be introduced.
- 4.69 The medicines and therapeutics committee should review the use of general stock. Patient-named medication should be used wherever possible and general stock should only be used if unavoidable.
- 4.70 Patient group directives should be introduced to enable supply of more potent medication by the pharmacist and/or nurse, to avoid unnecessary consultations with the doctor. A copy of the original signed patient group directives should be kept in the pharmacy, and read and signed by all relevant staff.
- 4.71 The special sick policy should be reviewed regularly by the medicines and therapeutics committee to ensure that all appropriate medicines can be supplied.
- 4.72 Requests to see the dentist should be appropriately triaged, preferably by a member of the dental team.

- 4.73 Young people experiencing dental pain should be seen at the next available session.
- 4.74 New arrivals should receive initial dental screening to identify their oral health needs.

Housekeeping points

- 4.75 The security of all keys to medication cupboards, including the controlled drugs cabinet, should be reviewed and regularly audited.
- 4.76 There should be a telephone in the healthcare consultation room.
- 4.77 The ripped seating in the healthcare waiting room should be replaced.
- 4.78 The clutter should be removed from healthcare rooms.
- 4.79 All rooms where healthcare is delivered should be thoroughly cleaned by a cleaner and a schedule of cleaning should be drawn up.
- 4.80 The leaflet describing healthcare services should be updated and provided in a range of accessible formats suitable for young people.
- 4.81 The pharmacist should make regular visits to the establishment during which a random selection of dispensed faxes should be compared against the original prescription forms.
- 4.82 Maximum/minimum temperatures should be recorded daily for the drug refrigerators in treatment rooms and the pharmacy to ensure that thermolabile items are stored within the 2-8°C range. Corrective action should be taken where necessary and should be monitored by pharmacy staff.
- 4.83 Regular date checks should be carried out on all medicines and testing strips and resuscitation kits.
- 4.84 A rubber dam should be used when providing root canal treatment.
- 4.85 Dental records should be stored in a locked, fire-proof cabinet.
- 4.86 Envelope record cards should be used for dental records.

Section 5: Activities

Learning and skills

Inspection of the provision of education and educational standards, as well as vocational training in YOIs for juveniles, is undertaken by the Office for Standards in Education (Ofsted) working under the general direction of HM Inspectorate of Prisons. For information on how Ofsted inspects education and training see the Ofsted framework and handbook for inspection.

Expected outcomes:

Learning and skills are central to the regime of the establishment and all children and young people are engaged in good quality provision that meets their individual needs and enables them to achieve their full potential. Children and young people of statutory school age receive full-time education.

- 5.1 Initial education assessments were carried out well and young people were allocated to courses to suit their needs. Changes to the education contract meant that most young people had three hours of education or vocational training each day, although some got more. Young people generally behaved well in classes and benefited from good teaching and learning support. The core curriculum was well planned. Punctuality was good and attendance at education was satisfactory and the few young people who refused to attend were well managed. Most young people left the establishment with a nationally recognised qualification, regardless of their length of sentence or ability. The use of release on temporary licence for educational purposes was developing well and there had been some interesting initiatives involving the local community. The library was well used and played a major role in helping young people to enjoy reading.
- 5.2 Effective initial assessments gave clear indications of young people's abilities in literacy and numeracy and specific screening identified any learning disabilities. Information and guidance staff were effective in ensuring that young people were allocated to courses that met their needs, following initial assessment. However, funding for these posts, which had previously been provided by the Youth Justice Board, was no longer available. The establishment had agreed to fund the posts until April 2010, but future funding arrangements were uncertain. Induction to education was appropriate and young people's individual programmes were planned during induction.
- 5.3 Recent changes to the education contract had resulted in significant changes to the way that education provision was allocated. The majority of young people were allocated to education or vocational training for either the morning or afternoon sessions of three hours, with a few getting both. The core curriculum of education and vocational training was generally well planned, but the remaining activity hours outside the education contract, which were the responsibility of the establishment, were not fully developed or coordinated (see time out of cell section). The recently introduced Pathways initiative, based loosely on ability and previous attainment, gave most young people appropriate choices of courses to take, although there was insufficient vocational training and there were waiting lists for some vocational courses, which were well managed. Young people with identified learning difficulties were provided for effectively and they achieved as well as their peers.

- 5.4 Attendance at lessons was satisfactory at about 85%. Classes were rarely cancelled. Few young people refused to attend education and education staff had good links with wing staff to monitor this. Punctuality for morning and afternoon sessions had seen significant improvements, enabling a purposeful start to lessons.
- 5.5 Teaching and learning were good overall. Most lessons were planned effectively to ensure that tasks and activities met the needs of young people. Young people were clear about what and how they were going to learn and most young people made good progress in lessons. In lessons we observed, young people enjoyed meeting the challenges of the work and were keen to do their best. They asked searching questions to increase their understanding and worked well in applying their knowledge. Expectations of achievement and standards of behaviour were high and young people lived up to them. Details of work completed were recorded in learner diaries.
- 5.6 In a few less effective lessons, young people were insufficiently challenged and the work did not engage them enough to make the progress they were capable of. The endings to some lessons were ineffective. Some lessons had 'downtime' at the end which consisted of unrelated activities rather than a detailed summary and review of what had been achieved.
- 5.7 Young people produced good standards of work. Standards were particularly high in cookery and mathematics. In cookery, young people acquired levels of knowledge and skills comparable to those achieved in mainstream training. They demonstrated good levels of understanding and analysis in mathematics. On occasions, presentation of their work needed improvement. In vocational areas, young people gained work-related skills quickly and demonstrated them confidently.
- 5.8 Young people's achievements were good, even those on short sentences. There was a strong focus on helping young people to improve their levels of literacy and numeracy, especially reading, which was reflected in the high level of accreditation achieved by young people. Most young people left the establishment with some form of nationally recognised qualification. More able young people could take a small range of GCSE and AS level subjects, although it was not possible to take both English and mathematics at GCSE level. In 2008/09, there had been a significant number of high level passes, especially in mathematics. Some young people progressed to City and Guilds courses in some vocational areas if their sentence was long enough.
- 5.9 Teachers monitored young people's progress on courses relatively well and targets were recorded on individual learning plans (ILPs), although there was no formal tutorial system.
- 5.10 Young people generally behaved very well. There was a time out facility for those who misbehaved and few were sent back to the residential units because their behaviour could not be contained. In most lessons, their relationships with teachers and each other were respectful and good-natured. We heard very little swearing and any inappropriate language was usually challenged effectively.
- 5.11 Young people were supported well by learning support assistants (LSAs) in lessons. However, on a few occasions LSAs did not give young people sufficient opportunity to solve problems for themselves.
- 5.12 The use of release on temporary licence was developing and provided additional breadth to the curriculum. The raptor project provided excellent opportunities for a small number of young people to develop a range of skills and to maintain contact with the outside world by giving demonstrations at schools and community shows. The Firebreak course run by Suffolk Fire

and Rescue Service gave young people many challenges which they enjoyed greatly and helped to develop their team-working skills.

- 5.13 Leadership and management were good. The establishment's links with outside agencies were effective and developing further. Managers had produced a detailed self-assessment report in consultation with staff. Most of the report was appropriately evaluative and highlighted many strengths and areas for development, which were reflected during the inspection.
- 5.14 Lesson observations occurred once a year and feedback was provided to staff after the observations and records maintained. In a few cases, standard practice was recorded as a key strength.

Library

- 5.15 Access to the library was good and young people enjoyed their time there. They engaged well in a range of interesting activities, such as driving theory tests and research projects devised by the librarian. The range of resources were used well by young people and borrowing rates were high due to excellent promotion by the librarian, who routinely visited young people on the bronze level of the rewards and sanctions scheme to provide them with library resources.
- 5.16 Prison Service Orders were available in the library, together with a limited range of legal texts and books in languages other than English. The library was open in the evenings, but not at weekends.

Recommendations

- 5.17 There should be sufficient vocational training opportunities to meet the needs of the population.
- 5.18 Young people should be able to study both English and mathematics at GCSE level.
- 5.19 Formal tutorial systems should be introduced.
- 5.20 The library should open at weekends.

Physical education and health promotion

Expected outcomes:

PE is central to helping children and young people to become confident individuals, maintain a healthy lifestyle, use spare time constructively, develop skills and gain qualifications while in custody and on release back into the community. PE is enjoyable and inclusive for all, regardless of ability or previous experience. Programmes contain a variety of activities to meet the needs and interests of all children and young people.

- 5.21 There was a well-balanced PE programme suitable to meet the needs of this age group and the facilities were well managed. There was a good range of qualifications available and young people achieved well. There were good links with psychology and the young people's substance misuse service, but links with healthcare were less well developed. Young people who were reluctant to attend PE were encouraged to take part and well supported. PE staff

had made efforts to reduce bullying in the gym showers which young people reported as a problem, but supervision remained difficult due to the design of the showers.

- 5.22 There was a well-planned core PE programme consisting of team games and personal fitness. Some minor games were available, as were some innovative activities such as land yachting and remote control car racing. These activities succeeded in encouraging young people who lacked the confidence to participate. There was a morning fitness club, which was popular. Ipswich Town Football club provided coaching sessions, which were highly valued by the young people.
- 5.23 Young people had on average three one and a half hour core PE sessions each week, both at Warren Hill and at the Carlford Unit. There was a good range of accredited courses and levels of accreditation were high, with clear routes for progression to certificate and diploma courses.
- 5.24 Additional PE in the evenings and at weekends was well attended, but was only available to young people on the silver and gold levels of the rewards and sanctions scheme. PE was provided for the majority of young people on the Butley unit in a small suite on the unit, but the facilities were inadequate. Some were permitted to attend the main gym subject to risk assessment.
- 5.25 The department had close links with psychology and the young people's substance misuse service and specialist PE was available for young people using these services. Links with the safeguarding team were also strong. Links with healthcare were less well developed. There were few refusals to PE and any young people who did refuse were usually followed up quickly to find out the reasons. The facilities were well managed and were clean and tidy. The sports hall at Warren Hill was small, which limited some activities, but best use was made of what was available. The fitness suite contained resistance and cardiovascular equipment and the establishment had appropriately stopped the use of free weights by young people. Outdoor pitches were used well.
- 5.26 A recent survey carried out by the establishment had indicated that 94% of young people felt safe in the gymnasium. Showers had improved since the previous inspection, but their design made them difficult to supervise. However, in our survey, 17% of the one third of the population who reported that they had felt unsafe in the establishment said that it had been in the gym showers. This area was rated the second highest from 16 categories (18% said wing showers).
- 5.27 Clean kit was issued at each session and effective steps had been taken to reduce young people being bullied for shower gel by providing it for the PE sessions and not allowing young people to bring their own shower gels to PE. Accidents were monitored and reported weekly and appropriate actions were taken. Young people's views were collected routinely and usage of PE was well monitored.

Recommendations

- 5.28 **Staff supervision in the gym showers should be improved.**
- 5.29 **The facilities in the fitness suite on the Butley unit should be improved for young people who are risk assessed as unsuitable to attend the gym.**
- 5.30 **Links with healthcare should be developed to ensure that PE programmes are available for young people with specific healthcare needs.**

Faith and religious activity

Expected outcomes:

All children and young people are able to practise their religion fully and in safety. The chaplaincy plays a full part in prison life and contributes to the overall care, support and resettlement of all children and young people regardless of faith, including those of no faith.

- 5.31 There had been no coordinating chaplain at the establishment for over two years, which had had an impact on the overall planning, promotion and development of faith and non-faith based activities. Corporate worship was well attended by young people. The chaplaincy team delivered time-out, non-faith based sessions for young people who were finding it difficult to cope with custody. The Muslim chaplain was working with staff and young people to raise awareness of different faiths and cultures. There were no links with local faith communities.
- 5.32 The chaplaincy met young people during their induction programme to tell them about the services and non-faith based classes available.
- 5.33 At the time of the inspection, 15% of young people had said they were Catholic, 11% Church of England and 7% Muslim, with the majority not specifying a religion.
- 5.34 There had been no coordinating chaplain at the establishment for over two years, but an appointment had recently been made. The absence of a coordinating chaplain had had an impact on the overall planning, promotion and development of faith- and non-faith based activities. The head of learning and skills managed the chaplaincy, but was new to the establishment and was in the process of ensuring that the needs of young people of all faiths were being met.
- 5.35 The chaplaincy team consisted of two half-time Church of England chaplains, who also worked at HMP Hollesley Bay, a number of sessional chaplains and the Salvation Army. They provided corporate worship, pastoral care and evening classes and activities. There were no specific links with local faith communities.
- 5.36 Corporate worship was well attended by young people, with an average of 12 Muslim young people attending Friday prayers. Weekend worship was attended by between 20 and 30 young people. The world faith room was a large room which could safely accommodate the young people who wished to use it. It contained faith- and non-faith based literature and religious artefacts and young people were allowed to take literature, rosary beads and prayer mats to their cells. In our survey, 75% of young people said that it was easy or very easy to attend religious services, which was significantly better than the comparator of 55%.
- 5.37 Eighty-three per cent of Muslim young people said that their religious beliefs were respected and 95% that they could speak to a religious leader in private if they wanted to, which were significantly better than the respective comparators of 48% and 63%. The Muslim chaplain was well respected throughout the establishment and was soon to be appointed on a part-time basis. He had worked at the establishment for over eight years and conducted Muslim classes and led Friday prayers. He had some knowledge of the poor perceptions that Muslim young people had of staff (see diversity section) and believed that the differences in culture and background between staff and Muslim young people led some of them, who were mainly from London, to be reluctant to approach staff. He was working with staff and young people to raise their awareness of different faiths and cultures. At the time of the inspection, a well-attended cultural awareness talk was delivered to staff and young people.

- 5.38 The chaplaincy team provided non-faith based sessions for young people who were finding it difficult to cope with custody. These sessions enabled young people to discuss how they were feeling and to interact with their peers in a small, safe environment. The programme coincided with education and did not appear to be coordinated with other services for vulnerable young people. Christian groups incorporating prayer and bible study were held in the evening. Muslim classes took place in the mornings and afternoons to avoid coinciding with education. Preparations had been made for Ramadan, which was being observed by Muslim young people during the inspection.
- 5.39 The chaplaincy visited the units each day. Effective pastoral care was provided and young people were supported by any member of the chaplaincy team, regardless of their faith. A representative of the chaplaincy attended or provided written contributions to training planning meetings.

Recommendations

- 5.40 The chaplaincy team should establish and maintain links with faith communities outside the establishment.
- 5.41 Chaplaincy classes and groups should be organised so that they do not coincide with other aspects of the regime.

Time out of cell

Expected outcomes:

All children and young people are actively enabled and encouraged to engage in out of cell activities, and they are offered a timetable of regular and varied events.

- 5.42 Staff had been working hard to mitigate the effects of recent changes to the education contract. Most young people spent between seven and eight hours out of their cells each weekday, but young people on the bronze level of the rewards and sanctions scheme, who did not get association or other out-of-cell activity, could spend as little as four hours a day. Association took place every day in accordance with the timetable. Exercise was offered early each day, but take up was low because it coincided with other tasks.
- 5.43 We carried out a roll check at 10.45am on a week day during the inspection and found 25% of young people locked in their cells. The majority of them had been out of their cells to eat their breakfast, take exercise and carry out some domestic duties earlier in the morning and would be attending an education session in the afternoon.
- 5.44 Residential staff were attempting to provide constructive activity for as many young people as possible to fill the time they spent on the unit when they were not in education. They got young people out of their cells to have showers, clean the wings, involved them in competitions and games and organised team-building activities. Most of this additional activity was spontaneous and it was difficult to determine how frequently it took place. All young people, apart from those on the lowest level of the rewards and sanctions scheme, received at least one hour of association every day. This was regular and predictable. In our survey, 92% of young people said they received association every day, which was significantly better than the comparator of 45%. We calculated that on average young people on the gold level of the rewards and sanctions scheme were out of their cells for approximately eight hours and those on the silver

level approximately seven hours each day. Young people on the bronze level fared worse and could have as little as four hours a day out of their cell (see also rewards and sanction section).

- 5.45 Staff engaged reasonably well with young people during periods of association. We observed officers initiating board games and participating in table football and table tennis with young people at the same time as managing telephone queues and showers. Young people on the highest level of the rewards and sanctions scheme had the opportunity to take their association in the juvenile activity centre. The recreational facilities there were better than those on the unit and included full-length snooker and pool tables, as well as arcade-style computer games and satellite television.
- 5.46 Young people had the opportunity to take exercise during the early unlock period between 7.55 and 8.55am. This coincided with breakfast and the time when young people cleaned their cells, so the take up of exercise was very low, with less than 10 young people on each unit going outside on average. An hour was scheduled for exercise at the weekend. Each residential unit had its own exercise area. These were austere and barren concrete yards which had no equipment. Young people were supplied with outdoor clothing to wear if they wanted to take exercise when it was raining.

Recommendations

- 5.47 The daily programme should be organised so that all young people have the opportunity to take an hour of outdoor exercise some time during the day.
- 5.48 Recreational equipment and seating should be provided for the exercise yards.

Section 6: Good order

Behaviour management

Expected outcomes:

The primary method of maintaining a safe, well-ordered and constructive environment is the promotion and reward of good behaviour. Children and young people play an active part in developing and maintaining standards of conduct. Unacceptable behaviour is dealt with in an objective, fair and consistent manner as part of an establishment-wide behaviour management strategy, which is underpinned by restorative justice principles and good relationships between staff and young people. The application of disciplinary procedures, the use of force and care and separation are applied fairly and for good reason with good governance arrangements. They are minimised through preventative strategies and alternative approaches: they are not seen in isolation, but form part of the overall behaviour management strategy and have clear links with safeguarding arrangements and violence reduction strategies.

- 6.1 There was a comprehensive behaviour management policy, but it was not being fully implemented. There was good dynamic security, and systems for the analysis and monitoring of security intelligence were well managed. There was effective communication and cooperation between security and other departments. Strip-searching took place without risk assessment. The number of adjudications had reduced, but remained high, and young people were still being placed on report for minor misdemeanours and, in some cases, the evidence in support of the charge was poor. The rewards and sanctions scheme was motivational, but there were some frailties in its implementation and the regime for young people on the bronze level was too restrictive. Efforts had been made to ensure that adjudication hearings were age appropriate and the majority of young people reported that the process was clearly explained. The levels of use of force had recently increased and on a small number of occasions had been used inappropriately to gain compliance. Planned incidents were dealt with well. The use of special accommodation had reduced significantly. Removal from unit was being used as a punishment inappropriately. The separation unit (Butley) was well ordered and young people were treated decently. Care planning for young people located there was limited.
- 6.2 A recently published behaviour management strategy incorporated all aspects of behaviour management. At the time of the inspection, parts of the strategy were aspirational and in some areas current practice did not reflect the strategy. For example, removal from unit was still being used as a punishment, which was contrary to the strategy. Other elements had not been fully implemented, such as the positive intervention plan (PIP) procedures (see section on bullying).
- 6.3 A detailed 'At a glance intervention guide' provided staff with information on the full range of interventions available, which included mediation.
- 6.4 The strategy referred to the use of restorative justice as an important behaviour management tool. The principles of restorative justice were sometimes incorporated into interventions, such as mediation, letter writing and one-to-one work, but there were no specific restorative justice initiatives.
- 6.5 The young people we spoke to individually or in focus groups during the inspection had a clear understanding of the consequences of poor behaviour and the benefits of good behaviour.

During the induction programme, the standards of behaviour expected and the rewards and sanctions scheme were explained in detail.

- 6.6 Young people we spoke to felt that some staff were more likely than others to use behaviour warnings, disciplinary procedures and force. The establishment conducted quality checks to improve the consistency of use of each of these methods of behaviour management. We found no evidence of the use of unofficial or collective punishments.

Security

- 6.7 There were no obvious deficiencies in physical or procedural security and all the elements of dynamic security were in place. During the four months before the inspection, there had been a total of 176 reported incidents, an average of 44 a month. Fights, assaults and cell damage were the largest categories. Staff quickly intervened in fights or assaults. All but three of the incidents, which had involved roof climbs, had been classed as minor.
- 6.8 In the six months before the inspection, 1,222 security information reports (SIRs) had been submitted, an average of 203 a month. The most common reason had been threats to staff or other young people, followed by assaults, fights and damage to property. A review of SIRs revealed that they were submitted by a range of disciplines in the establishment, with meaningful contributions from teaching staff and psychologists, as well as uniformed staff.
- 6.9 The low mandatory drug testing figures and limited drug-related intelligence and finds indicated that there was not a significant drug issue in the establishment at the time of the inspection. The security department analysed intelligence and produced a monthly intelligence assessment. Using this information and competitive analysis techniques, the security committee set and reviewed security and intelligence objectives.
- 6.10 The security department consisted of a governor grade, a principal officer, two senior officers, an administrative grade and an operational support grade collator. They were supported by a dog handler with a drugs dog.
- 6.11 There was good communication between security and other departments. Information on bullying or safety issues was passed to the safeguarding team and the security department produced a daily security briefing which was given to all managers to ensure they were kept informed of any significant or emerging security issues.
- 6.12 All security matters were monitored and discussed at the monthly security committee meeting, which was chaired by the deputy governor or head of security and was well attended by a range of disciplines.
- 6.13 A few months before the inspection, the number of incidents of assaults and fights during the movement of young people to activities had been raised as a concern in a number of forums. As a result, the security department, in consultation with a number of other departments, had devised a new system of clockwise movement to activities which had resulted in a significant reduction in the number of incidents. This was an excellent example of good analysis and interdepartmental working to improve the safety of young people.
- 6.14 There was no overarching searching policy, although searching on the Butley unit was covered by the unit's policy. Strip-searching took place without risk assessment. All cells were searched on a six-month cycle. The security department also managed intelligence-led target searches, of which there had been 33 in the period January to June 2009. All young people

were strip-searched during the course of a cell search, whether it was a routine or target search. Ten per cent of young people were searched on a random basis following visits.

- 6.15 The highest number of young people subject to closed visits at any time in the previous six months had been four. At the time of the inspection, three young people were on closed visits and there were two banned visitors. The policy relating to closed visits stated that they should only be used to manage the risk of contraband entering the establishment and not as a punishment. Reviews of closed visits took place at monthly security meetings. Minutes demonstrated a good level of discussion about the effect of closed visits on the young person and their family as well as security concerns. The banned visitors policy indicated that visitors should only be banned if they represented a risk to the safety of young people or a serious threat to the security of the establishment. The decisions we reviewed appeared proportionate to the risk. Both measures were reviewed each month at the security committee meetings, which considered the effect that the restrictions had had on individual young people. Young people and visitors were informed of their right to appeal.

Rules and routines

- 6.16 Colourful, age-appropriate posters describing the rules and expected standards of behaviour were displayed in communal and residential areas. Expected standards of behaviour were explained on induction and young people were asked to sign a copy to confirm that they understood them. Young people we spoke to demonstrated a good understanding of the rules and standards of behaviour expected. We observed staff challenging inappropriate behaviour in a measured way, taking time to explain to young people why their behaviour was unacceptable.

Rewards and sanctions

- 6.17 The rewards and sanctions policy had been revised in February 2009 after consultation with staff and young people and formed part of the behaviour management policy. The policy was reviewed annually by the head of residence who spoke to the consultative committee and focus groups of young people to take into account young people's views on the operation of the scheme and the privilege levels.
- 6.18 The scheme was explained on induction. Young people and staff we spoke to had a good understanding of how the scheme worked. The differentials in the levels were clearly set out and motivated young people to behave well.
- 6.19 Young people who had been on the highest level of the rewards and sanctions scheme at their previous establishment could retain their privilege level on transfer to Warren Hill.
- 6.20 In our survey, 35% of young people indicated that they were on the highest level of the scheme, which was significantly more than the comparator of 26%. Young people were given verbal warnings for poor behaviour which were recorded in the young person's wing file. A number of young people complained to us that they had not been told of the warnings and it was not always clear from the files whether warnings had been discussed with the young person. Young people complained to us that some staff issued rewards and sanctions warnings too readily for minor infractions of the rules and did not always inform them when they had written warnings in their wing files. After a second warning, staff were supposed to set targets for young people to improve their behaviour. These targets were given verbally and recorded in the wing file. They were often general and unhelpful, for example 'Don't get any more warnings'. A third warning triggered a review for a downgrade. Young people were

invited to attend and contribute to any review of downgrading conducted by a senior officer with a wing officer who was not always the young person's personal officer.

- 6.21 At the time of the inspection, there were 18 young people on the bronze level of the rewards and sanctions scheme and this was a typical number. We spoke to five young people who were on the bronze level of the scheme, of whom four said they had been treated fairly and one said he had been treated unfairly. One young person who did not speak English well said that he had not understood that he had been breaking the rules and had not been given any warnings before being placed on bronze.
- 6.22 The regime for young people on the bronze level of the scheme was too restrictive. Young people we spoke to indicated that they had had no association, had only been able to exercise on Saturdays and Sundays and were given access to the telephone on only three days a week.
- 6.23 Both the residential principal officer and the head of residence conducted a monthly 10% quality check of wing files, including the operation of the rewards and sanctions scheme, to ensure consistency and fairness. There was evidence that managers had discussed their findings appropriately with staff at the daily residential unit meetings. The scheme was also monitored at senior management team and race equality action team meetings.

Adjudications

- 6.24 There had been 744 adjudications during the six months before the inspection, an average of 124 a month. This was a reduction in the number of adjudications during the previous six months which had totalled 905, an average of 150 a month.
- 6.25 The largest number of adjudications, 25%, related to fights, with 17% resulting from assaults and 17% damage to property.
- 6.26 We examined a sample of adjudication documentation. In the majority of cases, young people had been given time to prepare their case and most were served with the paperwork the evening before the hearing was due to take place. The time of the hearing had not been recorded and, on the rare occasions when the hearing had taken place on the day the papers were served, it was not possible to determine if the young person had been given sufficient time to prepare his defence.
- 6.27 Young people were issued with the notice of report, information on what happened when they were placed on report and the availability of assistance from Barnardo's advocates. Adjudicators also asked young people if they wanted assistance from an advocate during the course of the adjudication. Advocates attended the Butley unit daily to offer assistance to young people held there.
- 6.28 When they issued the paperwork, staff asked the young person to indicate if he intended to plead guilty or not guilty. Although this was done to arrange in advance for the reporting officer and witnesses to be present if necessary, it was inappropriate to ask for an indication of a plea before the hearing had started.
- 6.29 We reviewed a sample of adjudication records from the previous three months. In a significant number of cases, the quality of the evidence was poor and failed to provide the young person or the adjudicator with sufficient information about the charge. The behaviour management policy stated that adjudications should be used as a last resort, but we found that a few were

for minor breaches of the rules which could have been dealt with by less formal means, such as the rewards and sanctions scheme.

- 6.30 The adjudication room was located on the Butley unit. Efforts had been made to make the environment age appropriate by using soft furnishings. During the inspection, a young person indicated that he did not want to attend the Butley unit for his hearing. In response, the adjudicating governor appropriately conducted the hearing on the young person's unit in an association room. The adjudication we observed was conducted in a relaxed style and the adjudicator checked the young person's understanding throughout the hearing. Records also indicated that young people were given the opportunity to present their case and any mitigation.
- 6.31 Young people were given punishments in accordance with a published tariff. The tariff included removal from unit (RFU) for a number of offences, which was being used as a punishment on adjudication contrary to the establishment's behaviour management policy. Otherwise, the punishments appeared consistent and appropriate for this age group. The deputy governor conducted a 10% quality check each quarter.
- 6.32 During the inspection, we found one example of a young person placed on report for smashing his television in order to self-harm, which was not appropriate.
- 6.33 A quarterly adjudication review meeting was well attended by adjudicating governors. Procedures and trends were discussed and a range of useful statistics monitored, including a breakdown of punishments by ethnicity and by individual governors. The meeting also reviewed the local tariff. There had been no use of an independent adjudicator in the previous six months, primarily due to the difficulty of arranging for a district judge to come to the establishment.

Use of force

- 6.34 There had been 286 incidents of use of force in the previous six months; 118 of the incidents had involved control and restraint (C and R).
- 6.35 We reviewed a sample of use of force records from the previous six months. The majority of cases were spontaneous incidents when staff had intervened in fights between young people. In most incidents, force had been used appropriately and the incident had quickly de-escalated. We noted that in a small number of incidents force had been used to secure compliance with staff instructions. In one incident, a young man had been restrained by staff after refusing to end a telephone conversation.
- 6.36 All planned incidents were video recorded. We reviewed a sample of recordings and in each case the only force used had been the application of handcuffs. Healthcare staff attended all planned incidents and checked on all young people after force had been used.
- 6.37 Ninety-one per cent of discipline staff had been trained or had received refresher training in C and R techniques in the previous twelve months and the standard of officers' reports was generally high.
- 6.38 A new policy on strip-searching under restraint had been published, which indicated that strip-searching under restraint could only be authorised by the governor. Since the implementation of this policy, no young people had been searched under restraint and records indicated that

no young people had been forcibly strip-searched during the six months before our inspection. This was a very significant improvement on the situation at the time of our previous inspection.

- 6.39 Special accommodation had only been used on one occasion in the previous six months. The young person had been in the special cell for a period of 20 hours, which was excessive as there were periods during that time when he had been compliant.
- 6.40 There were no designated cooling-off or time-out rooms. Staff indicated that they used the adjudication waiting rooms for young people brought to the Butley unit following an incident to give them an opportunity to cool off. In some cases, the young person had then been allowed to return to his unit.
- 6.41 Use of force was monitored at the use of force monitoring and review group, which met quarterly with the segregation monitoring and review group. The range of use of force data produced was good and patterns and trends were considered. The meeting was not well attended and the security department rarely attended, although a member of the safeguarding department usually did.
- 6.42 Young people were debriefed by the safeguarding team after any incident of use of force. After any incident, the young person's parent or carer and their youth offending team worker were contacted and informed of the circumstances of the incident.

Care and separation

- 6.43 Young people who were separated for disciplinary reasons were located on the Butley unit, which also operated as the first night unit (see section on first night).
- 6.44 The unit was clean and well organised. It consisted of six separation cells, three holding rooms for adjudications and a special accommodation cell on one spur and seven first night safer cells and six separation overspill cells on a second spur.
- 6.45 The safer cells on the unit were used primarily for young people on their first night, but they were also used to hold disruptive young people also at risk of self-harm or suicide. These cells had at least one avoidable ligature point.
- 6.46 The exercise yard was bleak. It was surrounded on all sides by walls or fencing which obscured any view beyond the perimeter of the yard and there was no seating. There was a servery where young people collected all their meals including breakfast, although they had to eat their meals in their cells. When young people were located on the unit, they were given a rub-down search. They were only strip-searched if a risk assessment had indicated that there was a risk to themselves or others. All strip-searches carried out on the unit were logged and decisions subsequently reviewed by a governor. The policy for searching young people on the Butley unit was clearly set out in the separation and intervention unit policy document.
- 6.47 Staff were selected to work on the unit and, like other uniformed staff, they received juvenile awareness staff programme (JASP) training and mental health awareness training. They also received adjudication liaison training. Their appointment to work on the unit was authorised by the governor, who reviewed their continued stay on the unit after two years.
- 6.48 On arrival, young people were given an information sheet with details of the rules and regime on the unit. This included information on the traffic light system of privileges which was used to encourage good behaviour. The system was easy to understand and was clearly explained to

all young people on arrival in the separation unit and at each review of separation. Depending on their level on this system, young people were able to attend the gym up to three times a week. Young people were able to work and associate with other young people in the care and separation unit. A member of the education department attended the unit daily to provide some tuition, but most of the education provision was in-cell work. At the time of the inspection, one young person was employed as a painter and a second was undertaking cleaning duties. Young people could have a staged return to normal location by associating on their unit and attending mainstream education prior to return. However, this was rare and in the sample of 40 records that we examined we found no examples.

- 6.49 In accordance with the requirements of Prison Service Order 1700, the use of the unit was monitored by a segregation monitoring and review group which met every quarter to look at a range of data and statistics, including ethnic monitoring. The quality of the analysis and discussions was good. Healthcare, safeguarding, chaplaincy and the Independent Monitoring Board attended regularly, but the meetings were not well attended by other departments.
- 6.50 Care planning arrangements for young people had recently been changed. They now consisted of little more than a list of issues and actions set out in the format of an ACCT (assessment, care in custody and teamwork) care map and were not sufficiently detailed to address the complex issues of many of the young people located on the unit.
- 6.51 We reviewed the records of young people held on the unit over the previous six months. In every case, separation had been appropriately authorised by a governor, who had considered a safety algorithm or safety screen completed by a healthcare professional.
- 6.52 The separation of young people was reviewed in accordance with rule 46 GOOD (good order or discipline) set out in PSO 1700, with reviews for young people held at 72 hours and at least every 14 days. Reviews were usually held weekly at Warren Hill. Although young people held on the Butley unit under RFU were reviewed in accordance with the same timetable of reviews, we found no examples of young people returning to their unit before the end of the original punishment period. We spoke to all the young people separated on the unit, who all indicated that they were well treated by staff and had daily access to telephones, showers and healthcare staff.
- 6.53 The security management and review group report indicated that the longest stay on RFU between April and June 2009 had been 21 days and on GOOD the longest stay had been 20 days. However, the aggregate time under the different rules was not clearly recorded, giving an incomplete picture during this period. One young person had been segregated for 67 days under the disruptive prisoner protocol. He was being well cared for and had multidisciplinary input into his daily care. However, his care plan was simplistic and it lacked clear assessment of his needs and clarity about the resources which he had been allocated.

Recommendations

- 6.54 Young people should be informed immediately, or as soon as practicable, when they are given warnings, which should be recorded in their wing file.
- 6.55 Behaviour targets given to young people should be specific, realistic and measurable.
- 6.56 Young people on the bronze level of the scheme should have daily access to the telephone and exercise in the open air and should have the opportunity to associate with others in the evening at least once a week.

- 6.57 Young people should not be asked to indicate their plea prior to the hearing.
- 6.58 Formal disciplinary procedures should not be used for minor infringements of the rules.
- 6.59 Removal from unit should not be used as a punishment on adjudication.
- 6.60 Young people should not be placed on report for actions related to acts or attempted acts of self-harm.
- 6.61 Force should not be used to secure compliance.
- 6.62 Young people located in the care and separation unit should be allowed to eat their meals out of their cells, subject to risk assessment.
- 6.63 Young people should not be held in special accommodation after they have ceased to be violent and refractory.
- 6.64 There should be properly managed and monitored cooling-off or time-out facilities in residential areas.
- 6.65 The use of force monitoring and review group and the segregation monitoring and review group meetings should be multidisciplinary.
- 6.66 The fabric of the safer cells should be modified to remove potential ligature points.
- 6.67 Young people in segregation should be able to exercise in association subject to a risk assessment.
- 6.68 All young people held in segregation should have a care plan.
- 6.69 Young people should be held in separation for the shortest possible period.

Housekeeping points

- 6.70 The notice of report should clearly state the evidence in support of the charge laid.
- 6.71 The time that the hearing starts should be recorded on the adjudication record.
- 6.72 Adjudication liaison officers should help staff to ensure that their evidence is clear, accurate and comprehensive.

Section 7: Services

Catering

Expected outcomes:

Children and young people are offered a sufficient choice of healthy and varied meals based on their individual requirements. The menu reflects the dietary needs of growing adolescents. Food is prepared and served according to religious, cultural and prevailing food safety and hygiene regulations.

7.1 Budget cuts had resulted in less variety of food, but the quantity was ample and the menu included an evening snack. Although most young people ate what was served, many of them complained about the quality. All diets were catered for and the menu included healthy options which were promoted. Young people on special diets received individual attention from the catering manager and good attention was paid to young people with religious needs. Consultation arrangements were very good.

7.2 Young people were offered three meals a day. The menu was organised on a four-week cycle, which young people ordered in advance. Budget cuts earlier in the year had resulted in the number of choices for each meal being reduced from five to three. The three daily meals consisted of a Halal option, a vegetarian option and a healthy option. Young people usually ate the contents of a breakfast pack of milk, cereal and tea as soon as it was issued as a snack in the evening. However, they were also offered tea and toast at breakfast time which they were able to eat communally. The evening meal was supplemented by an 'enhancement' which took the form of fruit or cake. Bread was freely available at lunch and suppertime.

7.3 Most of the food was provided by an outside contractor, but during the summer period vegetables and salad were used from a nursery in the grounds of the establishment. These salads had proved very popular and the catering manager was keen to promote the use of food grown on the site to encourage young people to adopt a healthier diet. This was reinforced by a number of graphic posters displayed in the servery areas, which highlighted the importance of a balanced diet. Catering was not involved with other departments in promoting healthy lifestyles.

7.4 Young people were able to drink the water from the basins in their cells. In each of the residential units, there were urns in the servery areas from which young people could obtain hot water. Young people were issued with flasks so that they could have a hot drink when they were locked up.

7.5 The quantity of food served was ample. We observed most young people receiving quite large portions, which they ate. However, we received numerous complaints from young people in our discussion groups about the quality of the food, which they said was greasy and tasteless. In our survey, only 12% of young people said they thought the food was either good or very good, which was significantly worse than the comparator of 22%. The food which we tasted was filling, but unappetising.

7.6 Young people on special diets were catered for appropriately. Vegans were supplied with soya milk and those on special medical diets were provided with what the medical officer had

recommended. The catering manager consulted young people who were on a special diet to ensure that their needs were met.

- 7.7 The catering department took care to meet the religious needs of young people. Halal food was stored, cooked and served separately. The catering manager had recently consulted the Muslim chaplain about the requirements for Ramadan and was making plans for the festival of Ede.
- 7.8 The kitchen was reasonably well equipped and a new oven was due for delivery shortly. The District Council Food and Safety team had made a few recommendations at their most recent inspection, which had been implemented. Food was cooked in the main kitchen on the adjacent Hollesley Bay site and was placed in insulated plastic boxes and transported by van to each of the residential units at Warren Hill. These arrangements were reliable and the food was usually delivered on time. Breakfast was served at 8am, lunch around midday and the evening meal at about 5pm. All young people, apart from those on the bronze level of the rewards and sanctions scheme, were able to dine out once a day. Staff were encouraged to dine with young people and occasionally did so.
- 7.9 The unit serveries were clean and young people on duty wore white uniforms and hats. Several officers were present when food was being served and their presence helped to ensure that it was distributed fairly and efficiently.
- 7.10 The food consultation arrangements were good. There was scope for young people to discuss any aspect of the catering arrangements directly with relevant staff. There were food comment books on each of the unit serveries which were used by staff and young people. The catering manager checked these books regularly and responded constructively to the points raised. There was a monthly catering forum which was attended by a young person's representative from each of the units. The forum was chaired by the catering manager and attended by the catering supervisor. Detailed minutes were kept and it was clear that the staff took what young people said seriously and, if the budget allowed, took steps to address some of the issues raised. Two cooked meals a day had been introduced following discussion at the forum.

Recommendations

- 7.11 The quality and range of food provided should be improved.
- 7.12 The promotion of healthy eating should be developed in conjunction with other departments in the establishment as part of a programme of promoting healthy lifestyles.

Canteen/shop

Expected outcomes:

Children and young people can purchase a suitable range of goods at reasonable prices to meet their diverse needs and choices and can do so safely, from a well-managed shop.

- 7.13 The canteen list provided a range of popular and cultural foods, and fruit was available. The list also contained a wide range of religious artefacts. It took nearly two weeks for money from refunds and replacement items to be put in young people's accounts for canteen goods and a 50 pence administration charge was applied to catalogue orders, which was unacceptable.

The national product list did not reflect the specific needs of young people. Staff and young people expressed concerns about bullying in relation to canteen and good efforts had been made to address this.

- 7.14 The contract provider for the shop had changed to DHL in May 2009. At that time, DHL provided the goods and staff at HMP Hollesley Bay continued to pack and distribute the canteen. The entire canteen service had been handed over to DHL at the end of August and the systems were still bedding in, although staff at Hollesley Bay told us that the transition had been reasonably successful. However, it took nearly two weeks for money from refunds and replacement items to be put in young people's accounts, which was unacceptable.
- 7.15 Canteen sheets were distributed to young people every Thursday, with the amount they had in their spending account recorded on the top. They were collected each Friday and the orders were delivered to Warren Hill a week later and distributed to young people over the weekend. Although young people received a free reception pack, if they missed the canteen day, they could wait up to two weeks for an opportunity to buy goods from the canteen list. However, they could buy and immediately receive a second good-sized reception pack worth £4 at a cost of £2.50.
- 7.16 The transition to a new canteen provider had offered some benefits, including an increased product list. In our survey, 62% of young people said the shop sold a wide enough range of products, which was significantly better than the comparator of 38% and an improvement since the previous inspection. The shop was a regular agenda item at young people's consultation meetings where complaints and suggested products to be placed on the list were discussed. Young people were kept informed of changes relating to the new provider.
- 7.17 The list provided a range of popular and cultural foods and a good range of religious artefacts. Fruit was also available. Canteen staff told us that the price of some items had increased since the change of contract, for example rosary beads had increased from 50p to £1.15. Staff told us that only items from the national product list could be chosen and they could no longer source special items that young people had requested, such as halal sweets and do-rags for young people's hair.
- 7.18 Staff and young people expressed concerns about bullying in relation to canteen. Young people told us that the system for delivering the canteen worked well, but that some young people were being bullied to order items for others. In our survey, 10% of young people said they had had their canteen taken, which was significantly worse than the comparator of 3%. Efforts had been made to address the problems. Indelible ink had been used to mark canteen items of young people who were suspected of being bullied, which had enabled staff to challenge young people for having items in their cells which they had not bought.
- 7.19 Young people were encouraged to purchase catalogue items from their spending account which required them to save up for goods. In exceptional circumstances, young people were allowed to make purchases from their private cash if deemed necessary or in an emergency. This encouraged young people to manage their money.
- 7.20 A good range of catalogues was available, allowing young people to buy goods at a competitive price. A 50 pence administration charge was applied to catalogue orders, which we were told would increase when the catalogue service was handed over to DHL. This charge was unacceptable.

Recommendations

- 7.21 Young people should receive a refund within 48 hours when a mistake has been made with their canteen.
- 7.22 The canteen list should not be restricted to the national product list and should reflect the reasonable needs of young people and source special items such as halal sweets and do-rags for young people's hair.
- 7.23 Young people should not be charged an administration fee to buy items from the catalogue.

Section 8: Resettlement

Strategic management of resettlement

Expected outcomes:

All areas of the establishment demonstrate a commitment to resettlement which ensures that children and young people are well prepared for release into the community. The resettlement strategy is informed by and developed in consultation with children and young people. Strategic partnerships, and YOTs in particular, plan for and provide timely access to resettlement opportunities for all children and young people on their release and, where appropriate, prior to release through the use of ROTL.

8.1 Resettlement was managed effectively. There were good relationships with community- based youth offending teams. There was an appropriate resettlement policy and the resettlement policy committee was well attended and served its function. However, there were no community representatives. A needs analysis had been carried out, but the results had not been fully used to inform the development of the resettlement policy. Good use was made of release on temporary licence. There was considerable scope to make better use of the exit survey. The absence of a pre-release course was a weakness.

8.2 An up-to-date resettlement policy had been produced, which was based on the pathway model and informed by other appropriate guidance, such as Every Child Matters. The case management team was responsible for implementing the resettlement policy and implementation was monitored and reviewed at the bi-monthly resettlement policy meeting. This forum was chaired by the deputy governor and was well attended, with representatives from all the main areas of the establishment. However, there were no community representatives. The meetings were used to share information among staff and discussions focussed on promoting the use of release on temporary licence (ROTL) and the difficulty in obtaining suitable accommodation for young people prior to release.

8.3 The agenda for the resettlement policy committee followed the resettlement pathway format, which made it easier to review progress against goals. A needs analysis had been carried out by the establishment psychology department in July 2009, based on information obtained from Asset documents. The data which had been collated had been presented in a descriptive format, but it was not clear how the policy would address the identified needs.

8.4 Exit surveys had recently been issued to young people who were being discharged to try to determine their perspective on the services delivered at the establishment, but the response rate had been less than 10%. There had been no other consultation with young people as part of the development of the resettlement policy.

8.5 There were effective strategic links with community youth offending teams (YOTs). The deputy governor met the regional YOT manager regularly. The quarterly detention and training order forum, at which community and establishment YOT managers met, continued to provide an effective way of sharing information and resolving difficulties.

8.6 The ROTL policy had been updated in February 2009 to give ROTL a higher priority and promote an increase in its use. About 20 young people had been released on temporary licence in July 2009, and this had increased to 30 in August. There was a good range of

opportunities for temporary release, including town visits, college interviews and work placements. Use of ROTL was highlighted during the induction programme and in the training planning procedures to motivate young people.

- 8.7 E-Asset had been introduced across the establishment during the previous year. Almost 80% of cases were now recorded electronically, which had resulted in improvements to the information flow between the establishment and community YOTs.
- 8.8 The multidisciplinary case management model, which had been established since the previous inspection, was not yet fully embedded, but there were signs that this more integrated approach was encouraging closer working relationships between the discipline staff and the YOT workers in the team.
- 8.9 The absence of a pre-release course was a weakness in the overall resettlement strategy.

Recommendations

- 8.10 Efforts should be made to encourage relevant voluntary, statutory and community organisations to become members of the resettlement policy committee.
- 8.11 The needs analysis should be used to inform the allocation of resources and delivery of resettlement services and should be extended to cover all the resettlement pathways.
- 8.12 Young people should be consulted as part of an ongoing review of the resettlement pathways.
- 8.13 All young people should have the opportunity to attend a pre-release course before they are discharged.

Training planning and remand management

Expected outcomes:

Planning for a child or young person's release starts upon arrival. All children and young people contribute to the development of their own training or remand management plan, which is based on an individual assessment of risks and needs. This plan is a product of collaboration between the establishment, the young person, their parents or carers and their youth offending team. The plan is regularly reviewed and implemented throughout and after their time in custody to ensure a seamless transition to the community.

8.14 Planning arrangements were managed efficiently, the needs of most young people were adequately met through the planning process and young people felt involved. However, the quality of the reviews we observed was inconsistent. The range of interventions available to young people was relevant, but needed to be extended. There was no provision on the Warren Hill site to meet the distinctive needs of young people serving long sentences. The measures taken to deal with MAPPA (multi-agency public protection arrangements) cases were sound, but there were no systematic procedures for monitoring and review.

- 8.15 Two thousand training planning review boards had been held over the previous year and most reviews had taken place within the required timescales. Reviews were held in offices on the units which were suitable for the purpose, but noise from the units could be distracting.

- 8.16 The reviews were chaired by members of the casework department. This team had been set up in November 2008 and consisted of three officers, who wore civilian clothes and worked office hours, and three YOT workers. All young people were allocated a caseworker, who dealt with all aspects of the planning process, including helping young people to prepare for their meeting and ensuring that referrals arising from the discussions were followed up. The caseworkers used e-Asset for all their planning work.
- 8.17 All the remand cases were handled by a specialist YOT worker. At the time of the inspection, there were 33 young people on remand. The initial focus of work with young people on remand was to try to obtain bail. Subsequently, the process was similar to that for sentenced young people, although there were tighter deadlines for the initial meetings. Remand meetings usually involved the establishment and community YOT workers and the young person.
- 8.18 The standard of planning meetings which we observed was varied. Some reviews were very well run, purposeful and covered all relevant areas. At some meetings, young people were successfully involved in the decision-making process. Other reviews were less well organised and less effective in involving young people. Senior managers attended 10% of the meetings to try to create more consistency and the result of these checks was fed back to the staff who had chaired the reviews.
- 8.19 Pre-set targets were initially given to every young person and modified at subsequent reviews according to the young person's personal circumstances. The revised targets which we examined were reasonably individualised. There were difficulties getting specialist departments to contribute up-to-date reports for the planning meetings using the e-Asset system.
- 8.20 Personal officers attended most planning meetings, but the quality of their contributions varied. They were generally unfamiliar with the e-Asset process and tended not to use it. This restricted their knowledge of the young people and hindered the work that they did on the units, because copies of the training plan targets were no longer held on wing files. Initial reviews were usually attended by guidance staff and a representative from the young people's substance misuse service. Family members attended in about 30% of cases. Establishment staff regarded it as the responsibility of the external YOT to ensure that family members were encouraged and supported to attend reviews, although we were told of cases where prison staff had picked up family members from the railway station to enable them to reach the establishment on time. The family link worker provided practical advice to family members who had difficulty travelling to the prison to attend reviews.
- 8.21 We received mixed reports in our discussion groups from young people about their experience of the planning process. In our survey, 70% of young people said they were involved in the development of their training plan and 83% said they understood the targets, which were significantly better than the respective comparators of 55% and 73%.
- 8.22 Staff from the establishment did not attend first reviews in the community.
- 8.23 The quality of pre-release planning at reviews varied and a few young people were discharged with no prior address (see pathways section).
- 8.24 If young people were transferring to an adult establishment, this was discussed at the planning meetings. We were told that, in some cases, staff from the receiving establishment attended a handover meeting to facilitate a smooth transfer.
- 8.25 All young people had their MAPPA status screened by the YOT manager on admission. Identified cases were reviewed and monitored at the monthly public protection forum, which

was chaired by the head of security and operations and attended by staff from all the residential units and the safeguarding and psychology departments. All new admissions, including remands, were considered at the meeting and each of the MAPPA level 2 and 3 cases were regularly reviewed. When MAPPA 2 or 3 cases were discharged, staff did not attend reviews in the community or submit reports. There was no procedure for monitoring or reviewing public protection cases.

- 8.26 There were no additional facilities or special services to meet the needs of young people serving indeterminate sentences or sentences longer than detention and training orders. The resettlement policy did not mention them as a group with specific needs.
- 8.27 A reasonably wide range of interventions was available to young people. Referrals were made through the training planning process and were based on a balanced consideration of need, risk and time left to serve. JET (juvenile estate thinking), which was an established accredited programme, received consistently high audit scores, with about 30 completions annually.
- 8.28 The Access course, which was not accredited, was delivered four times a year, with eight young people taking part in each course. It was a problem-solving course, consisting of 11 sessions, to help young people who were struggling to cope with custody. A victim awareness course was scheduled to start in September 2009. There was no intervention to deal with anger management, which had been identified as a need by the establishment psychologists.

Recommendations

- 8.29 Relevant departments should supply written reports for planning meetings using e-Asset when they are unable to attend.
- 8.30 Personal officers should receive training in the use of e-Asset.
- 8.31 A representative from the establishment should attend the first post-release review in the community.
- 8.32 A representative from the establishment should attend any MAPPA review of serving young people classified as level 2 or 3.
- 8.33 Public protection cases should be properly monitored and reviewed.
- 8.34 An anger management course should be introduced.

Good practice

- 8.35 *Senior managers attended 10% of training planning meetings to try to create more consistency and the results of these checks were fed back to the staff who had chaired the reviews.*

Substance use

Expected outcomes:

Children and young people with substance-related needs are identified at reception and receive effective support and treatment throughout their stay in custody, including pre-release planning.

All children and young people are safe from exposure to and the effects of substance use while in the establishment.

- 8.36 The drug strategy did not include alcohol and a recently completed needs analysis had not influenced service provision. There were good clinical services and detoxification was available, although young people requiring opiate maintenance were transferred to another establishment. Smoking cessation support and nicotine patches were available. The young people's substance misuse service delivered a full range of services, working closely with other departments. Group sessions were delivered very well. Drugs were not widely available in the establishment, as demonstrated by a 0% mandatory drug testing rate. Testing times were heavily weighted towards the weekends and voluntary drug testing facilities were limited.
- 8.37 The drug strategy team met quarterly with good representation from across the establishment. There was an up-to-date drug strategy, although it did not address alcohol.
- 8.38 A needs analysis had been completed in June 2009, which looked at the range and frequency of drug use among young people. There was no further written analysis or discussion of the findings and no evidence that the needs analysis had influenced the strategic approach to substance misuse. Targets were set by the young people's substance misuse service (YPSMS) central office and the interventions and substance misuse group (ISMG) as part of the Youth Justice Board (YJB) national specification for treating young people with substance misuse problems.
- 8.39 The main targets for 2009/10 were being achieved. 475 initial assessments had been completed within five days of reception and 90% of young people would have completed all goals in their care plans on release from custody.
- 8.40 Initial screening was completed by healthcare nurses. Young people who presented with non-clinical drug and alcohol problems were referred to the YPSMS team, who conducted an initial assessment within five days of arrival. This included the completion of consent and competency assessment forms. Full YPSMS assessments were conducted within 10 days of arrival.
- 8.41 Young people presenting with clinical needs were seen by the specialist substance misuse nurse in reception following the initial healthcare screening and referral. The healthcare team was well qualified to treat young people with clinical substance misuse problems. Two GPs shared the clinical provision, with out-of-hours, on-call cover provided by the local primary care trust provider. Both the GPs had achieved a Royal College of General Practitioners certificate in substance misuse treatment, level 1. The substance misuse nurse had been trained in the treatment of dual diagnosis.
- 8.42 In the previous six months, there had been only one post-detoxification reception and no other young people had required detoxification in that period. If an opiate-dependent young person arrived needing detoxification, he would be given a standard treatment regimen according to Department of Health clinical guidelines. All protocols and procedures had been well arranged and properly documented. A similar approach was adopted for alcohol detoxification.
- 8.43 More complex detoxification or maintenance cases, including young people requiring methadone, were not accepted at the establishment and were transferred to the inpatient facility at HMP/YOI Feltham.

- 8.44 Young people, their parents and carers and any community treatment providers were consulted, where possible, about clinical and psychosocial treatment and were involved in 48-hour and seven-day reviews.
- 8.45 Young people undergoing detoxification treatment were located on the Butley induction unit for at least 48 hours for close clinical observation. YPSMS workers visited them each day to provide psychosocial support. If there were no complications, young people were transferred to normal locations once they had completed their induction programme.
- 8.46 There were written protocols for information sharing and joint working between the healthcare department, the substance use nurse and the YPSMS. A substance misuse interventions and treatment group provided an excellent forum for coordinated care planning and information exchange. The group was attended by healthcare, the child and adolescent mental health service, education, YPSMS and the substance misuse nurse.
- 8.47 The YPSMS delivered substance misuse education to all young people. All interventions reflected the YJB's three-tiered approach of universal, targeted and specialist.
- 8.48 All young people completed the substance misuse awareness programme shortly after their arrival. The YPSMS and the education department worked together to plan and deliver all educational interventions.
- 8.49 Several drug awareness group programmes were provided for young people on the targeted and specialist tiers, according to their assessed need. These included cannabis, alcohol, stimulants, substance misuse and parenting, healthy living (co-facilitated by PE staff) and smoking. An innovative course called substance misuse awareness for Muslims was co-facilitated by the Muslim chaplain and covered Qur'an teachings about drug use.
- 8.50 We observed lively and well facilitated group sessions, using excellent materials which engaged and challenged young people.
- 8.51 One-to-one structured sessions using workbooks were provided to help young people learn about the dangers of drug dealing. Each substance, including tobacco, was covered separately and the sessions were co-facilitated by the substance misuse nurse. The nurse also delivered a four-week smoking cessation programme, using nicotine patches.
- 8.52 Hepatitis B immunisations were provided by the substance misuse nurse, who was also responsible for sexual health awareness. These health promotion activities were not organised in conjunction with any other departments.
- 8.53 Voluntary drug testing (VDT) was available for young people who requested it. 120 compacts were in place and 180 tests were conducted each month. There were no dedicated VDT facilities and testing was carried out in cells using mobile testing kits.
- 8.54 The mandatory drug testing (MDT) random positive rate had been 0.9% from March to August 2009, with a target of 6%. We calculated that 64% of MDTs were conducted at the weekend, which gave a degree of predictability to random testing.
- 8.55 Over the same period, there had been 17 drug, alcohol and tobacco finds numbering four, one and 12 respectively.
- 8.56 Rub-down searches were used prior to testing. There was no strip-searching.

Recommendations

- 8.57 The drug strategy should be updated to include alcohol services, action plans and performance measures.
- 8.58 There should be dedicated VDT facilities on the units and the practice of in-cell testing should cease.
- 8.59 The MDT programme should be adequately resourced to undertake the required level of testing proportionately across the week and weekend to ensure that an unpredictable pattern of testing remains as a deterrent to drug use.

Resettlement pathways

Expected outcomes:

The individual resettlement needs of children and young people are met through multi-agency working which promotes their successful reintegration at the end of their time in custody.

- 8.60 Securing accommodation for young people prior to their release was a problem and more needed to be done to provide specialist support. Young people achieved well in education and most left with an education placement to go to. Connexions support was inadequate. Young people's healthcare needs were properly planned prior to release. The family service workers gave much needed support for young people who had children of their own. Financial advice for young people who needed it was ad hoc. There were effective community links for the small number of young people who needed ongoing support with substance use problems.

Pathway One: accommodation

- 8.61 Four young people had been released in the previous nine months with no accommodation secured in advance of their release. Staff told us that it was a common problem with young people who had experienced a series of unsuccessful accommodation situations previously. The issue was regularly discussed at the resettlement committee. Caseworkers were assertive with community YOT workers in trying to obtain suitable accommodation for young people, but they were not always successful. In these circumstances, the external YOT worker usually collected the young person at the gate and accompanied him to his home area to try to arrange an emergency placement. There was no specialist housing advice available to young people prior to their release. In our survey, 32% of young people said they thought they would have difficulty finding accommodation on release. Only 52% of young people in our survey said they knew who to contact to get help with finding accommodation.

Pathway Two: education, training and employment

- 8.62 Most young people left the establishment with some form of nationally recognised qualification and records indicated that 93% of young people left with an education placement to go to. There was good use of ROTL for education appointments such as college interviews, job placements, displays for the raptor project and work experience at the local horse centre. Representation by education staff at training planning meetings was insufficient to ensure that the young people's education programme was kept under review as part of their overall

progress and it left a gap in pre-release planning. The Connexions service liaised with community YOTs as far as they were able to with limited resources, but the extent of the Connexions service was insufficient to meet the needs of the population.

Pathway Three: mental and physical health

- 8.63** Young people attended a discharge clinic the week before they were due to leave the establishment, when their healthcare needs were reviewed and a discharge letter produced. If young people had not been registered with a GP before coming to Warren Hill, they were given information on GPs near their discharge address, the number for NHS direct and information on how to use this service. If the young person had been taking prescribed medication, this was given to him at reception when he was leaving the establishment. Young people were also offered condoms.
- 8.64** Healthcare staff did not routinely attend training planning meetings and did not contribute to wider multidisciplinary planning for young people's discharge.
- 8.65** The child and adolescent mental health service (CAMHS) team tried to maintain contact with mental health services in the community. If a young person had been subject to a care programme approach in the community, the care coordinator was encouraged to maintain this role during the young person's custodial sentence. The Warren Hill CAMHS team provided day-to-day care and support and hosted review meetings to which community staff were routinely invited. The CAMHS team worked with the YOT and informed them if a young person on their caseload was not registered with a GP. We saw a good example of close working between the CAMHS team and community agencies when a young person was discharged who had an important medical appointment the following day. A YOT worker collected the young person from the establishment, took him to his accommodation and picked him up the following day to take him to the YOT offices where arrangements had been made for the consultant to see him.

Pathway Four: drugs and alcohol

- 8.66** The establishment had effective links with external agencies and 90% of final reviews were attended by community YOT workers, in spite of the fact that the majority of young people came from London boroughs. Community substance misuse workers were not regular attendees at training planning reviews.
- 8.67** A proposed video conferencing link with Hackney YOT would be used for interim and final reviews from November 2009.
- 8.68** The YPSMS prioritised attendance at training planning meetings and usually attended at least the initial training planning meeting and the pre-release training planning meeting. Case files showed effective and ongoing communication between community YOT workers, community substance misuse workers, and other substance misuse resettlement teams. The YPSMS liaised very actively with community YOT workers prior to the pre-release training planning meeting to establish reintegration plans in appropriate cases. However, community substance use workers were not regular attendees at pre-release meetings.

Pathway Five: children and families

- 8.69 The family service workers organised family visits every six weeks for two hours in the afternoon, for which young people on gold and silver levels of the regime were eligible. It was not acceptable to deprive young people on the basic level of the rewards and sanctions scheme of seeing their families at these events. Arts and crafts were displayed and there was a display by the establishment raptor project during the family visits and a meal prepared by young people. A ten-week Dads course was delivered to young fathers and fathers to be. At the time of the inspection, 10 young people were engaged in the course, two of whom had completed the course and were acting as peer support mentors.
- 8.70 Useful links had been established with parenting coordinators in Northamptonshire, Suffolk and Essex for young fathers returning to those areas requiring further support.

Pathway Six: finance, benefit and debt

- 8.71 The level of need among young people for assistance with finance, benefit and debt was unclear because there had been no analysis (see recommendation in resettlement strategy section). Advocates had provided a few young people with assistance in relation to finance, benefit and debt and limited input was provided by staff as part of an education module. In our survey, 32% of young people said they thought they would have a problem with money.

Recommendations

- 8.72 The establishment should secure the services of specialist housing advisers to assist with pre-release accommodation planning.
- 8.73 Representation by education staff at training planning meetings should be improved to ensure that individual progress in education is kept under review and that pre-release planning for education, training and employment purposes is adequately covered.
- 8.74 Support from the Connexions service should be extended to ensure that the needs of the population are met.
- 8.75 Healthcare staff should be actively involved in training planning meetings and attend where relevant.
- 8.76 Young people on bronze level should be entitled to family visits.
- 8.77 All children and young people should be given sufficient advice and support on how to manage their money.

Section 9: The Carlford Unit

9.1 The Carlford Unit held young people who were serving indeterminate or long sentences, having been convicted of a serious offence, and they usually stayed for a significant period of time before being transferred to a young adult establishment. The accommodation was clean and tidy, although some areas were beginning to show signs of wear and tear. The unit was considered to be a safe place by young people. They had plenty of time out of their cell, but they said they were often bored and attributed this to the reduction in education provision. Young people enjoyed the education they had, teaching was good and many young people achieved substantial qualifications, but the range of vocational provision remained narrow. Interactions between staff and young people were generally positive, but there was scope to improve communication and personal officer work. Weekend family visits were relaxed and families said visits and family days were important to them. Training planning was good and young people were supported in making a smooth transition to a young offender institution at the age of 18 years. Release on temporary licence was used well. There was a lack of specific interventions and care planning to meet the needs of this high-risk and needy group of young people. This was a national as well as a local issue.

The national role of the Carlford Unit

- 9.2 The Carlford Unit was managed on a day-to-day basis by a principal officer, who also had duty management responsibilities at the Warren Hill site. The residential governor from the Warren Hill site had overall management responsibility and attended the unit frequently and the establishment governor was also a regular visitor and known to the young people.
- 9.3 The staff group consisted of two senior officers and 17 prison officers, two of whom were part time. The unit was always staffed by five officers, and at least one senior officer for the majority of the time, which was a higher staffing ratio than allocated to wings at the Warren Hill site. Night duties were undertaken by unit staff on a rota basis.
- 9.4 The unit had an operational capacity of 30, although the one double cell was rarely used by two young people and the number of young people held in the unit rarely exceeded 29. Spaces in the unit were filled quickly and it usually operated at its capacity, as was the case at the time of the inspection. Within its overall capacity, the unit had an agreement with the Youth Justice Board (YJB) to take a maximum of 10 young people serving indeterminate sentences and nine young people sentenced for committing sex offences.
- 9.5 Young people were not accepted on to the Carlford Unit straight from court. All young people had been transferred to the unit from other secure establishments and a significant number came from secure children's homes or secure training centres. Young people came from a wide geographical area. At the time of the inspection, 13 young people came from London and 14 young people came from areas over 100 miles away. In our survey, only 35% of young people had received two or more visits in the previous month.
- 9.6 All young people held on the Carlford Unit had been convicted of serious offences and usually stayed for a significant period of time. The average stay of the last 11 young people to leave the unit had been approximately 14 months. At the time of the inspection, one young person had been on the unit for more than two years and a further seven had been there for between one and two years. There were eight young people serving an indeterminate sentence, including six who were serving mandatory life sentences for murder, and one of them had an

18-year tariff. Thirteen young people were serving determinate sentences of over four years. One young person was serving an 18-month Detention and Training Order, although it was rare to hold a young person serving this type of sentence.

Referral procedures and allocation criteria

- 9.7 Allocation criteria had been agreed between the unit and the YJB Placement and Casework Service, although the agreement was informal as it was unwritten. The main criterion was that the young person had at least a year of his sentence left to serve. The YJB had a designated caseworker for the unit, who decided which young people would be referred to the unit for assessment. All young people referred were interviewed by a unit member of staff before being accepted. During the interview, staff asked young people about their willingness to engage in education, their attitude to living alongside young people who were serving a sentence for sexual abuse and, in the case of young people who would live a significant distance from home, whether they would be able to receive visits from their family or carers. Final agreement on placement was made jointly by the head of the unit and the designated caseworker.
- 9.8 Historically, Carlford had not accepted young people with a history of serious behavioural problems while in custody, although we were advised by the YJB that there had recently been a greater willingness to accept more challenging young people. However, the YJB had agreed that the unit should only take young people assessed as low to medium risk to themselves and others because of the problems that might be encountered in managing concerted indiscipline due to the distance of the unit from the Warren Hill site.

Arrival in custody

- 9.9 New arrivals who had transferred from secure training centres and secure children's homes usually arrived in cars or people carriers and, in our survey, 26% of young people said that their transport was comfortable, which was significantly better than the comparator of 11%. However, only 57% of young people said they were treated well by the escort staff. Young people destined for Carlford went through the same reception procedures as all new arrivals. This included a strip-search despite having been strip-searched before leaving their previous establishment (see security section). Young people we spoke to reported that they had been treated well at Warren Hill reception and the majority said they did not have to wait long before they were taken over to the unit by a member of Carlford staff. One young man who arrived late at night had had to spend his first night on the Butley unit before being taken to Carlford the next day, but we were told by staff that this was a rare occurrence.
- 9.10 The induction programme was usually completed on a one-to-one basis by unit staff. Young people were given 'A guide to the Carlford Unit' as part of their induction, but it was out of date. Young people we spoke to were generally positive about their induction and 87% of young people in our survey said that their induction had told them everything they needed to know.

Environment

- 9.11 The unit was spacious and the general standard of accommodation was good, although some parts of the communal areas were showing signs of wear. The square design of the unit was not conducive to good staff supervision when all the young people were unlocked, but there were few fights or assaults. The residential and activity areas were adjacent, with cells situated off wide, carpeted corridors and opposite education classrooms or association and activity areas. There was a large dining area, where young people ate out for all meals and staff

usually sat with young people during mealtimes. The dining area was also used as an education and activity room at other times. There was a further activity room with a table tennis table, snooker and pool tables.

- 9.12 The communal areas were clean and well maintained and we observed young people being encouraged and helped by staff to keep these areas to an acceptable standard. There were well maintained and up-to-date notice boards throughout the unit and all essential policies were clearly displayed. There were examples of useful, age-appropriate notices on display, but some were not so useful.
- 9.13 There were two telephones with privacy hoods which young people told us they had ready access to. This was supported by our survey, in which 96% of young people said they were able to use the telephone every day, which was significantly better than the comparator of 49%.
- 9.14 The six showers on the unit had recently been refurbished. In our survey, 100% of young people said they could have a shower every day if they wanted to, which was significantly better than the comparator of 55%.
- 9.15 Cells were all single occupancy with toilets and washing facilities behind privacy screens. Young people were encouraged by staff to keep their cells tidy, which they did. Their only complaint about the cells was the temperature, which they said was often too cold or too hot. Young people could put personal items and photographs on notice boards and there was a well-publicised policy on what images were acceptable, which young people understood and said was enforced by unit staff. Young people on the gold level of the rewards and sanctions scheme had keys to their cells, although they said that staff did not allow them to stay in their cells for long periods during association. Young people on gold were allowed to spend time with a maximum of two other young people in their cell. They said that staff kept a close eye on them and they thought this was because of concerns about bullying and, on occasions, certain groups of young people had not been allowed to mix in each other's cells.

Personal officers

- 9.16 All young people were allocated a personal officer and a second officer who deputised when necessary. The majority of young people said they were introduced to their personal officer within a week of arrival and this was confirmed by our survey. It was evident in some case records that we examined that several days had passed before the young person's personal officer had introduced themselves and in one case this had been noted through a management check. We saw no reason for this delay, bearing in mind the good staffing levels. All officers had personal officer responsibilities and acted as primary personal officer to two or three young people. Five officers who had completed lifer training were allocated to young people on indeterminate sentences. Young people said they saw their personal officer frequently. In our survey, 83% of young people said that they met their personal officer at least once a week and 67% said they found their personal officer helpful. Those we spoke to gave various polarised accounts of their relationship with their personal officer, ranging from very good to poor. Young people could apply to see their personal files, but this was not actively encouraged.
- 9.17 Staff told us that they thought they had a key role in the lives of young people, particularly as there was no dedicated caseworker attached to the unit and the only service provided by Warren Hill caseworkers was to chair the three-monthly review boards and prepare specialist reports. The caseworker who chaired review boards said that meetings were arranged to allow personal officers to attend, which they always did, and she found their input helpful. Records

confirmed that there was a good level of attendance by personal officers at young people's review and planning meetings.

Relationships between staff and young people

- 9.18 In our survey, only 10% of young people said they had felt unsafe on the unit, which was significantly better than the comparator of 34%. During the Sunday association period, we observed some positive interactions between staff and young people. It was clear that young people were confident to approach staff with questions and requests and they received informed and courteous responses. Officers engaged with young people in activities, such as snooker and computer games, and there was a relaxed atmosphere on the unit.
- 9.19 Young people said that not all staff were approachable and helpful and they were selective in who they talked to. In our survey, only 44% of young people said there was a member of staff they could turn to with a problem, which was significantly lower than the national comparator of 71% and the Warren Hill comparator of 82%. One young person said 'it is because staff are too close to you, that you don't want to share your problems with them'. Some young people went further and said that they found the continual close proximity of staff overbearing and this became worse the longer they stayed on the unit. Some described unclear boundaries in their relationships with staff and some disrespectful staff behaviour and unfair treatment when they responded to staff with similar disrespect. There was a monthly young people's forum involving one or two young people representatives, the unit manager and another member of unit staff. There was a standard agenda covering all relevant issues. There were no whole unit meetings.
- 9.20 Unit files were completed regularly by a range of residential staff and gave a clear picture of the young person's life on the unit. Comments were balanced, although they focussed on factual reporting of daily events rather than providing insight into a young person's behaviour. New targets set by officers after a period of poor behaviour were formulaic and did not address the causes of the behaviour. A good example of this was seen in a young person who had just been refused his appeal against sentence, but this was not reflected in observations about his deteriorating behaviour. Another young person was worried about his parole hearing. The young person's behaviour had deteriorated at the same time, but possible links were not made and his behaviour targets included 'improve attitude in education and attend all lessons' and 'be polite and respectful to staff'.
- 9.21 Staff had been screened for their suitability to work on the unit, but had not received any additional training to work specifically with the population, which included young people who had committed the most serious offences and were considered to be high risk and therefore needed different management to the majority of the population in the juvenile estate.

Contact with families

- 9.22 Family visits took place for two hours on Saturday and Sunday afternoons. The small visits room on the unit was separate from the residential and activity areas and could accommodate five visits at a time. The area was well maintained and had been made as pleasant as possible, with colourful posters and fish tanks. There was a small space equipped for very young children and officers served refreshments throughout the visits. We observed five families visiting young people in family groups, which included at least one parent and usually younger siblings. There were two very young children, who appeared at ease and seemed to be enjoying the visit.

- 9.23 The atmosphere was relaxed and families could talk to each other without the intrusion of staff, who sat at an appropriate distance from the family groups. Young people were able to play with their younger brothers and sisters. We observed one young person having his hair plaited by his older sister for almost the whole of the visit session. All visitors said they found it easy to book visits and to book the free bus provided by the establishment from Ipswich rail station. Only one mother said she had occasionally not been able to book a visit because of a lack of space; another family had been able to visit every week.
- 9.24 Visitors said they always had the full two-hour visit. In our survey, 78% of young people said that visits started on time, which was significantly better than the national and Warren Hill comparators of 45% and 38% respectively. Families said that staff treated them courteously and that the rub-down search was conducted sensitively. Although none of the visitors we spoke to had occasion to speak to staff about a young person, they all felt that the majority of staff were approachable and they would be able to talk to them if necessary. All families said that unit staff were accessible on the telephone and responded positively to their calls.
- 9.25 Unit staff organised four family days a year and young people and parents we spoke to said they greatly appreciated and enjoyed the family days. The written feedback given by parents included comments such as 'To be able to share a meal with your child is a normal experience and greatly appreciated', and 'These days are extremely powerful and important to families. You can feel like a family again briefly. These days are a massive boost to family spirits, it is normal and simple activities which are lost, but these days help to facilitate and maintain family relationships'. Many families asked for more family days to be arranged.

Time out of cell and purposeful activity

- 9.26 Young people spent a good deal of time out of their cells, but they were not always purposefully occupied. Although the parents we spoke to during visits were generally very positive about the treatment and care their children were receiving at Carlford, there was a common concern about the recent reduction in education hours, which they felt disadvantaged their children. Young people also reported that they were becoming increasingly bored because of the reduction in constructive activity on the unit. It was apparent that neither young people nor parents had been told why education hours had been cut, or how they would occupy the time they had previously spent in the classroom. One young person said 'the whole point of Carlford is education and now they don't do it'. There was a strong feeling among a group of young people we spoke to that Carlford had ceased to have additional things to offer young people serving long sentences and had become the same as other prisons.
- 9.27 Education took place for three hours a day, alternating between morning and afternoon sessions. There was no structured programme to compensate for the reduction in education and training hours. Young people not involved in classes were out of their cells engaging in the same activities available to them on evening and weekend association. Staff had made efforts to find activities for the young people, but told us they were struggling to engage with them purposefully on a regular basis for such long periods and had been given no additional resources to fill the additional time. We observed young people sitting around doing very little during the core day. Young people told us that the most negative aspect of life on the unit was the reduction in education hours and the lack of vocational training. However, they said they enjoyed and valued the education they received, but complained that there was not enough variety. All education classes took place in suitable classrooms on the unit in small groups. The teaching we observed was of a good standard and young people engaged well in lessons. They made good progress and produced work of a high standard. They engaged well with

teachers and particularly enjoyed taking part in class discussions and expressing their point of view on a range of topics.

- 9.28 Many young people said they would like more opportunity to do vocational training and those who were involved in the horticultural project found it enjoyable and useful and gained valuable skills as a result. This ran for six hours a week and was accredited through the Open College Network. Some practical subjects such as art, media and cookery were now available, but the range of vocational provision remained narrow.
- 9.29 Young people were able to gain nationally recognised qualifications in a reasonable range of subjects. These included GCSEs, AS and A levels where young people were supported on an individual basis, dependent on the subjects they were taking. Many young people serving long sentences at Carlford gained substantial qualifications during their time there.
- 9.30 The Carlford Unit had its own gymnasium. There was a comprehensive PE programme which provided the opportunity for young people to participate in core PE for a minimum of three hours each week. The programme contained a good balance of individual and team-based activities. In addition, a good range of PE related qualifications were available, such as the community sports leaders award. PE provision also included work on drug and alcohol misuse. Sports and games officers had been employed to enable some additional enrichment PE to take place on most days. The young people from Carlford occasionally mixed with those at the main site for competitions such as football tournaments.
- 9.31 Between March and September 2009, eight young people had been released on temporary licence. The majority of licences had allowed young people to be involved in a range of community projects, but there was also authorisation for town visits and interviews. Carlford had good representation on young people's consultative groups which took place on the main Warren Hill site and representatives from the unit were released on temporary licence to make a 10 to 15 minute cycle ride to attend these meetings, which was an excellent way of encouraging young people to participate in the life of the whole establishment.
- 9.32 The grounds outside the unit were pleasant and, in our survey, 89% of young people said they could go outside for exercise every day, which was significantly better than the comparator of 22%.

Diversity and faith

- 9.33 We talked to a group of young people from black and minority ethnic groups who said they had not experienced racism at Carlford and that staff were very quick to challenge young people who were racially abusive.
- 9.34 At the time of the inspection, Muslim young people were celebrating Ramadan. They said that staff were very supportive and they were appreciative of the quality and quantity of food they received when they broke their fast in late evening. They felt they were able to practise and develop their faith and had good access to the Muslim chaplain and the world-faith room on the unit.
- 9.35 All faith services took place in the multi-faith room on the unit and young people from the Carlford Unit were not permitted to attend the chapel services at Warren Hill. In our survey of the Carlford Unit, only 54% of young people said it was easy or very easy to attend religious services, which was significantly worse than the comparator of 75% for Warren Hill.

- 9.36 Two young people from Carlford acted as unit representatives at both the establishment race equality action team and safeguarding meetings.

Resettlement and care planning

- 9.37 In the previous 12 months, 15 young people had left the unit. Three had been transferred for poor behaviour on the unit and one young person had moved to an establishment nearer his home. Seven young people had been transferred to a young offender institution for over 18 year olds and four had been released back to their communities. Good relationships had been developed with young adult establishments to assist young people who transferred and they generally made a smooth transition from the unit when they reached the age of 18 years.
- 9.38 The training planning process was managed well. We observed one training planning review chaired by the caseworker and attended by the young person and his father, who did not speak English, an interpreter, education representative, YOT worker and an officer substituting for the young person's personal officer. The personal officer had submitted a report and had discussed his comments with the young person the previous evening. The meeting was held in relaxed surroundings and was very well chaired. The proceedings were explained to the young person throughout and good efforts were made to include his father in the discussion. All those who attended spoke of the young person's achievement in reaching and remaining on the gold level of the rewards and sanctions scheme. He was disappointed that he had not succeeded in getting a job on the unit because he was 'bored' and 'had nothing to do'. Constructive suggestions were made to him and appropriate targets were set after a full discussion with the young person.
- 9.39 Although the unit held young people with very complex needs, there had been no unit needs analysis. The same range of offending behaviour programmes available to young people at Warren Hill was also available for the young people at Carlford. Some young people who had been convicted of a sex offence were undertaking specialist one-to-one work with the Lucy Faithfull Foundation, but the unit did not provide any other interventions to address the specific needs of this high-risk group of young people serving long sentences.
- 9.40 The Lucy Faithfull Foundation delivered an assessment and intervention programme for nine young people who had committed sex offences. Suitable young people were identified by the YJB's Placement and Casework Service and interviewed by a unit officer and, when possible, the Foundation therapist. Young people on the unit who had been accepted on the programme received weekly therapeutic sessions during their time on the unit. The Lucy Faithfull Foundation also attended at least three post-treatment visits to arrange continuity of treatment, either in the community or a young adult establishment when the young person left the unit.
- 9.41 The unit held a quarterly lifer management meeting chaired by the head of residence. Meetings were well attended and minutes indicated that the establishment was taking an effective multidisciplinary approach to young people serving indeterminate sentences. The personal officers of young people serving indeterminate sentences assisted in the risk and need assessments and the preparation of the planning documentation. This documentation, which was still used nationally across the young people's secure estate, was an out-of-date adult model and inappropriate for young people serving indeterminate sentences. The national training programme for staff to prepare these assessments had now ceased and internal arrangements had been made to train Carlford and Warren Hill staff.
- 9.42 Young people who had to demonstrate to the Parole Board a reduction in their risk of re-offending said that they were concerned about the lack of programmes to help them provide

that evidence. They were also concerned about what they perceived to be the lack of consistency and the varying recommendations made in their parole reports. One young person told us that he could not understand why the Lucy Faithfull worker who had worked with him regularly over a long period of time had recommended parole when the YOT caseworker who completed his parole report and who had only met him once had recommended that he was too high risk to be released. There was no lifer support group.

- 9.43 There were no regular forums between training planning reviews which took place at three monthly intervals for unit staff to share information about young people or review their progress. Young people did not have care plans to cater for all aspects of their individual needs which were not addressed in their training plan. Since all the young people on the Carlford Unit were serving long sentences for serious offences, individual care planning was not only achievable, but essential.
- 9.44 Overall, there was a need to review the role of the unit within an overarching national strategy for the management of young people serving long sentences for serious violent offences. We have been recommending this for a number of years.

Recommendations

- 9.45 Young people on the Carlford Unit should be introduced to their personal officer and/or their substitute within 24 hours of their arrival.
- 9.46 There should be whole unit consultation meetings involving a wide staff group and all young people located on the Carlford Unit so that all young people have the opportunity to raise issues and to improve overall communication.
- 9.47 There should be monthly family days specifically for young people on the Carlford Unit.
- 9.48 The establishment should complete a needs and risk analysis of young people serving long sentences for serious violent offences located on the Carlford Unit in order to develop a range of interventions, including offending behaviour programmes, education and vocational training and enrichment activities, to meet their specific needs.
- 9.49 There should be age-appropriate sentence planning documentation for young people serving indeterminate sentences.
- 9.50 There should be a support group for young people on the Carlford Unit who are serving indeterminate sentences.
- 9.51 Young people located on the Carlford Unit should have individual care plans.

Housekeeping points

- 9.52 The 'Guide to the Carlford Unit' should be updated.
- 9.53 A specific and age-appropriate guide relating to assessment and the preparation of parole reports should be produced for young people.

Section 10: Recommendations, housekeeping points and good practice

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

Main recommendation To the Youth Justice Board and NOMS

- 10.1 There should be a national strategy for the care and management of children and young people serving long sentences, including the role of the Carlford Unit. This should include referral criteria, staff recruitment, selection, training and staff supervision and support. (HP47)

Main recommendations To the Governor

- 10.2 Young people should not be routinely strip-searched. Strip-searching should only be carried out after a thorough risk assessment has identified serious risk of harm to the young person or others, and on the authorisation of a duty governor. (HP44)
- 10.3 Pending the new build, interim measures should be taken to ensure that young people who are new to custody are not co-located with young people separated for disciplinary reasons. (HP45)
- 10.4 A properly planned and coordinated programme of activities should be provided to supplement the education and vocational training programme to ensure that all young people have a full and purposeful day. (HP46)

Recommendation To the Youth Justice Board and NOMS

- 10.5 There should be age-appropriate sentence planning documentation for young people serving indeterminate sentences. (9.49)

Recommendations To the Youth Justice Board and the Governor

- 10.6 Age-appropriate written information about Warren Hill should be developed by the establishment and provided to young people at court by youth offending team court officers. (1.11)
- 10.7 Young people should not spend long periods in court cells and this should be monitored by the establishment and discussed at PECS meetings. (1.12)

Recommendations To the Governor

Courts, escorts and transfers

- 10.8 All young people should be offered a shower before and after attending court. (1.10)

- 10.9 The video link should be fully used, when appropriate, at the earliest opportunity to reduce the number of young people attending courts unnecessarily. (1.13)
- 10.10 All escort vans should carry snacks as well as water and these should be offered to young people at regular intervals. (1.14)
- 10.11 Any outstanding complaints raised by young people prior to discharge should be responded to. Complaints should be monitored to identify and respond to trends where appropriate. (1.15)

First days in custody

- 10.12 Cell-sharing risk assessments and vulnerability assessments should be conducted in private. (1.38)
- 10.13 First night risk management plans should be relevant to the young person's needs and identified risks, and managers should monitor quality through a robust system of quality assurance. (1.39)
- 10.14 Referrals should be made to support services in line with assessments and recorded in the history sheets. (1.40)

Residential units

- 10.15 CCTV should be installed in locations where supervision is otherwise difficult. (2.18)
- 10.16 Cell furniture should be promptly repaired or replaced as necessary. (2.19)
- 10.17 Lockable cupboards should be provided. (2.20)
- 10.18 All cells should have adequate ventilation. (2.21)
- 10.19 Residential staff should monitor the accumulation of personal items in cells to reduce the potential for bullying. (2.22)
- 10.20 A system for checking the timeliness of cell bell responses should be introduced. (2.23)
- 10.21 All staff should be made aware of the need to address the problem of shouting out of windows. (2.24)

Relationships between staff and children and young people

- 10.22 Staff should display their name as well as their staff number on their uniform. (2.33)

Personal officers

- 10.23 Accounts of personal officer contact in case files should be comprehensive and balanced and contain an ongoing appraisal of the young person's progress against individual targets. (2.43)

Safeguarding children

- 10.24 Healthcare and residential wing managers should ensure that there is always a nominated staff representative in attendance at all safeguarding committee meetings. (3.9)
- 10.25 The safeguarding team and residential units should develop a joint protocol outlining how young people safeguarding representatives should fulfil their role on the units and the support they should receive from unit staff. (3.10)
- 10.26 The safeguarding committee should monitor all injuries sustained by young people, however caused. (3.11)

Child protection

- 10.27 Attendance at the monthly child protection meetings should be monitored and absences followed up to improve attendance. (3.22)
- 10.28 Staff should report all concerns about young people with potential child protection implications through the establishment's child protection referral procedures or directly to the local authority.(3.23)
- 10.29 Young people should be given information about how to make a child protection referral directly to the local children's social care services. (3.24)
- 10.30 The scope and detail of the data provided for the child protection committee meetings should be expanded so that patterns and trends can be explored, particularly in relation to allegations against staff. (3.25)

Self-harm and suicide prevention

- 10.31 Data analysis in relation to incidents of self-harm should include an analysis of the reasons given by the young person for self-harming. (3.37)
- 10.32 Case managers should ensure that appropriate action is taken when links are made between self-harm and bullying. (3.38)
- 10.33 Staff observations should take place with agreed frequency, but should not be too predictable. (3.39)
- 10.34 The ACCT case manager should be consistent throughout the time an ACCT is opened. (3.40)
- 10.35 Staff participation at ACCT reviews should be planned, so that it is known who should attend and who should provide written contributions. (3.41)
- 10.36 Care maps should address the young person's particular difficulties and demonstrate that all sources of help and support have been explored, including family involvement. There should be clear lines of accountability for all agreed actions. (3.42)
- 10.37 Management checks and quality assurance reports should pay particular attention to the quality of care maps and this should be monitored by the safeguarding committee. (3.43)

- 10.38 Families/carers should be invited to ACCT reviews if agreed, after consultation with the young person, that they could offer valuable additional support. (3.44)

Bullying

- 10.39 The data analysis relating to bullying should be extended to include the type of bullying behaviour. (3.60)
- 10.40 Staff training needs in relation to the PIP procedures should be assessed and a suitable programme of training developed and delivered so that the procedures are understood and all staff are familiar with their individual responsibilities for implementation. (3.61)
- 10.41 A robust system of quality assurance should be introduced to ensure that the PIP procedures are being implemented properly and promptly. (3.62)

Diversity

- 10.42 There should be action plans covering the development of all aspects of diversity. (3.70)
- 10.43 All staff should be trained in all aspects of diversity. (3.71)
- 10.44 Managers should monitor attendance at the equal opportunities and disability liaison committee and take action to ensure that all designated representatives or substitutes attend meetings as required. (3.72)
- 10.45 Efforts should be made to engage community representatives on the equal opportunities and disability liaison committee. (3.73)
- 10.46 Young people should be recruited, selected and appropriately trained and supported to become members of the equal opportunities and disability liaison committee. (3.74)

Race equality

- 10.47 Perceptions of staff treatment and care should be regularly discussed with young people. (3.86)
- 10.48 Managers should monitor attendance at the REAT and take action to ensure that all designated representatives or substitutes attend meetings as required. (3.87)
- 10.49 Efforts should be made to engage more community representatives on the REAT. (3.88)
- 10.50 Young people who are REAT representatives should have the opportunity to meet as a group and be given guidance by the REOs and unit staff so that they are able to represent other young people more effectively. (3.89)
- 10.51 The REOs should be advised of all young people who have committed racially aggravated offences and work with case managers to develop appropriate individual management plans. (3.90)

Foreign nationals

- 10.52 The foreign nationals policy should be distributed to staff, who should receive training to ensure they are fully aware of the needs of foreign national young people. (3.101)
- 10.53 Sufficient time should be allocated to the foreign nationals coordinator to fulfil the role. (3.102)
- 10.54 Young people who are foreign nationals and immigration detainees should be properly identified so that service provision can be targeted. (3.103)
- 10.55 Young people who are foreign nationals should be provided with information about their immigration status in their own language. (3.104)
- 10.56 There should be regular contact with accredited, independent immigration advice and support agencies with an appropriate specialism for issues relating to children. (3.105)
- 10.57 Interpretation services should be used regularly for non-English speaking young people, particularly in relation to personal officer work and to translate important notices and written information. (3.106)
- 10.58 Support groups and peer support mentors should be made available to foreign national young people. (3.107)

Disability

- 10.59 There should be written assessments of young people with disabilities which should be available to all staff in contact with young people. (3.115)
- 10.60 All young people with disabilities should have care plans to ensure that the support they require is delivered. (3.116)

Religion

- 10.61 All staff should be trained in religious diversity and the way this interacts with cultural and racial identities. (3.121)

Sexual orientation

- 10.62 Strategies for preventing and dealing with discrimination on the basis of sexual orientation should be in operation. (3.124)

Contact with the outside world

- 10.63 All young people should be entitled to at least one visit each week and there should be no upper limit set on the number of visits a remanded young person is entitled to. (3.140)
- 10.64 There should be an analysis of why the take up of visits is so low, to identify which young people are not receiving visits, and referrals should be made to the family services team to facilitate more contact with their families. (3.141)

- 10.65 Frequent and regular feedback of visitors should be sought through surveys, feedback forms and comments books and appropriate action should be taken as a result of the feedback. (3.142)
- 10.66 Families using the bus service should not be required to leave the visits session early to return to the train station. (3.143)
- 10.67 Young people on the bronze level should have daily access to telephones. (3.144)
- 10.68 Young people should be made aware of when they can make a welfare telephone call and staff should record the details of welfare calls that have been facilitated. (3.145)

Applications and complaints

- 10.69 The complaints boxes should be emptied by a non-uniform member of staff. (3.156)
- 10.70 There should be a monthly analysis of complaints to identify patterns and trends. This management information should be used appropriately to identify areas for improvement. (3.157)

Legal rights

- 10.71 There should be trained legal services and bail information staff. (3.165)
- 10.72 All young people should be able to contact their legal advisers free of charge. (3.166)
- 10.73 The library should stock appropriate legal reference materials and details of specialist solicitors, including immigration lawyers. (3.167)

Health services

- 10.74 A strategy focussing on the health needs of young people should be developed. (4.47)
- 10.75 Health services should be delivered in an environment that is consistent with the promotion of health and wellbeing, has appropriate infection control facilities and provides appropriate levels of privacy and confidentiality for young people. (4.48)
- 10.76 When translation is required for healthcare services, this should be provided by a professional service, either by telephone or a visiting translator. Other young people should not be used for this purpose. (4.49)
- 10.77 A suitably designed and equipped dental surgery and decontamination room should be included in the plans for the new healthcare block. (4.50)
- 10.78 A full dental surgery inspection should be carried out by or on behalf of the PCT. (4.51)
- 10.79 There should be an information-sharing protocol between healthcare staff and other disciplines within the establishment. (4.52)
- 10.80 Primary mental health nurses should be recruited as soon as possible. (4.53)

- 10.81 A skill mix review should be carried out to ensure there are sufficient nurses in post with appropriate skills and experience to deliver the required child-centred service. (4.54)
- 10.82 Nurse-led clinics, including those for young people with life-long conditions, should be run by nurses with appropriate training and experience. (4.55)
- 10.83 A defibrillator should be available on the Carlford Unit. (4.56)
- 10.84 There should be a patient forum for young people to meet healthcare staff. (4.57)
- 10.85 The NHS complaints system should be made accessible and age appropriate. (4.58)
- 10.86 There should be a clear policy on the assessment of young people's capacity to give consent for healthcare treatment and how consent should be obtained. (4.59)
- 10.87 Young people's GPs and other relevant care agencies should be contacted with appropriate consent at the start of custody, for relevant information to ensure continuity of care. (4.60)
- 10.88 Following reception screening, a further health assessment should be carried out no longer than 24 hours after a young person arrives in custody, but not on the same night. (4.61)
- 10.89 GP clinics should allow for appropriate consultation and administration time. (4.62)
- 10.90 The waiting time for the sexual health clinics should be reduced. (4.63)
- 10.91 Young people reporting 'special sick' should be able to see a member of healthcare staff in private. (4.64)
- 10.92 Triage algorithms should be developed and introduced. (4.65)
- 10.93 Young people should have direct access to advice from appropriately trained pharmacy staff. (4.66)
- 10.94 All prescriptions should be legally written, including the quantity and date prescribed, and the signature of the prescriber. Medication should not be supplied beyond the authorised period of treatment. (4.67)
- 10.95 The use of general stock should be audited so that stock supplied can be reconciled against prescriptions issued. The responsible pharmacist should have professional control of the stock supplied and a dual labelling system should be introduced. (4.68)
- 10.96 The medicines and therapeutics committee should review the use of general stock. Patient-named medication should be used wherever possible and general stock should only be used if unavoidable. (4.69)
- 10.97 Patient group directives should be introduced to enable supply of more potent medication by the pharmacist and/or nurse, to avoid unnecessary consultations with the doctor. A copy of the original signed patient group directives should be kept in the pharmacy, and read and signed by all relevant staff. (4.70)
- 10.98 The special sick policy should be reviewed regularly by the medicines and therapeutics committee to ensure that all appropriate medicines can be supplied. (4.71)

10.99 Requests to see the dentist should be appropriately triaged, preferably by a member of the dental team. (4.72)

10.100 Young people experiencing dental pain should be seen at the next available session. (4.73)

10.101 New arrivals should receive initial dental screening to identify their oral health needs. (4.74)

Learning and skills

10.102 There should be sufficient vocational training opportunities to meet the needs of the population. (5.17)

10.103 Young people should be able to study both English and mathematics at GCSE level. (5.18)

10.104 Formal tutorial systems should be introduced. (5.19)

10.105 The library should open at weekends. (5.20)

Physical education and health promotion

10.106 Staff supervision in the gym showers should be improved. (5.28)

10.107 The facilities in the fitness suite on the Butley unit should be improved for young people who are risk assessed as unsuitable to attend the gym. (5.29)

10.108 Links with healthcare should be developed to ensure that PE programmes are available for young people with specific healthcare needs. (5.30)

Faith and religious activity

10.109 The chaplaincy team should establish and maintain links with faith communities outside the establishment. (5.40)

10.110 Chaplaincy classes and groups should be organised so that they do not coincide with other aspects of the regime. (5.41)

Time out of cell

10.111 The daily programme should be organised so that all young people have the opportunity to take an hour of outdoor exercise some time during the day. (5.47)

10.112 Recreational equipment and seating should be provided for the exercise yards. (5.48)

Behaviour management

10.113 Young people should be informed immediately, or as soon as practicable, when they are given warnings, which should be recorded in their wing file. (6.54)

10.114 Behaviour targets given to young people should be specific, realistic and measurable. (6.55)

- 10.115 Young people on the bronze level of the scheme should have daily access to the telephone and exercise in the open air and should have the opportunity to associate with others in the evening at least once a week. (6.56)
- 10.116 Young people should not be asked to indicate their plea prior to the hearing. (6.57)
- 10.117 Formal disciplinary procedures should not be used for minor infringements of the rules. (6.58)
- 10.118 Removal from unit should not be used as a punishment on adjudication. (6.59)
- 10.119 Young people should not be placed on report for actions related to acts or attempted acts of self-harm. (6.60)
- 10.120 Force should not be used to secure compliance. (6.61)
- 10.121 Young people located in the care and separation unit should be allowed to eat their meals out of their cells, subject to risk assessment. (6.62)
- 10.122 Young people should not be held in special accommodation after they have ceased to be violent and refractory. (6.63)
- 10.123 There should be properly managed and monitored cooling-off or time-out facilities in residential areas. (6.64)
- 10.124 The use of force monitoring and review group and the segregation monitoring and review group meetings should be multidisciplinary. (6.65)
- 10.125 The fabric of the safer cells should be modified to remove potential ligature points. (6.66)
- 10.126 Young people in segregation should be able to exercise in association subject to a risk assessment. (6.67)
- 10.127 All young people held in segregation should have a care plan. (6.68)
- 10.128 Young people should be held in separation for the shortest possible period. (6.69)

Catering

- 10.129 The quality and range of food provided should be improved. (7.11)
- 10.130 The promotion of healthy eating should be developed in conjunction with other departments in the establishment as part of a programme of promoting healthy lifestyles. (7.12)

Canteen/shop

- 10.131 Young people should receive a refund within 48 hours when a mistake has been made with their canteen. (7.21)
- 10.132 The canteen list should not be restricted to the national product list and should reflect the reasonable needs of young people and source special items such as halal sweets and do-rags for young people's hair. (7.22)

- 10.133 Young people should not be charged an administration fee to buy items from the catalogue. (7.23)

Strategic management of resettlement

- 10.134 Efforts should be made to encourage relevant voluntary, statutory and community organisations to become members of the resettlement policy committee. (8.10)
- 10.135 The needs analysis should be used to inform the allocation of resources and delivery of resettlement services and should be extended to cover all the resettlement pathways. (8.11)
- 10.136 Young people should be consulted as part of an ongoing review of the resettlement pathways. (8.12)
- 10.137 All young people should have the opportunity to attend a pre-release course before they are discharged. (8.13)

Training planning and remand management

- 10.138 Relevant departments should supply written reports for planning meetings using e-Asset when they are unable to attend. (8.29)
- 10.139 Personal officers should receive training in the use of e-Asset. (8.30)
- 10.140 A representative from the establishment should attend the first post-release review in the community. (8.31)
- 10.141 A representative from the establishment should attend any MAPPA review of serving young people classified as level 2 or 3. (8.32)
- 10.142 Public protection cases should be properly monitored and reviewed. (8.33)
- 10.143 An anger management course should be introduced. (8.34)

Substance use

- 10.144 The drug strategy should be updated to include alcohol services, action plans and performance measures. (8.57)
- 10.145 There should be dedicated VDT facilities on the units and the practice of in-cell testing should cease. (8.58)
- 10.146 The MDT programme should be adequately resourced to undertake the required level of testing proportionately across the week and weekend to ensure that an unpredictable pattern of testing remains as a deterrent to drug use. (8.59)

Resettlement pathways

- 10.147 The establishment should secure the services of specialist housing advisers to assist with pre-release accommodation planning. (8.72)

- 10.148 Representation by education staff at training planning meetings should be improved to ensure that individual progress in education is kept under review and that pre-release planning for education, training and employment purposes is adequately covered. (8.73)
- 10.149 Support from the Connexions service should be extended to ensure that the needs of the population are met. (8.74)
- 10.150 Healthcare staff should be actively involved in training planning meetings and attend where relevant. (8.75)
- 10.151 Young people on bronze level should be entitled to family visits. (8.76)
- 10.152 All children and young people should be given sufficient advice and support on how to manage their money. (8.77)

The Carlford Unit

- 10.153 Young people on the Carlford Unit should be introduced to their personal officer and/or their substitute within 24 hours of their arrival. (9.45)
- 10.154 There should be whole unit consultation meetings involving a wide staff group and all young people located on the Carlford Unit so that all young people have the opportunity to raise issues and to improve overall communication. (9.46)
- 10.155 There should be monthly family days specifically for young people on the Carlford Unit. (9.47)
- 10.156 The establishment should complete a needs and risk analysis of young people serving long sentences for serious violent offences located on the Carlford Unit in order to develop a range of interventions, including offending behaviour programmes, education and vocational training and enrichment activities, to meet their specific needs. (9.48)
- 10.157 There should be a support group for young people on the Carlford Unit who are serving indeterminate sentences. (9.50)
- 10.158 Young people located on the Carlford Unit should have individual care plans. (9.51)

Housekeeping points

First days in custody

- 10.159 Evaluation forms should be reviewed and analysed to improve the induction programme. (1.41)

Residential units

- 10.160 Graffiti should be removed from the shower areas. (2.25)

Self-harm and suicide prevention

10.161 Post-closure reviews should take place on time. (3.45)

Foreign nationals

10.162 The foreign nationals coordinator should have administrative support. (3.108)

Contact with the outside world

10.163 There should be a prison visitors' scheme. (3.146)

10.164 Refreshments should be available in the visitors' centre. (3.147)

Applications and complaints

10.165 There should be a clear audit trail for applications to ensure that they are dealt with promptly. (3.158)

Health services

10.166 The security of all keys to medication cupboards, including the controlled drugs cabinet, should be reviewed and regularly audited. (4.75)

10.167 There should be a telephone in the healthcare consultation room. (4.76)

10.168 The ripped seating in the healthcare waiting room should be replaced. (4.77)

10.169 The clutter should be removed from healthcare rooms. (4.78)

10.170 All rooms where healthcare is delivered should be thoroughly cleaned by a cleaner and a schedule of cleaning should be drawn up. (4.79)

10.171 The leaflet describing healthcare services should be updated and provided in a range of accessible formats suitable for young people. (4.80)

10.172 The pharmacist should make regular visits to the establishment during which a random selection of dispensed faxes should be compared against the original prescription forms. (4.81)

10.173 Maximum/minimum temperatures should be recorded daily for the drug refrigerators in treatment rooms and the pharmacy to ensure that thermolabile items are stored within the 2-8°C range. Corrective action should be taken where necessary and should be monitored by pharmacy staff. (4.82)

10.174 Regular date checks should be carried out on all medicines and testing strips and resuscitation kits. (4.83)

10.175 A rubber dam should be used when providing root canal treatment. (4.84)

10.176 Dental records should be stored in a locked, fire-proof cabinet. (4.85)

10.177 Envelope record cards should be used for dental records. (4.86)

Behaviour management

10.178 The notice of report should clearly state the evidence in support of the charge laid. (6.70)

10.179 The time that the hearing starts should be recorded on the adjudication record. (6.71)

10.180 Adjudication liaison officers should help staff to ensure that their evidence is clear, accurate and comprehensive. (6.72)

The Carlford Unit

10.181 The 'Guide to the Carlford Unit' should be updated. (9.52)

10.182 A specific and age-appropriate guide relating to assessment and the preparation of parole reports should be produced for young people. (9.53)

Examples of good practice

Safeguarding children

10.183 It was an excellent initiative for young people to act as safeguarding representatives and attend safeguarding committee meetings so that they could participate in discussions which were not confidential. (3.12)

Bullying

10.184 The establishment had listened to young people's comments about bullying 'hot spots' and had reviewed and changed the management of these areas. (3.63)

Race equality

10.185 The education department had developed an Open College Network course 'Prejudice and Discrimination', which was suitable for all young people, but targeted particularly at those who had demonstrated prejudiced or racist views and behaviour. Sixty-one young people had completed different levels of the course. (3.91)

Training planning and remand management

10.186 Senior managers attended 10% of training planning meetings to try to create more consistency and the results of these checks were fed back to the staff who had chaired the reviews. (8.35)

Appendix I: Inspection team

Nigel Newcomen	Deputy chief inspector of prisons
Fay Deadman	Team leader
Ian Macfadyen	Inspector
Ian Thomson	Inspector
Lucy Young	Inspector
Vinnett Percy	Inspector
Mandy Whittingham	Healthcare inspector
Paul Roberts	Substance use inspector
Martin Wall	Dental inspector
Peter Gibb	Pharmacy inspector
Martyn Rhowbotham	Ofsted inspector
John Bowman	Ofsted inspector
Anne Fragniere	Editor

Appendix II: Prison 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	138	78.86
Convicted but unsentenced	4	2.29
Remand	27	15.43
Detainees (single power status)	0	0
Detainees (dual power status)	0	0
Total	175	100

(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	4	2	1	1	3	2	1	14
16 years	3	2	1	1	2	8	1	18
17 years	10	3	4	3	9	6	9	44
18 years	2	1	2	0	1	4	4	14
Total	19	8	8	5	15	19	15	90

Plus 5 recalls

(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	0	0	0	0	0	0
16 years	0	1	2	0	2	5
17 years	0	0	8	3	2	13
18 years	0	0	0	0	1	1
Total	0	1	10	3	5	19

(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	0	0	0	0	0	0
16 years	0	0	1	3	2	6
17 years	0	0	1	2	1	4
18 years	0	1	0	1	0	2
Total	0	1	2	6	3	12

(v) Number OF INDETERMINATE SENTENCES by age

Sentence	Section 90 (HMP)	Section 53 (1)	Section 226 (DPP)	Recall	Total
Age					
15 years	1	0	0	0	1
16 years	4	0	1	0	5
17 years	3	0	4	3	10
18 years	0	0	0	1	1
Total	8	0	5	4	17

(vi) 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	3	0	1	0	0	0	4
16 years	3	4	1	0	0	0	8
17 years	7	6	7	1	0	0	21
18 years	0	0	0	0	0	0	0
Total	13	10	9	1	0	0	33

(vii) Main offence	Number of juveniles	%
Violence against the person	53	30.1
Sexual offences	15	8.3
Burglary	21	11.8
Robbery	40	22.6
Theft & handling	10	5.6

Fraud and forgery	0	0
Drugs offences	5	2.7
Other offences	30	16.9
Offence not recorded/ Holding warrant	1	0.5
Total	175	100

(viii) Age	Number of juveniles	%
15 years	20	11.43
16 years	42	24
17 years	94	53.71
18 years	19	10.86
Total	175	100

(ix) Home address	Number of juveniles	%
Within 50 miles of the prison	37	21.14
Between 50 and 100 miles of the prison	46	26.29
Over 100 miles from the prison	83	47.43
Overseas	0	0
NFA	9	5.14
Total	175	100

(x) Nationality	Number of juveniles	%
British	159	90.86
Foreign nationals	16	9.12
Total	175	100

(xi) Ethnicity	Number of juveniles	%
<i>White</i>		
British	119	68
Irish	0	0
Other White	4	2.28
<i>Mixed</i>		
White and Black Caribbean	8	4.57

White and Black African	0	0
White and Asian	0	0
Other Mixed	3	1.71
<i>Asian or Asian British</i>		
Indian	1	0.57
Pakistani	1	0.57
Bangladeshi	1	0.57
Other Asian	4	2.28
<i>Black or Black British</i>		
Caribbean	15	8.57
African	13	7.42
Other Black	6	3.42
<i>Chinese or other ethnic group</i>		
Chinese	0	0
Other ethnic group	0	0
Total	175	100

(xii) Religion	Number of juveniles	%
Baptist	0	0
Church of England	20	11.42
Roman Catholic	27	15.42,
Other Christian denominations	11	6.28
Muslim	12	6.85
Sikh	0	0
Hindu	0	0
Buddhist	1	0.57
Jewish	0	0
Other	0	0
No religion	104	59.43
Total	175	100

Appendix III: Summary of young people 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 17th August 2009, the population of young people at HMYOI Warren Hill was 159. Questionnaires were offered to 110 young people. The population of young people at the Carlford Unit was 29 and a questionnaire was offered to each young person.

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. In total, three respondents were interviewed at Warren Hill. No young people required interviews at the Carlford Unit.

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

At Warren Hill 104 respondents completed and returned their questionnaires. This represented 65% of children and young people in the establishment at the time. The response rate from the sample was 95%. One respondent refused to complete a questionnaire, three questionnaires were not returned and two were returned blank.

At the Carlford Unit 27 respondents completed and returned their questionnaires. This represented 93% of children and young people in the establishment at the time. Two respondents refused to complete the questionnaire.

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 the Warren Hill and Carlford Unit 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 all 16 male establishments since 2003.

Also included are statistically significant differences between the responses of young people surveyed at HMYOI Warren Hill and Carlford Unit in 2008 and the responses of this 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.

An additional document shows significant differences between the 2009 Warren Hill and Carlford Unit survey responses of young people from black and minority ethnic backgrounds and young people from white backgrounds; and significant differences between Muslim young people and non-Muslim young people.

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 is 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 has been weighted for comparison purposes.

Section One: About you

Q1	How old are you?	
	15.....	12%
	16.....	19%
	17.....	59%
	18.....	11%
Q2	Are you a British citizen?	
	Yes	95%
	No.....	5%
Q3	Is English your first language?	
	Yes	93%
	No.....	7%
Q4	What is your ethnic origin?	
	<i>White - British</i>	64%
	<i>White - Irish</i>	1%
	<i>White - Other</i>	5%
	<i>Black or Black British - Caribbean</i>	13%
	<i>Black or Black British - African</i>	5%
	<i>Black or Black British - Other</i>	1%
	<i>Asian or Asian British - Indian</i>	0%
	<i>Asian or Asian British - Pakistani</i>	1%
	<i>Asian or Asian British - Bangladeshi</i>	0%
	<i>Asian or Asian British - Other</i>	1%
	<i>Mixed Race - White and Black Caribbean</i>	4%
	<i>Mixed Race - White and Black African</i>	2%
	<i>Mixed Race - White and Asian</i>	0%
	<i>Mixed Race - Other</i>	1%
	<i>Chinese</i>	0%
	<i>Other ethnic group</i>	2%
Q5	Do you consider yourself to be Gypsy/Romany/Traveller?	
	Yes	8%
	No.....	92%
Q6	What is your religion?	
	<i>None</i>	50%
	<i>Church of England</i>	16%
	<i>Catholic</i>	14%
	<i>Protestant</i>	2%
	<i>Other Christian denomination</i>	8%
	<i>Buddhist</i>	1%
	<i>Hindu</i>	0%

<i>Jewish</i>	0%
<i>Muslim</i>	10%
<i>Sikh</i>	0%

Q7 Do you have any children?

<i>Yes</i>	8%
<i>No</i>	92%

Section Two: About your sentence

Q2 Are you sentenced?

<i>Yes</i>	80%
<i>No - unsentenced/on remand</i>	20%

Q3 What is the length of your sentence?

<i>Not sentenced</i>	20%
<i>Four months</i>	13%
<i>Six months</i>	5%
<i>Eight months</i>	6%
<i>12 months</i>	19%
<i>18 months</i>	5%
<i>Two years</i>	11%
<i>Two to four years</i>	7%
<i>Four years or more</i>	11%
<i>Indeterminate sentence for public protection (ISSP/DPP)</i>	2%

Q4 Approximately, how long do you have left to serve? (If you are serving life, please use the date of your next parole board.)

<i>Not sentenced</i>	22%
<i>Less than two months</i>	39%
<i>Two to six months</i>	17%
<i>Six months to one year</i>	13%
<i>One year or more</i>	10%

Q5 How long have you been in this establishment?

<i>Less than one month</i>	19%
<i>One to six months</i>	52%
<i>Six to 12 months</i>	16%
<i>One to two years</i>	12%
<i>Two years or more</i>	1%

Q6 How many times have you been in a YOI, secure children's home or secure training centre before?

<i>None</i>	30%
<i>Once</i>	27%
<i>Two to five</i>	37%
<i>More than five</i>	5%

Q7	Have you been to any other YOI during this sentence?	
	<i>None</i>	78%
	<i>One</i>	15%
	<i>Two</i>	3%
	<i>Three</i>	2%
	<i>More than three</i>	2%

Section Three: Courts, transfers and escorts

Q1	On your most recent journey, was the van clean?	
	<i>Yes</i>	53%
	<i>No</i>	31%
	<i>Don't remember</i>	15%
	<i>Not applicable</i>	1%

Q2	On your most recent journey, was the van comfortable?	
	<i>Yes</i>	9%
	<i>No</i>	87%
	<i>Don't remember</i>	2%
	<i>Not applicable</i>	2%

Q3	Did you feel safe on your most recent journey?	
	<i>Yes</i>	82%
	<i>No</i>	16%
	<i>Don't remember</i>	2%

Q4	On your most recent journey, were there any adults (over 18), or any young people of a different gender, travelling with you?	
	<i>Yes</i>	25%
	<i>No</i>	61%
	<i>Don't remember</i>	14%

Q5	On your most recent journey, how long did you spend in the van?	
	<i>Less than one hour</i>	5%
	<i>One to two hours</i>	28%
	<i>Two to four hours</i>	57%
	<i>More than four hours</i>	7%
	<i>Don't remember</i>	3%

Q6	On your most recent journey, were you offered a toilet break if you needed it?	
	<i>My journey was less than two hours</i>	33%
	<i>Yes</i>	13%
	<i>No</i>	50%
	<i>Don't remember</i>	4%

Q7	On your most recent journey, were you offered anything to eat or drink?	
	<i>My journey was less than two hours</i>	34%
	<i>Yes</i>	36%
	<i>No</i>	28%
	<i>Don't remember</i>	2%

Q8	On your most recent journey, how did you feel you were treated by the escort staff?	
	<i>Very well</i>	14%
	<i>Well</i>	48%
	<i>Neither</i>	25%
	<i>Badly</i>	4%
	<i>Very badly</i>	2%
	<i>Don't remember</i>	7%

Q9	When you left court or were transferred from another establishment, were you told that you would be coming to this establishment? (Please tick all that apply to you.)	
	<i>Yes, someone told me</i>	82%
	<i>Yes, I received written information</i>	3%
	<i>No, I was not told anything</i>	11%
	<i>Don't remember</i>	5%

Section Four: Your first few days here

Q1	How long were you in reception?	
	<i>Less than two hours</i>	82%
	<i>Two hours or longer</i>	6%
	<i>Don't remember</i>	11%

Q2	Were you seen by a member of healthcare staff in reception?	
	<i>Yes</i>	91%
	<i>No</i>	5%
	<i>Don't remember</i>	4%

Q3	When you were searched, was this carried out in an understanding way?	
	<i>Yes</i>	90%
	<i>No</i>	7%
	<i>Don't remember</i>	3%

Q4	Overall, how well did you feel you were treated in reception?	
	<i>Very well</i>	16%
	<i>Well</i>	64%
	<i>Neither</i>	14%
	<i>Badly</i>	3%
	<i>Very badly</i>	0%
	<i>Don't remember</i>	3%

Q5 When you first arrived here, did staff ask if you needed help or support with any of the following things? (Please tick all that apply to you.)

<i>Not being able to smoke</i>	57%	<i>Money worries</i>	20%
<i>Loss of property</i>	28%	<i>Feeling low/upset/needing someone to talk to</i>	41%
<i>Housing problems</i>	28%	<i>Health problems</i>	56%
<i>Needing protection from other young people</i>	30%	<i>Getting phone numbers</i>	53%
<i>Letting family know where you are</i>	64%	Staff did not ask me about any of these	9%

Q6 When you first arrived here, did you have any of the following problems? (Please tick all that apply to you.)

<i>Not being able to smoke</i>	45%	<i>Money worries</i>	8%
<i>Loss of property</i>	7%	<i>Feeling low/upset/needing someone to talk to</i>	15%
<i>Housing problems</i>	15%	<i>Health problems</i>	10%
<i>Needing protection from other young people</i>	3%	<i>Getting phone numbers</i>	25%
<i>Letting family know where you are</i>	17%	I did not have any problems	32%

Q7 When you first arrived here, were you given any of the following? (Please tick all that apply to you.)

<i>A reception pack</i>	84%
<i>The opportunity to have a shower</i>	32%
<i>Something to eat</i>	92%
<i>A free phone call to friends/family</i>	91%
<i>Information about the PIN telephone system</i>	60%
<i>Information about feeling low/upset</i>	45%
<i>Don't remember</i>	3%
I was not given any of these	1%

Q8 Within your first 24 hours here, did you have access to the following people or services? (Please tick all that apply to you.)

<i>Chaplain or religious leader</i>	55%
<i>Someone from healthcare</i>	79%
<i>Peer support/peer mentor/Listener/Samaritans</i>	23%
<i>The prison shop/canteen</i>	15%
<i>Don't remember</i>	7%
I did not have access to any of these	8%

Q9 Did you feel safe on your first night at this establishment?

<i>Yes</i>	83%
<i>No</i>	13%
<i>Don't remember</i>	4%

Q10	How soon after your arrival did you go on an induction course?	
	<i>I have not been on an induction course</i>	18%
	<i>Within the first week</i>	69%
	<i>More than a week</i>	5%
	<i>Don't remember</i>	7%

Q11	Did the induction course cover everything you needed to know about the establishment?	
	<i>I have not been on an induction course</i>	19%
	<i>Yes</i>	64%
	<i>No</i>	10%
	<i>Don't remember</i>	7%

Section Five: Daily life and respect

Q1	Can you normally have a shower every day if you want to?	
	<i>Yes</i>	92%
	<i>No</i>	7%
	<i>Don't know</i>	1%

Q2	Is your cell call bell normally answered within five minutes?	
	<i>Yes</i>	20%
	<i>No</i>	67%
	<i>Don't know</i>	13%

Q3	What is the food like here?	
	<i>Very good</i>	2%
	<i>Good</i>	10%
	<i>Neither</i>	35%
	<i>Bad</i>	36%
	<i>Very bad</i>	16%

Q4	Does the shop/canteen sell a wide enough variety of products?	
	<i>I have not bought anything yet</i>	3%
	<i>Yes</i>	62%
	<i>No</i>	32%
	<i>Don't know</i>	3%

Q5	How easy is it for you to attend religious services?	
	<i>I don't want to attend religious services</i>	19%
	<i>Very easy</i>	41%
	<i>Easy</i>	34%
	<i>Neither</i>	3%
	<i>Difficult</i>	0%
	<i>Very difficult</i>	0%
	<i>Don't know</i>	3%

Q6	Please answer the following questions about religion:			
		Yes	No	Don't know/N/A
	Do you feel your religious beliefs are respected?	54%	8%	38%
	Can you speak to a religious leader in private if you want to?	67%	0%	33%

Q7	Please answer the following about staff here:		
		Yes	No
	Is there a member of staff you feel you can turn to for help if you have a problem?	82%	18%
	Do most staff treat you with respect?	80%	20%

Section Six: Healthcare

Q1	What do you think of the overall quality of the healthcare?	
	<i>I have not been to healthcare</i>	9%
	<i>Very good</i>	19%
	<i>Good</i>	40%
	<i>Neither</i>	16%
	<i>Bad</i>	13%
	<i>Very bad</i>	2%

Q2	Is it easy to see the following people if you need to?			
		Yes	No	Don't know
	The doctor	52%	26%	22%
	The nurse	73%	16%	10%
	The dentist	19%	55%	26%
	The optician	18%	41%	40%
	The pharmacist....	28%	25%	46%

Q3	Have you had any problems getting your medication?	
	<i>I am not taking any medication</i>	58%
	Yes	8%
	No.....	33%

Q4	Please answer the following about alcohol:		
		Yes	No
	Did you have problems with alcohol when you first arrived here?	19%	81%
	Do you have problems with alcohol now?	3%	97%
	Have you received any help with alcohol problems in this prison?	25%	75%

Q5	Please answer the following about drugs:		
		Yes	No
	Did you have problems with drugs when you first arrived here?	42%	58%
	Do you have problems with drugs now?	5%	95%
	Have you received any help with drugs problems in this prison?	41%	59%

Q6	How easy is it to get illegal drugs here?	
	<i>Very easy</i>	8%
	<i>Easy</i>	8%
	<i>Neither</i>	5%
	<i>Difficult</i>	6%
	<i>Very difficult</i>	15%
	<i>Don't know</i>	58%

Q7	Do you feel you have any emotional or mental health problems?	
	<i>Yes</i>	17%
	<i>No</i>	83%

Q8	If you have emotional or mental health problems, are you being helped by any of the following people?	
	<i>I do not have any/ am not getting any help</i>	92%
	<i>Doctor</i>	1%
	<i>Nurse</i>	1%
	<i>Psychiatrist/psychologist</i>	5%
	<i>Counsellor</i>	5%
	<i>Other</i>	2%

Section Seven: Applications and complaints

Q1	Do you know how to make an application?	
	<i>Yes</i>	94%
	<i>No</i>	6%

Q2	Is it easy to make an application?	
	<i>Yes</i>	90%
	<i>No</i>	2%
	<i>Don't know</i>	8%

Q3	Please answer the following about applications:		
		<i>I have not made an application</i>	
		Yes	No
	Do you feel applications are sorted out fairly?	20%	58%
	Do you feel applications are sorted out promptly (within seven days)?	21%	47%
			22%
			32%

Q4 Do you know how to make a complaint?
 Yes 93%
 No 7%

Q5 Is it easy to make a complaint?
 Yes 84%
 No 0%
 Don't know 16%

Q6 Please answer the following about complaints:

	<i>I have not made a complaint</i>	Yes	No
Do you feel complaints are sorted out fairly?	33%	33%	35%
Do you feel complaints are sorted out promptly (within seven days)?	33%	34%	33%
Have you ever been encouraged to withdraw a complaint?	33%	13%	54%

Q7 Can you speak to the following people when you need to?

	Yes	No	Don't know
A peer mentor/peer support/Listener	45%	9%	46%
A member of the IMB (Independent Monitoring Board)	52%	8%	40%
An advocate (an outside person to help you)	41%	10%	49%

Section Eight: Rewards and sanctions, and discipline

Q1 What level of the rewards and sanctions scheme are you on?
Don't know what the rewards and sanctions scheme is 6%
 Enhanced (top) 35%
 Standard (middle) 50%
 Basic (bottom) 4%
 Don't know 4%

Q2 Do you feel you have been treated fairly in your experience of the rewards and sanctions scheme?
Don't know what the rewards and sanctions scheme is 6%
 Yes 63%
 No 21%
 Don't know 10%

Q3 Do the different levels of the rewards and sanctions scheme encourage you to change your behaviour?
Don't know what the rewards and sanctions scheme is 6%
 Yes 59%
 No 28%
 Don't know 7%

- Q4 Have you had a 'nicking' (adjudication) since you have been in this establishment?**
 Yes 55%
 No 45%
 Don't know..... 0%
- Q5 If you have had a 'nicking' (adjudication), was the process explained clearly to you?**
I have not had an adjudication 46%
 Yes 51%
 No 3%
- Q6 If you have been physically restrained (C & R), how many times has this happened since you have been in this establishment?**
I have not been restrained 65%
 Once..... 15%
 Twice..... 4%
 Three times 5%
 More than three times 11%
- Q7 If you have spent a night in the segregation/care and separation unit, how were you treated by staff?**
I have not been to the segregation unit 68%
 Very well 3%
 Well 5%
 Neither 14%
 Badly 4%
 Very badly 5%

Section Nine: Safety

- Q1 Have you ever felt unsafe in this establishment?**
 Yes 34%
 No 66%
- Q2 If you have ever felt unsafe, in which areas of this establishment do you/have you ever felt unsafe? (Please tick all that apply to you.)**
- | | |
|-------------------------------------|---|
| <i>Never felt unsafe</i> 71% | <i>At meal times</i> 6% |
| <i>Everywhere</i> 7% | <i>At healthcare</i> 3% |
| <i>Segregation unit</i> 3% | <i>Visit's area</i> 3% |
| <i>Association areas</i> 11% | <i>In wing showers</i> 18% |
| <i>Reception area</i> 3% | <i>In gym showers</i> 17% |
| <i>At the gym</i> 15% | <i>In corridors/stairwells</i> 7% |
| <i>In an exercise yard</i> 6% | <i>On your landing/wing</i> 9% |
| <i>At work</i> 3% | <i>In your cell</i> 3% |
| <i>At education</i> 12% | |

Q3 Has another young person or group of young people victimised you in this establishment? (E.g. insulted or assaulted you)

Yes 31%
 No 69%

Q4 If yes, what did the incident(s) involve/what were they about? (Please tick all that apply to you.)

<i>Insulting remarks (about you, your family or friends).....</i>	15%	<i>Because of drugs</i>	4%
<i>Physical abuse (being hit, kicked or assaulted).....</i>	12%	<i>Having your canteen/property taken.....</i>	10%
<i>Sexual abuse.....</i>	0%	<i>Because you were new here</i>	13%
<i>Because of your race or ethnic origin</i>	1%	<i>Because you are from a different part of the country</i>	3%
<i>Because of your religious beliefs ..</i>	1%	<i>Because of gang related issues.....</i>	5%
<i>Because you have a disability</i>	2%	<i>Because of my offence/crime.....</i>	2%

Q6 Has a member of staff or group of staff victimised you in this establishment? (E.g. insulted or assaulted you)

Yes 17%
 No 83%

Q7 If yes, what did the incident(s) involve/what were they about? (Please tick all that apply to you.)

<i>Insulting remarks (about you, your family or friends).....</i>	12%	<i>Because of drugs</i>	1%
<i>Physical abuse (being hit, kicked or assaulted).....</i>	4%	<i>Having your canteen/property taken.....</i>	3%
<i>Sexual abuse.....</i>	1%	<i>Because you were new here</i>	2%
<i>Because of your race or ethnic origin</i>	2%	<i>Because you are from a different part of the country</i>	1%
<i>Because of your religious beliefs ..</i>	2%	<i>Because of gang related issues.....</i>	1%
<i>Because you have a disability</i>	1%	<i>Because of my offence/crime.....</i>	2%

Q9 If you were being victimised who would you tell?

<i>No one</i>	40%	<i>Teacher/education staff.....</i>	6%
<i>Personal officer</i>	31%	<i>Gym staff</i>	5%
<i>Wing officer.....</i>	19%	<i>Listener/Samaritan/Buddy.....</i>	11%
<i>Chaplain</i>	11%	<i>Another young person here</i>	20%
<i>Healthcare staff</i>	4%	<i>Family/friends.....</i>	32%

Q10 Do you think staff would take it seriously if you told them you had been victimised?

Yes 46%
 No 28%
 Don't know..... 27%

- Q11 Is shouting through the windows a problem here?**
 Yes 45%
 No 51%
 Don't know 4%
- Q12 Have staff checked on you personally in the last week to see how you are getting on?**
 Yes 42%
 No 58%

Section Ten: Activities

- Q1 How old were you when you were last at school?**
 14 or under 50%
 15 or over 50%
- Q2 Please answer the following questions about school:**
- | | Yes | No | Not applicable |
|--|-----|-----|----------------|
| Have you ever been excluded from school? | 96% | 3% | 1% |
| Did you used to truant from school? | 82% | 16% | 2% |
- Q3 Do you currently take part in any of the following activities? (Please tick all that apply to you.)**
- | | |
|--|------------|
| Education | 84% |
| A job in this establishment..... | 19% |
| Vocational or skills training..... | 35% |
| Offending behaviour programmes..... | 18% |
| I am not currently involved in any of these | 10% |
- Q4 If you have been involved in ANY of the following activities, in THIS establishment, do you think they will help you when you leave prison?**
- | | Not been involved | Yes | No | Don't know |
|--------------------------------|--------------------------|-----|-----|------------|
| Education | 2% | 77% | 9% | 12% |
| A job in this establishment | 26% | 41% | 19% | 14% |
| Vocational or skills training | 20% | 57% | 11% | 13% |
| Offending behaviour programmes | 29% | 38% | 19% | 13% |
- Q5 Do you usually have association every day?**
 Yes 92%
 No 5%
 Don't know 2%
- Q6 How many times do you usually go to the gym each week?**
 Don't want to go 11%
 None..... 3%
 One to two times 54%
 Three to five times 22%
 More than five times 6%
 Don't know..... 4%

Q7	Can you usually go outside for exercise every day?	
	<i>Don't want to go</i>	5%
	Yes.....	30%
	No.....	60%
	<i>Don't know</i>	5%

Section Eleven: Keeping in touch with family and friends

Q1	Are you able to use the telephone everyday if you want to?	
	Yes.....	85%
	No.....	13%
	<i>Don't know</i>	2%

Q2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes.....	42%
	No.....	55%
	<i>Don't know</i>	3%

Q3	How easy is it for your family and friends to visit you here?	
	<i>Very easy</i>	10%
	<i>Easy</i>	34%
	<i>Neither</i>	17%
	<i>Difficult</i>	22%
	<i>Very difficult</i>	15%
	<i>Don't know</i>	2%

Q4	How many visits have you had, from family or friends in the last month?	
	<i>I don't get visits</i>	17%
	None.....	19%
	One.....	25%
	Two.....	26%
	Three.....	5%
	More than three.....	4%
	<i>Don't know</i>	3%

Q5	Do your visits usually start on time?	
	<i>I don't get visits</i>	17%
	Yes.....	38%
	No.....	32%
	<i>Don't know</i>	13%

Q6	How are you and your family/friends usually treated by visits staff?	
	<i>I don't get visits</i>	17%
	<i>Very well</i>	16%
	<i>Well</i>	33%
	<i>Neither</i>	16%
	<i>Badly</i>	0%
	<i>Very badly</i>	0%
	<i>Don't know</i>	19%

Section Twelve: Preparation for release

Q1	When did you first meet your personal officer?			
	<i>I still have not met him/her</i>			5%
	<i>In your first week</i>			52%
	<i>After your first week</i>			28%
	<i>Don't remember</i>			15%
Q2	How often do you see your personal officer?			
	<i>I still have not met him/her</i>			5%
	<i>At least once a week</i>			78%
	<i>Less than once a week</i>			16%
Q3	Do you feel your personal officer has helped you?			
	<i>I still have not met him/her</i>			5%
	Yes.....			73%
	No.....			21%
Q4	Do you have a training plan?			
	<i>Not sentenced</i>			20%
	Yes.....			62%
	No.....			11%
	<i>Don't know</i>			7%
Q5	Please answer the following about training plans:			
		<i>I don't have a training plan</i>	Yes	No
				<i>Don't know</i>
	Were you involved in development your training plan?	30%	49%	4%
	Do you understand the targets that have been set in your training plan?	31%	57%	1%
	Can you see your training plan when you want to?	31%	32%	12%
				26%
Q6	Has your YOT worker been in touch since you arrived at this establishment?			
	Yes.....			85%
	No.....			15%
Q7	Do you know how to get in touch with your YOT worker?			
	Yes.....			77%
	No.....			23%

Q8 Please answer the following about your release:

	Yes	No	Don't know
Have you had a say in what will happen to you when you are released?	52%	33%	15%
Are you planning on going to school or college after release?	69%	20%	11%
Do you have a job to go to on release?	16%	75%	9%

Q9 Do you know who to contact to get help with any of the following for when you leave? (Please tick all that apply to you.)

<i>Finding accommodation</i>	52%
<i>Getting into school or college</i>	69%
<i>Getting a job</i>	54%
<i>Help with money/finances</i>	38%
<i>Help with claiming benefits</i>	40%
<i>Continuing health services</i>	30%
<i>Opening a bank account</i>	46%
<i>Avoiding bad relationships</i>	29%
<i>I don't know who to contact</i>	17%

Q10 Do you think you will have a problem with any of the following when you leave? (Please tick all that apply to you.)

<i>Finding accommodation</i>	31%
<i>Getting into school or college</i>	27%
<i>Getting a job</i>	49%
<i>Money/finances</i>	33%
<i>Claiming benefits</i>	24%
<i>Continuing health services</i>	8%
<i>Opening a bank account</i>	5%
<i>Avoiding bad relationships</i>	22%
<i>I won't have any problems</i>	31%

Q11 Is there anything you would still like help with before you are released?

Yes	31%
No.....	58%
Don't know.....	11%

Q12 What is most likely to stop you offending in the future? (Please tick all that apply to you.)

<i>Not sentenced</i>	20%	<i>Having a mentor (someone you can ask for advice)</i>	9%
<i>Nothing it is up to me</i>	14%	<i>Having a YOT worker or social worker that I get on with</i>	20%
<i>Making new friends outside</i>	18%	<i>Having children</i>	23%
<i>Going back to live with my family</i> ..	23%	<i>Having something to do that isn't crime</i>	37%
<i>Getting a place of my own</i>	26%	<i>This sentence</i>	26%
<i>Getting a job</i>	43%	<i>Getting into school/college</i>	33%
<i>Having a partner (girlfriend or boyfriend)</i>	38%	<i>Talking about my offending behaviour with staff</i>	12%

Staying off alcohol / drugs 31% Anything else..... 8%

Q13 Do you want to stop offending?

Not sentenced..... 21%
Yes 70%
No..... 1%
Don't know..... 9%

Q14 Have you done anything, or has anything happened to you in this establishment, that you think will make you less likely to offend in the future?

Not sentenced..... 21%
Yes 42%
No..... 37%

Section One: About you

Q1	How old are you?	
	15.....	4%
	16.....	46%
	17.....	50%
	18.....	0%
Q2	Are you a British citizen?	
	Yes.....	100%
	No.....	0%
Q3	Is English your first language?	
	Yes.....	96%
	No.....	4%
Q4	What is your ethnic origin?	
	<i>White - British</i>	56%
	<i>White - Irish</i>	4%
	<i>White - Other</i>	0%
	<i>Black or Black British - Caribbean</i>	15%
	<i>Black or Black British - African</i>	11%
	<i>Black or Black British - Other</i>	0%
	<i>Asian or Asian British - Indian</i>	0%
	<i>Asian or Asian British - Pakistani</i>	0%
	<i>Asian or Asian British - Bangladeshi</i>	4%
	<i>Asian or Asian British - Other</i>	0%
	<i>Mixed Race - White and Black Caribbean</i>	11%
	<i>Mixed Race - White and Black African</i>	0%
	<i>Mixed Race - White and Asian</i>	0%
	<i>Mixed Race - Other</i>	0%
	<i>Chinese</i>	0%
	<i>Other ethnic group</i>	0%
Q5	Do you consider yourself to be Gypsy/Romany/Traveller?	
	Yes.....	0%
	No.....	100%

Q6	What is your religion?	
	<i>None</i>	50%
	<i>Church of England</i>	17%
	<i>Catholic</i>	0%
	<i>Protestant</i>	8%
	<i>Other Christian denomination</i>	8%
	<i>Buddhist</i>	0%
	<i>Hindu</i>	0%
	<i>Jewish</i>	0%
	<i>Muslim</i>	17%
	<i>Sikh</i>	0%

Q7	Do you have any children?	
	<i>Yes</i>	16%
	<i>No</i>	84%

Section Two: About your sentence

Q2	Are you sentenced?	
	<i>Yes</i>	100%
	<i>No - unsentenced/on remand</i>	0%

Q3	What is the length of your sentence?	
	<i>Not sentenced</i>	0%
	<i>Four months</i>	0%
	<i>Six months</i>	0%
	<i>Eight months</i>	0%
	<i>12 months</i>	0%
	<i>18 months</i>	0%
	<i>Two years</i>	4%
	<i>Two to four years</i>	22%
	<i>Four years or more</i>	41%
	<i>Indeterminate sentence for public protection (ISSP/DPP)</i>	33%

Q4	Approximately, how long do you have left to serve? (If you are serving life, please use the date of your next parole board.)	
	<i>Not sentenced</i>	0%
	<i>Less than two months</i>	5%
	<i>Two to six months</i>	18%
	<i>Six months to one year</i>	27%
	<i>One year or more</i>	50%

Q5	How long have you been in this establishment?	
	<i>Less than one month</i>	12%
	<i>One to six months</i>	16%
	<i>Six to 12 months</i>	36%
	<i>One to two years</i>	32%
	<i>Two years or more</i>	4%

Q6	How many times have you been in a YOI, secure children's home or secure training centre before?	
	<i>None</i>	27%
	<i>Once</i>	54%
	<i>Two to five</i>	19%
	<i>More than five</i>	0%

Q7	Have you been to any other YOI during this sentence?	
	<i>None</i>	69%
	<i>One</i>	19%
	<i>Two</i>	12%
	<i>Three</i>	0%
	<i>More than three</i>	0%

Section Three: Courts, transfers and escorts

Q1	On your most recent journey, was the van clean?	
	<i>Yes</i>	54%
	<i>No</i>	31%
	<i>Don't remember</i>	12%
	<i>Not applicable</i>	4%

Q2	On your most recent journey, was the van comfortable?	
	<i>Yes</i>	27%
	<i>No</i>	65%
	<i>Don't remember</i>	4%
	<i>Not applicable</i>	4%

Q3	Did you feel safe on your most recent journey?	
	<i>Yes</i>	92%
	<i>No</i>	4%
	<i>Don't remember</i>	4%

Q4	On your most recent journey, were there any adults (over 18), or any young people of a different gender, travelling with you?	
	<i>Yes</i>	27%
	<i>No</i>	65%
	<i>Don't remember</i>	8%

Q5	On your most recent journey, how long did you spend in the van?	
	<i>Less than one hour</i>	48%
	<i>One to two hours</i>	15%
	<i>Two to four hours</i>	26%
	<i>More than four hours</i>	4%
	<i>Don't remember</i>	7%

Q6 On your most recent journey, were you offered a toilet break if you needed it?
My journey was less than two hours 65%
 Yes 4%
 No 15%
 Don't remember 15%

Q7 On your most recent journey, were you offered anything to eat or drink?
My journey was less than two hours 63%
 Yes 26%
 No 4%
 Don't remember 7%

Q8 On your most recent journey, how did you feel you were treated by the escort staff?
 Very well 19%
 Well 38%
 Neither 38%
 Badly 0%
 Very badly 0%
 Don't remember 4%

Q9 When you left court or were transferred from another establishment, were you told that you would be coming to this establishment? (Please tick all that apply to you.)
 Yes, someone told me 85%
 Yes, I received written information 0%
 No, I was not told anything 7%
 Don't remember 7%

Section Four: Your first few days here

Q1 How long were you in reception?
 Less than two hours 48%
 Two hours or longer 44%
 Don't remember 7%

Q2 Were you seen by a member of healthcare staff in reception?
 Yes 93%
 No 4%
 Don't remember 4%

Q3 When you were searched, was this carried out in an understanding way?
 Yes 88%
 No 8%
 Don't remember 4%

Q4	Overall, how well did you feel you were treated in reception?	
	Very well.....	15%
	Well.....	38%
	Neither.....	35%
	Badly.....	12%
	Very badly.....	0%
	Don't remember.....	0%
Q5	When you first arrived here, did staff ask if you needed help or support with any of the following things? (Please tick all that apply to you.)	
	Not being able to smoke..... 17%	Money worries..... 17%
	Loss of property..... 13%	Feeling low/upset/needing someone to talk to..... 30%
	Housing problems..... 9%	Health problems..... 57%
	Needing protection from other young people..... 9%	Getting phone numbers..... 48%
	Letting family know where you are 70%	Staff did not ask me about any of these..... 13%
Q6	When you first arrived here, did you have any of the following problems? (Please tick all that apply to you.)	
	Not being able to smoke..... 11%	Money worries..... 16%
	Loss of property..... 11%	Feeling low/upset/needing someone to talk to..... 5%
	Housing problems..... 0%	Health problems..... 5%
	Needing protection from other young people..... 0%	Getting phone numbers..... 16%
	Letting family know where you are 21%	I did not have any problems..... 42%
Q7	When you first arrived here, were you given any of the following? (Please tick all that apply to you.)	
	A reception pack.....	69%
	The opportunity to have a shower.....	46%
	Something to eat.....	77%
	A free phone call to friends/family.....	65%
	Information about the PIN telephone system.....	54%
	Information about feeling low/upset.....	35%
	Don't remember.....	15%
	I was not given any of these.....	0%
Q8	Within your first 24 hours here, did you have access to the following people or services? (Please tick all that apply to you.)	
	Chaplain or religious leader.....	69%
	Someone from healthcare.....	77%
	Peer support/peer mentor/Listener/Samaritans.....	19%
	The prison shop/canteen.....	23%
	Don't remember.....	8%
	I did not have access to any of these.....	12%

Q9	Did you feel safe on your first night at this establishment?	
	Yes	92%
	No	4%
	Don't remember.....	4%
Q10	How soon after your arrival did you go on an induction course?	
	<i>I have not been on an induction course</i>	19%
	Within the first week	59%
	More than a week	7%
	Don't remember.....	15%
Q11	Did the induction course cover everything you needed to know about the establishment?	
	<i>I have not been on an induction course</i>	19%
	Yes	70%
	No	7%
	Don't remember.....	4%

Section Five: Daily life and respect

Q1	Can you normally have a shower every day if you want to?	
	Yes	100%
	No	0%
	Don't know.....	0%
Q2	Is your cell call bell normally answered within five minutes?	
	Yes	62%
	No	15%
	Don't know.....	23%
Q3	What is the food like here?	
	Very good.....	0%
	Good	19%
	Neither	27%
	Bad	38%
	Very bad	15%
Q4	Does the shop/canteen sell a wide enough variety of products?	
	<i>I have not bought anything yet</i>	15%
	Yes	50%
	No	27%
	Don't know.....	8%

Q5	How easy is it for you to attend religious services?		
	<i>I don't want to attend religious services</i>		35%
	<i>Very easy</i>		46%
	<i>Easy</i>		8%
	<i>Neither</i>		4%
	<i>Difficult</i>		8%
	<i>Very difficult</i>		0%
	<i>Don't know</i>		0%

Q6	Please answer the following questions about religion:			
		Yes	No	Don't know/ N/A
	Do you feel your religious beliefs are respected?	42%	8%	50%
	Can you speak to a religious leader in private if you want to?	64%	4%	32%

Q7	Please answer the following about staff here:		
		Yes	No
	Is there a member of staff you feel you can turn to for help if you have a problem?	44%	56%
	Do most staff treat you with respect?	68%	32%

Section Six: Healthcare

Q1	What do you think of the overall quality of the healthcare?		
	<i>I have not been to healthcare</i>		0%
	<i>Very good</i>		54%
	<i>Good</i>		15%
	<i>Neither</i>		23%
	<i>Bad</i>		8%
	<i>Very bad</i>		0%

Q2	Is it easy to see the following people if you need to?			
		Yes	No	Don't know
	The doctor	81%	19%	0%
	The nurse	100%	0%	0%
	The dentist	58%	42%	0%
	The optician	50%	31%	19%
	The pharmacist.....	56%	24%	20%

Q3	Have you had any problems getting your medication?	
	<i>I am not taking any medication</i>	52%
	<i>Yes</i>	7%
	<i>No</i>	41%

Q4	Please answer the following about alcohol:		
		Yes	No
	Did you have problems with alcohol when you first arrived here?	4%	96%
	Do you have problems with alcohol now?	0%	100%
	Have you received any help with alcohol problems in this prison?	8%	92%

Q5	Please answer the following about drugs:		
		Yes	No
	Did you have problems with drugs when you first arrived here?	8%	92%
	Do you have problems with drugs now?	0%	100%
	Have you received any help with drugs problems in this prison?	8%	92%

Q6	How easy is it to get illegal drugs here?	
	<i>Very easy</i>	7%
	<i>Easy</i>	4%
	<i>Neither</i>	7%
	<i>Difficult</i>	0%
	<i>Very difficult</i>	7%
	<i>Don't know</i>	74%

Q7	Do you feel you have any emotional or mental health problems?	
	Yes	0%
	No	100%

Q8	If you have emotional or mental health problems, are you being helped by any of the following people?	
	<i>I do not have any/I am not getting any help</i>	100%
	<i>Doctor</i>	0%
	<i>Nurse</i>	0%
	<i>Psychiatrist/psychologist</i>	0%
	<i>Counsellor</i>	0%
	<i>Other</i>	0%

Section Seven: Applications and complaints

Q1	Do you know how to make an application?	
	Yes	100%
	No	0%

Q2	Is it easy to make an application?	
	Yes	96%
	No	0%
	<i>Don't know</i>	4%

Q3	Please answer the following about applications:			
		<i>I have not made an application</i>	Yes	No
	Do you feel applications are sorted out fairly?	16%	68%	16%
	Do you feel applications are sorted out promptly (within seven days)?	17%	61%	22%
Q4	Do you know how to make a complaint?			
	Yes			100%
	No			0%
Q5	Is it easy to make a complaint?			
	Yes			92%
	No			0%
	Don't know.....			8%
Q6	Please answer the following about complaints:			
		<i>I have not made a complaint</i>	Yes	No
	Do you feel complaints are sorted out fairly?	35%	35%	31%
	Do you feel complaints are sorted out promptly (within seven days)?	35%	38%	27%
	Have you ever been encouraged to withdraw a complaint?	35%	15%	50%
Q7	Can you speak to the following people when you need to?			
		Yes	No	Don't know
	A peer mentor/peer support /Listener	58%	17%	25%
	A member of the IMB (Independent Monitoring Board)	63%	21%	17%
	An advocate (an outside person to help you)	45%	18%	36%

Section Eight: Rewards and sanctions, and discipline

Q1	What level of the rewards and sanctions scheme are you on?	
	<i>Don't know what the rewards and sanctions scheme is</i>	4%
	<i>Enhanced (top)</i>	78%
	<i>Standard (middle)</i>	19%
	<i>Basic (bottom)</i>	0%
	<i>Don't know</i>	0%
Q2	Do you feel you have been treated fairly in your experience of the rewards and sanctions scheme?	
	<i>Don't know what the rewards and sanctions scheme is</i>	4%
	Yes	81%
	No	15%
	Don't know.....	0%

Q3 Do the different levels of the rewards and sanctions scheme encourage you to change your behaviour?

<i>Don't know what the rewards and sanctions scheme is</i>	4%
Yes	67%
No.....	30%
<i>Don't know</i>	0%

Q4 Have you had a 'nicking' (adjudication) since you have been in this establishment?

Yes	48%
No.....	52%
<i>Don't know</i>	0%

Q5 If you have had a 'nicking' (adjudication), was the process explained clearly to you?

<i>I have not had an adjudication</i>	61%
Yes	35%
No.....	4%

Q6 If you have been physically restrained (C & R), how many times has this happened since you have been in this establishment?

<i>I have not been restrained</i>	93%
Once.....	7%
Twice.....	0%
Three times.....	0%
More than three times	0%

Q7 If you have spent a night in the segregation/care and separation unit, how were you treated by staff?

<i>I have not been to the segregation unit</i>	80%
Very well.....	8%
Well	0%
Neither	8%
Badly.....	4%
Very badly	0%

Section Nine: Safety

Q1 Have you ever felt unsafe in this establishment?

Yes	11%
No.....	89%

Q2 If you have ever felt unsafe, in which areas of this establishment do you/have you ever felt unsafe? (Please tick all that apply to you.)

<i>Never felt unsafe</i>	92%	<i>At meal times</i>	4%
<i>Everywhere</i>	4%	<i>At healthcare</i>	4%
<i>Segregation unit</i>	0%	<i>Visit's area</i>	4%
<i>Association areas</i>	4%	<i>In wing showers</i>	4%
<i>Reception area</i>	4%	<i>In gym showers</i>	8%
<i>At the gym</i>	4%	<i>In corridors/stairwells</i>	4%
<i>In an exercise yard</i>	4%	<i>On your landing/wing</i>	4%
<i>At work</i>	4%	<i>In your cell</i>	4%
<i>At education</i>	4%		

Q3 Has another young person or group of young people victimised you in this establishment? (E.g. insulted or assaulted you)

Yes	4%
No.....	96%

Q4 If yes, what did the incident(s) involve/what were they about? (Please tick all that apply to you.)

<i>Insulting remarks (about you, your family or friends)</i>	0%	<i>Because of drugs</i>	0%
<i>Physical abuse (being hit, kicked or assaulted)</i>	0%	<i>Having your canteen/property taken</i>	0%
<i>Sexual abuse</i>	0%	<i>Because you were new here</i>	0%
<i>Because of your race or ethnic origin</i>	0%	<i>Because you are from a different part of the country</i>	0%
<i>Because of your religious beliefs</i>	0%	<i>Because of gang related issues</i>	0%
<i>Because you have a disability</i>	0%	<i>Because of my offence/crime</i>	4%

Q6 Has a member of staff or group of staff victimised you in this establishment? (E.g. insulted or assaulted you)

Yes	8%
No.....	92%

Q7 If yes, what did the incident(s) involve/what were they about? (Please tick all that apply to you.)

<i>Insulting remarks (about you, your family or friends)</i>	4%	<i>Because of drugs</i>	4%
<i>Physical abuse (being hit, kicked or assaulted)</i>	0%	<i>Having your canteen/property taken</i>	0%
<i>Sexual abuse</i>	4%	<i>Because you were new here</i>	4%
<i>Because of your race or ethnic origin</i>	0%	<i>Because you are from a different part of the country</i>	0%
<i>Because of your religious beliefs</i>	0%	<i>Because of gang related issues</i>	4%
<i>Because you have a disability</i>	0%	<i>Because of my offence/crime</i>	0%

Q9	If you were being victimised who would you tell?		
	<i>No one</i>	50%	<i>Teacher/education staff</i> 8%
	<i>Personal officer</i>	21%	<i>Gym staff</i>
	<i>Wing officer</i>	13%	<i>Listener/Samaritan/Buddy</i> 4%
	<i>Chaplain</i>	4%	<i>Another young person here</i> 8%
	<i>Healthcare staff</i>	0%	<i>Family/friends</i> 42%
Q10	Do you think staff would take it seriously if you told them you had been victimised?		
	<i>Yes</i>		46%
	<i>No</i>		19%
	<i>Don't know</i>		35%
Q11	Is shouting through the windows a problem here?		
	<i>Yes</i>		4%
	<i>No</i>		85%
	<i>Don't know</i>		11%
Q12	Have staff checked on you personally in the last week to see how you are getting on?		
	<i>Yes</i>		46%
	<i>No</i>		54%

Section Ten: Activities

Q1	How old were you when you were last at school?			
	<i>14 or under</i>			60%
	<i>15 or over</i>			40%
Q2	Please answer the following questions about school:			
		Yes	No	Not applicable
	Have you ever been excluded from school?	96%	4%	0%
	Did you used to truant from school?	73%	27%	0%
Q3	Do you currently take part in any of the following activities? (Please tick all that apply to you.)			
	<i>Education</i>			100%
	<i>A job in this establishment</i>			37%
	<i>Vocational or skills training</i>			22%
	<i>Offending behaviour programmes</i>			56%
	<i>I am not currently involved in any of these</i>			0%
Q4	If you have been involved in ANY of the following activities, in THIS establishment, do you think they will help you when you leave prison?			
		Not been involved	Yes	No
				Don't know
	Education	4%	72%	8%
	A job in this establishment	11%	47%	16%
	Vocational or skills training	0%	76%	12%
	Offending behaviour programmes	17%	50%	17%

Q5	Do you usually have association every day?	
	Yes	100%
	No.....	0%
	Don't know.....	0%
Q6	How many times do you usually go to the gym each week?	
	Don't want to go	0%
	None.....	4%
	One to two times	48%
	Three to five times	44%
	More than five times	4%
	Don't know.....	0%
Q7	Can you usually go outside for exercise every day?	
	Don't want to go	8%
	Yes	88%
	No.....	4%
	Don't know.....	0%

Section Eleven: Keeping in touch with family and friends

Q1	Are you able to use the telephone everyday if you want to?	
	Yes	96%
	No.....	0%
	Don't know.....	4%
Q2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	19%
	No.....	81%
	Don't know.....	0%
Q3	How easy is it for your family and friends to visit you here?	
	Very easy	15%
	Easy	38%
	Neither	35%
	Difficult.....	4%
	Very difficult	8%
	Don't know.....	0%
Q4	How many visits have you had, from family or friends in the last month?	
	I don't get visits	0%
	None.....	33%
	One.....	30%
	Two.....	15%
	Three.....	0%
	More than three	19%
	Don't know.....	4%

Q5	Do your visits usually start on time?	
	<i>I don't get visits</i>	0%
	Yes	77%
	No	15%
	<i>Don't know</i>	8%
Q6	How are you and your family/friends usually treated by visits staff?	
	<i>I don't get visits</i>	0%
	Very well.....	30%
	Well	41%
	Neither	15%
	Badly.....	0%
	Very badly	4%
	<i>Don't know</i>	11%

Section Twelve: Preparation for release

Q1	When did you first meet your personal officer?				
	<i>I still have not met him/her</i>	0%			
	In your first week.....	78%			
	After your first week.....	11%			
	<i>Don't remember</i>	11%			
Q2	How often do you see your personal officer?				
	<i>I still have not met him/her</i>	0%			
	At least once a week	81%			
	Less than once a week	19%			
Q3	Do you feel your personal officer has helped you?				
	<i>I still have not met him/her</i>	0%			
	Yes	68%			
	No.....	32%			
Q4	Do you have a training plan?				
	<i>Not sentenced</i>	0%			
	Yes	81%			
	No.....	4%			
	<i>Don't know</i>	15%			
Q5	Please answer the following about training plans:				
		<i>I don't have a training plan</i>	Yes	No	<i>Don't know</i>
	Were you involved in development your training plan?	4%	60%	16%	20%
	Do you understand the targets that have been set in your training plan?	4%	72%	4%	20%
	Can you see your training plan when you want to?	4%	61%	9%	26%

- Q6 Has your YOT worker been in touch since you arrived at this establishment?**
 Yes 92%
 No..... 8%
- Q7 Do you know how to get in touch with your YOT worker?**
 Yes 88%
 No..... 12%
- Q8 Please answer the following about your release:**
- | | Yes | No | Don't know |
|--|-----|-----|------------|
| Have you had a say in what will happen to you when you are released? | 52% | 17% | 30% |
| Are you planning on going to school or college after release? | 45% | 27% | 27% |
| Do you have a job to go to on release? | 24% | 62% | 14% |
- Q9 Do you know who to contact to get help with any of the following for when you leave? (Please tick all that apply to you.)**
- | | |
|--|-----|
| <i>Finding accommodation.....</i> | 67% |
| <i>Getting into school or college.....</i> | 67% |
| <i>Getting a job</i> | 67% |
| <i>Help with money/finances</i> | 71% |
| <i>Help with claiming benefits.....</i> | 57% |
| <i>Continuing health services</i> | 52% |
| <i>Opening a bank account.....</i> | 71% |
| <i>Avoiding bad relationships</i> | 43% |
| <i>I don't know who to contact.....</i> | 19% |
- Q10 Do you think you will have a problem with any of the following when you leave? (Please tick all that apply to you.)**
- | | |
|---|-----|
| <i>Finding accommodation.....</i> | 19% |
| <i>Getting into school or college.....</i> | 14% |
| <i>Getting a job</i> | 33% |
| <i>Money/finances</i> | 29% |
| <i>Claiming benefits</i> | 5% |
| <i>Continuing health services</i> | 0% |
| <i>Opening a bank account.....</i> | 5% |
| <i>Avoiding bad relationships</i> | 0% |
| <i>I won't have any problems</i> | 62% |
- Q11 Is there anything you would still like help with before you are released?**
 Yes 28%
 No..... 60%
 Don't know..... 12%

**Q12 What is most likely to stop you offending in the future?
(Please tick all that apply to you.)**

<i>Not sentenced</i>	0%	<i>Having a mentor (someone you can ask for advice)</i>	10%
<i>Nothing it is up to me</i>	19%	<i>Having a YOT worker or social worker that I get on with</i>	33%
<i>Making new friends outside</i>	33%	<i>Having children</i>	24%
<i>Going back to live with my family</i> ..	24%	<i>Having something to do that isn't crime</i>	38%
<i>Getting a place of my own</i>	43%	<i>This sentence</i>	38%
<i>Getting a job</i>	57%	<i>Getting into school/college</i>	33%
<i>Having a partner (girlfriend or boyfriend)</i>	38%	<i>Talking about my offending behaviour with staff</i>	10%
<i>Staying off alcohol/drugs</i>	33%	<i>Anything else</i>	19%

Q13 Do you want to stop offending?

<i>Not sentenced</i>	0%
<i>Yes</i>	100%
<i>No</i>	0%
<i>Don't know</i>	0%

Q14 Have you done anything, or has anything happened to you in this establishment, that you think will make you less likely to offend in the future?

<i>Not sentenced</i>	0%
<i>Yes</i>	65%
<i>No</i>	35%



**Survey responses from children and young people:
HMYOI Warren Hill and Carlford 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

		Carlford Unit 2009	Warren Hill 2009
	Any percent highlighted in green is significantly better.		
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Number of completed questionnaires returned		27	104
SECTION 1: ABOUT YOU			
1.1	Are you 18 years of age?	0%	11%
1.2	Are you a foreign national?	0%	5%
1.3	Is English your first language?	96%	93%
1.4	Are you from a minority ethnic group? (including all those who did not tick White British, White Irish or White Other category)	41%	30%
1.5	Do you consider yourself to be Gypsy/Romany/Traveller?	0%	8%
1.6	Are you Muslim?	16%	10%
1.7	Do you have any children?	15%	8%
SECTION 2: ABOUT YOUR SENTENCE			
2.2	Are you sentenced?	100%	80%
2.3	Is your sentence 12 months or less?	0%	44%
2.4	Do you have less than six months to serve?	22%	56%
2.5	Have you been in this prison less than a month?	11%	19%
2.6	Is this the first time that you have been in a YOI, secure children's home or secure training centre before?	26%	30%
2.7	Have you been to any other YOI during this sentence?	32%	22%
SECTION 3: COURTS, TRANSFERS AND ESCORTS			
For your most recent journey, either to or from court, or between prisons, we want to know:			
3.1	Was the van clean?	54%	53%
3.2	Was the van comfortable?	26%	9%
3.3	Did you feel safe?	93%	82%
3.4	Did you travel with any adults (over 18) or anyone of a different gender?	26%	25%
3.5	Did you spend more than four hours in the van?	3%	7%
For those who spent two or more hours in the escort van:			
3.6	Were you offered a toilet break if you needed it?	10%	20%
3.7	Were you offered anything to eat or drink?	70%	54%
3.8	Were you treated well/very well by the escort staff?	57%	62%
3.9	Did someone tell you where you were going when you left court?	86%	82%
3.10	Did you receive written information about where you were going when you left court?	0%	3%
SECTION 4: YOUR FIRST FEW DAYS HERE			
4.1	Were you in reception for less than two hours?	48%	82%
4.2	Were you seen by a member of healthcare staff in reception?	93%	91%
4.3	When you were searched was this carried out in an understanding way?	89%	90%
4.4	Were you treated well/very well in reception?	54%	80%

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Number of completed questionnaires returned		27	104
SECTION 4: YOUR FIRST FEW DAYS HERE cont.			
When you first arrived, did staff ask if you needed help or support with any of the following:			
4.5a	Not being able to smoke?	17%	57%
4.5b	Loss of property?	13%	28%
4.5c	Housing problems?	8%	28%
4.5d	Needing protection from other young people?	8%	30%
4.5e	Letting family know where you are?	71%	64%
4.5f	Money worries?	17%	21%
4.5g	Feeling low/upset/needing someone to talk to?	29%	41%
4.5h	Health problems?	56%	56%
4.5i	Getting phone numbers?	48%	53%
4.6	Did you have any problems when you first arrived?	57%	68%
When you first arrived, did you have problems with any of the following:			
4.6a	Not being able to smoke?	10%	46%
4.6b	Loss of property?	10%	7%
4.6c	Housing problems?	0%	15%
4.6d	Needing protection from other young people?	0%	4%
4.6e	Letting family know where you are?	20%	17%
4.6f	Money worries?	15%	8%
4.6g	Feeling low/upset/needing someone to talk to?	5%	15%
4.6h	Health problems?	5%	10%
4.6i	Getting phone numbers?	15%	25%
When you first arrived, were you given any of the following:			
4.7a	A reception pack?	68%	84%
4.7b	The opportunity to have a shower?	46%	31%
4.7c	Something to eat?	78%	92%
4.7d	A free phone call to friends/family?	64%	91%
4.7e	Information about the PIN telephone system?	54%	60%
4.7f	Information about feeling low/upset?	36%	45%
Within your first 24 hours, did you have access to the following people or services:			
4.8a	The chaplain or religious leader?	68%	55%
4.8b	Someone from healthcare?	78%	79%
4.8c	A peer mentor, Listener or Samaritans?	19%	23%
4.8d	Did you have access to the prison shop/canteen?	22%	14%
4.9	Did you feel safe on your first night here?	92%	83%
For those who had an induction:			
4.10	Did you go on an induction course within your first week?	74%	85%
4.11	Did the induction course cover everything you needed to know about the establishment?	87%	78%

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SECTION 5: DAILY LIFE HERE			
5.1	Can you normally have a shower everyday if you want to?	100%	92%
5.2	Is your cell call bell normally answered within five minutes?	61%	20%
5.3	Do you find the food here good/very good?	19%	12%
5.4	Does the shop/canteen sell a wide enough variety of products?	50%	62%
5.5	Is it easy/very easy for you to attend religious services?	54%	75%
5.6a	Do you feel your religious beliefs are respected?	43%	54%
5.6b	Can you speak to a religious leader in private if you want to?	63%	67%
5.7a	Is there a member of staff you can turn to with a problem?	44%	82%
5.7b	Do most staff treat you with respect?	67%	79%
SECTION 6: HEALTHCARE			
6.1	Do you think the overall quality of the healthcare is good/very good?	68%	60%
6.2a	Is it easy for you to see the doctor?	82%	52%
6.2b	Is it easy for you to see the nurse?	100%	73%
6.2c	Is it easy for you to see the dentist?	57%	19%
6.2d	Is it easy for you to see the optician?	50%	18%
6.2e	Is it easy for you to see the pharmacist?	56%	28%
6.3	For those on medication: Have you had any problems getting your medication?	14%	20%
6.4a	Did you have any problems with alcohol when you first arrived?	3%	19%
6.4b	Do you have any problems with alcohol now?	0%	4%
6.4c	Have you received any help with any alcohol problems here?	7%	25%
6.5a	Did you have any problems with drugs when you first arrived?	7%	42%
6.5b	Do you have any problems with drugs now?	0%	6%
6.5c	Have you received any help with any drug problems here?	7%	41%
6.6	Is it easy/very easy to get illegal drugs here?	10%	15%
6.7	Do you feel you have any emotional or mental health problems?	0%	17%
If you feel you have emotional or mental health problems, are you being helped by any of the following:			
6.8a	Do not have any/not getting any help	N/A	54%
6.8b	Doctor?	N/A	8%
6.8c	Nurse?	N/A	8%
6.8d	Psychiatrist/psychologist?	N/A	31%
6.8e	Counsellor?	N/A	31%
SECTION 7: APPLICATIONS AND COMPLAINTS			
7.1	Do you know how to make an application?	100%	94%
7.2	Is it easy to make an application?	96%	90%
For those who have made an application:			
7.3a	Do you feel applications are sorted out fairly?	82%	73%
7.3b	Do you feel applications are sorted out promptly (within seven days)?	75%	60%
7.4	Do you know how to make a complaint?	100%	93%
7.5	Is it easy to make a complaint?	93%	84%

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Number of completed questionnaires returned		27	104
SECTION 7: APPLICATIONS AND COMPLAINTS cont.			
For those who have made a complaint:			
7.6a	Do you feel complaints are sorted out fairly?	53%	49%
7.6b	Do you feel complaints are sorted out promptly (within seven days)?	61%	51%
7.6c	Have you ever been encouraged to withdraw a complaint?	22%	20%
Can you speak to the following people when you need to:			
7.7a	A peer mentor or listener?	58%	45%
7.7b	A member of the IMB (Independent Monitoring Board)	62%	52%
7.7c	An advocate (an outside person to help you)	46%	41%
SECTION 8: REWARDS & SANCTIONS, AND DISCIPLINE			
8.1	Are you on the enhanced (top) level of the reward scheme?	79%	35%
8.2	Do you feel you have been treated fairly in your experience of the reward scheme?	83%	63%
8.3	Do the different levels make you change your behaviour?	66%	58%
8.4	Have you had a 'nicking' (adjudication) since you have been here?	48%	55%
8.5	Was the 'nicking' (adjudication) process explained clearly to you?	90%	94%
8.6	Have you been physically restrained (C & R) since you have been here?	7%	35%
8.7	For those who had spent a night in the segregation/CSU: Did the staff treat you well/very well?	40%	26%
SECTION 9: SAFETY			
9.1	Have you ever felt unsafe in this prison?	10%	34%
9.3	Has another young person or group of young people victimised (insulted or assaulted) you here?	4%	31%
If you have felt victimised by another young person/group of young people, did the incident involve:			
9.4a	Insulting remarks?	0%	15%
9.4b	Physical abuse?	0%	12%
9.4c	Sexual abuse?	0%	0%
9.4d	Racial or ethnic abuse?	0%	1%
9.4e	Your religious beliefs?	0%	1%
9.4f	Your disability?	0%	2%
9.4g	Drugs?	0%	4%
9.4h	Having your canteen/property taken?	0%	10%
9.4i	Because you were new here?	0%	13%
9.4j	Being from a different part of the country than others?	0%	4%
9.4k	Gang related issues?	0%	6%
9.4l	Your offence/crime?	4%	2%
9.6	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	7%	17%
If you have felt victimised by a member of staff/group of staff members, did the incident involve:			
9.5a	Insulting remarks?	4%	12%
9.5b	Physical abuse?	0%	4%
9.5c	Sexual abuse?	4%	1%
9.5d	Racial or ethnic abuse?	0%	2%
9.5e	Your religious beliefs?	0%	2%
9.5f	Your disability?	0%	1%
9.5g	Drugs?	4%	1%
9.5h	Having your canteen/property taken?	0%	4%
9.5i	Because you were new here?	4%	2%
9.5j	Being from a different part of the country than others?	0%	1%

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Number of completed questionnaires returned		27	104
SECTION 9: SAFETY cont.			
9.5k	Gang related issues?	4%	1%
9.5l	Your offence/crime?	0%	2%
9.9	If you were being victimised by another young person or a member of staff would you be able to tell anyone about it?	50%	60%
9.10	If you did tell a member of staff that you were being victimised do you think it would be taken seriously?	46%	46%
9.11	Is shouting through the windows a problem here?	3%	44%
9.12	Have staff checked on you personally in the last week to see how you are getting on?	46%	42%
SECTION 10: ACTIVITIES			
10.1	Were you 14 or younger when you were last at school?	59%	50%
10.2a	Have you ever been excluded from school?	97%	96%
10.2b	Have you ever truanted from school?	74%	82%
Do you currently take part in any of the following:			
10.3a	Education?	100%	84%
10.3b	A job in this establishment?	38%	19%
10.3c	Vocational or skills training?	21%	35%
10.3d	Offending behaviour programmes?	55%	18%
For those who have taken part in the following activities, whilst in this prison: Do you think that they will help you when you leave prison?			
10.4a	Education?	76%	78%
10.4b	A job in this establishment?	53%	56%
10.4c	Vocational or skills training?	78%	70%
10.4d	Offending behaviour programmes?	63%	54%
10.5	Do you usually have association everyday?	100%	92%
10.6	Do you go to the gym more than five times each week?	3%	6%
10.7	Can you usually go outside for exercise every day?	89%	30%
SECTION 11: KEEPING IN TOUCH WITH FAMILY AND FRIENDS			
11.1	Are you able to use the telephone every day?	96%	86%
11.2	Have you had any problems with sending or receiving letters or parcels?	19%	42%
11.3	Is it easy/very easy for your family and friends to visit you here?	54%	43%
11.4	Have you had two or more visits in the last month?	35%	36%
11.5	Do your visits start on time?	78%	38%
11.6	Are you and your visitors treated well/very well by visits staff?	69%	49%
SECTION 12: PREPARATION FOR RELEASE			
For those who have met their personal officer:			
12.1	Did you meet your personal officer within the first week?	79%	55%
12.2	Do you see your personal officer at least once a week?	83%	83%
12.3	Do you feel your personal officer has helped you?	67%	77%
12.4	Do you have a training plan?	83%	62%
For those with a training plan:			
12.5a	Were you involved in the development of your training plan?	62%	70%
12.5b	Do you understand the targets set in your training plan?	76%	83%
12.5c	Can you see your training plan when you want to?	63%	46%
12.6	Has your YOT worker been in touch since you arrived here?	93%	85%
12.7	Do you know how to get in touch with your YOT worker?	89%	76%

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Number of completed questionnaires returned		27	104
SECTION 12: PREPARATION FOR RELEASE cont.			
Please 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?	52%	51%
12.8b	Are you going to school or college on release?	46%	69%
12.8c	Do you have a job to go to on release?	23%	16%
Do you know who to contact for help with the following, in preparation for your release:			
12.9a	Finding accommodation	68%	52%
12.9b	Getting into school or college	68%	69%
12.9c	Getting a job	68%	54%
12.9d	Help with money/finances	73%	38%
12.9e	Help with claiming benefits	57%	40%
12.9f	Continuing health services	52%	30%
12.9g	Opening a bank account	73%	46%
12.9h	Avoiding bad relationships	44%	29%
Do you think you will have a problem with the following, when you are released:			
12.10a	Finding accommodation?	18%	32%
12.10b	Getting into school or college?	14%	27%
12.10c	Getting a job?	32%	50%
12.10d	Help with money/finances?	27%	32%
12.10e	Help with claiming benefits?	5%	24%
12.10f	Continuing health services?	0%	9%
12.10g	Opening a bank account?	5%	5%
12.10h	Avoiding bad relationships?	0%	22%
12.11	Is there anything you would still like help with before you are released?	27%	31%
For those who were sentenced:			
12.13	Do you want to stop offending?	100%	88%
12.14	Have you done anything or has anything happened to you here that you think will make you less likely to offend in the future?	64%	54%



**Survey responses from children and young people:
HMYOI Carlford 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

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 	Percentages which are not highlighted show there is no significant difference.				
Number of completed questionnaires returned		27	1111	27	27
SECTION 1: ABOUT YOU					
1.1	Are you 18 years of age?	0%	9%	0%	4%
1.2	Are you a foreign national?	0%	2%	0%	
1.3	Is English your first language?	96%	93%	96%	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)?	41%	32%	41%	30%
1.5	Do you consider yourself to be Gypsy/Romany/Traveller?	0%		0%	
1.6	Are you Muslim?	16%	9%	16%	
1.7	Do you have any children?	15%	12%	15%	7%
SECTION 2: ABOUT YOUR SENTENCE					
2.2	Are you sentenced?	100%	78%	100%	100%
2.3	Is your sentence 12 months or less?	0%	38%	0%	0%
2.4	Do you have less than six months to serve?	22%	53%	22%	15%
2.5	Have you been in this prison less than a month?	11%	22%	11%	4%
2.6	Is this the first time that you have been in a YOI, secure children's home or secure training centre before?	26%	43%	26%	46%
2.7	Have you been to any other YOI during this sentence?	32%	28%	32%	39%
SECTION 3: COURTS, TRANSFERS AND ESCORTS					
For your most recent journey, either to or from court, or between prisons, we want to know:					
3.1	Was the van clean?	54%	46%	54%	48%
3.2	Was the van comfortable?	26%	11%	26%	30%
3.3	Did you feel safe?	93%	76%	93%	85%
3.4	Did you travel with any adults (over 18) or anyone of a different gender?	26%	32%	26%	
3.5	Did you spend more than four hours in the van?	3%	6%	3%	15%
For those who spent two or more hours in the escort van:					
3.6	Were you offered a toilet break if you needed it?	10%	18%	10%	50%
3.7	Were you offered anything to eat or drink?	70%	34%	70%	
3.8	Were you treated well/very well by the escort staff?	57%	59%	57%	89%
3.9	Did someone tell you where you were going when you left court?	86%	80%	86%	
3.10	Did you receive written information about where you were going when you left court?	0%	4%	0%	
SECTION 4: YOUR FIRST FEW DAYS HERE					
4.1	Were you in reception for less than two hours?	48%	79%	48%	62%
4.2	Were you seen by a member of healthcare staff in reception?	93%	88%	93%	100%
4.3	When you were searched was this carried out in an understanding way?	89%	81%	89%	85%
4.4	Were you treated well/very well in reception?	54%	69%	54%	78%

Key to tables

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	Percentages which are not highlighted show there is no significant difference.				
	Number of completed questionnaires returned	27	1111	27	27
SECTION 4: YOUR FIRST FEW DAYS HERE cont.					
When you first arrived, did staff ask if you needed help or support with any of the following:					
4.5a	Not being able to smoke?	17%	64%	17%	
4.5b	Loss of property?	13%	23%	13%	
4.5c	Housing problems?	8%	19%	8%	
4.5d	Needing protection from other young people?	8%	22%	8%	
4.5e	Letting family know where you are?	71%	58%	71%	
4.5f	Money worries?	17%	17%	17%	
4.5g	Feeling low/upset/needing someone to talk to?	29%	45%	29%	
4.5h	Health problems?	56%	53%	56%	
4.5i	Getting phone numbers?	48%	41%	48%	
4.6	Did you have any problems when you first arrived?	57%	74%	57%	48%
When you first arrived, did you have problems with any of the following:					
4.6a	Not being able to smoke?	10%	46%	10%	17%
4.6b	Loss of property?	10%	10%	10%	4%
4.6c	Housing problems?	0%	11%	0%	0%
4.6d	Needing protection from other young people?	0%	5%	0%	9%
4.6e	Letting family know where you are?	20%	20%	20%	13%
4.6f	Money worries?	15%	16%	15%	17%
4.6g	Feeling low/upset/needing someone to talk to?	5%	19%	5%	9%
4.6h	Health problems?	5%	11%	5%	4%
4.6i	Getting phone numbers?	15%	25%	15%	
When you first arrived, were you given any of the following:					
4.7a	A reception pack?	68%	80%	68%	
4.7b	The opportunity to have a shower?	46%	25%	46%	
4.7c	Something to eat?	78%	82%	78%	
4.7d	A free phone call to friends/family?	64%	83%	64%	81%
4.7e	Information about the PIN telephone system?	54%	61%	54%	
4.7f	Information about feeling low/upset?	36%	36%	36%	
Within your first 24 hours, did you have access to the following people or services:					
4.8a	The chaplain or religious leader?	68%	40%	68%	67%
4.8b	Someone from healthcare?	78%	55%	78%	59%
4.8c	A peer mentor, Listener or Samaritans?	19%	15%	19%	19%
4.8d	Did you have access to the prison shop/canteen?	22%	16%	22%	11%
4.9	Did you feel safe on your first night here?	92%	83%	92%	89%
For those who had an induction:					
4.10	Did you go on an induction course within your first week?	74%	75%	74%	65%
4.11	Did the induction course cover everything you needed to know about the establishment?	87%	66%	87%	78%

Key to tables

		Cariford Unit 2009	Young people's comparator	Cariford Unit 2009	Cariford Unit 2008
 	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.				
Number of completed questionnaires returned		27	1111	27	27
SECTION 5: DAILY LIFE HERE					
5.1	Can you normally have a shower everyday if you want to?	100%	55%	100%	100%
5.2	Is your cell call bell normally answered within five minutes?	61%	31%	61%	44%
5.3	Do you find the food here good/very good?	19%	22%	19%	26%
5.4	Does the shop/canteen sell a wide enough variety of products?	50%	38%	50%	63%
5.5	Is it easy/very easy for you to attend religious services?	54%	54%	54%	63%
5.6a	Do you feel your religious beliefs are respected?	43%	49%	43%	
5.6b	Can you speak to a religious leader in private if you want to?	63%	65%	63%	
5.7a	Is there a member of staff you can turn to with a problem?	44%	71%	44%	
5.7b	Do most staff treat you with respect?	67%	71%	67%	82%
SECTION 6: HEALTHCARE					
6.1	Do you think the overall quality of the healthcare is good/very good?	68%	59%	68%	56%
6.2a	Is it easy for you to see the doctor?	82%	47%	82%	82%
6.2b	Is it easy for you to see the nurse?	100%	68%	100%	100%
6.2c	Is it easy for you to see the dentist?	57%	26%	57%	31%
6.2d	Is it easy for you to see the optician?	50%	21%	50%	27%
6.2e	Is it easy for you to see the pharmacist?	56%	27%	56%	
6.3	For those on medication: Have you had any problems getting your medication?	14%	35%	14%	8%
6.4a	Did you have any problems with alcohol when you first arrived?	3%	15%	3%	9%
6.4b	Do you have any problems with alcohol now?	0%	5%	0%	
6.4c	Have you received any help with any alcohol problems here?	7%	18%	7%	33%
6.5a	Did you have any problems with drugs when you first arrived?	7%	25%	7%	13%
6.5b	Do you have any problems with drugs now?	0%	10%	0%	
6.5c	Have you received any help with any drug problems here?	7%	29%	7%	30%
6.6	Is it easy/very easy to get illegal drugs here?	10%	26%	10%	
6.7	Do you feel you have any emotional or mental health problems?	0%	29%	0%	
If you feel you have emotional or mental health problems, are you being helped by any of the following:					
6.8a	Do not have any/not getting any help	N/A	33%	N/A	
6.8b	Doctor?	N/A	26%	N/A	
6.8c	Nurse?	N/A	29%	N/A	
6.8d	Psychiatrist/psychologist?	N/A	30%	N/A	
6.8e	Counsellor?	N/A	15%	N/A	
SECTION 7: APPLICATIONS AND COMPLAINTS					
7.1	Do you know how to make an application?	100%	88%	100%	
7.2	Is it easy to make an application?	96%	80%	96%	
For those who have made an application:					
7.3a	Do you feel applications are sorted out fairly?	82%	68%	82%	
7.3b	Do you feel applications are sorted out promptly (within seven days)?	75%	58%	75%	
7.4	Do you know how to make a complaint?	100%	72%	100%	
7.5	Is it easy to make a complaint?	93%	59%	93%	52%

Key to tables

		Carlford Unit 2009	Young people's comparator	Carlford Unit 2009	Carlford Unit 2008
	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.				
Number of completed questionnaires returned		27	1111	27	27
SECTION 7: APPLICATIONS AND COMPLAINTS cont.					
For those who have made a complaint:					
7.6a	Do you feel complaints are sorted out fairly?	53%	36%	53%	58%
7.6b	Do you feel complaints are sorted out promptly (within seven days)?	61%	44%	61%	
7.6c	Have you ever been encouraged to withdraw a complaint?	22%	25%	22%	8%
Can you speak to the following people when you need to:					
7.7a	A peer mentor or listener?	58%	37%	58%	
7.7b	A member of the IMB (Independent Monitoring Board)	62%	29%	62%	
7.7c	An advocate (an outside person to help you)	46%	40%	46%	44%
SECTION 8: REWARDS & SANCTIONS, AND DISCIPLINE					
8.1	Are you on the enhanced (top) level of the reward scheme?	79%	25%	79%	59%
8.2	Do you feel you have been treated fairly in your experience of the reward scheme?	83%	57%	83%	52%
8.3	Do the different levels make you change your behaviour?	66%	60%	66%	59%
8.4	Have you had a 'nicking' (adjudication) since you have been here?	48%	58%	48%	59%
8.5	Was the 'nicking' (adjudication) process explained clearly to you?	90%	89%	90%	
8.6	Have you been physically restrained (C & R) since you have been here?	7%	27%	7%	15%
8.7	For those who had spent a night in the segregation/CSU: Did the staff treat you well/very well?	40%	43%	40%	60%
SECTION 9: SAFETY					
9.1	Have you ever felt unsafe in this prison?	10%	30%	10%	19%
9.3	Has another young person or group of young people victimised (insulted or assaulted) you here?	4%	24%	4%	27%
If you have felt victimised by another young person/group of young people, did the incident involve:					
9.4a	Insulting remarks?	0%	13%	0%	19%
9.4b	Physical abuse?	0%	9%	0%	12%
9.4c	Sexual abuse?	0%	1%	0%	0%
9.4d	Racial or ethnic abuse?	0%	4%	0%	0%
9.4e	Your religious beliefs?	0%	2%	0%	
9.4f	Your disability?	0%	2%	0%	
9.4g	Drugs?	0%	2%	0%	0%
9.4h	Having your canteen/property taken?	0%	3%	0%	4%
9.4i	Because you were new here?	0%	6%	0%	4%
9.4j	Being from a different part of the country than others?	0%	5%	0%	4%
9.4k	Gang related issues?	0%	7%	0%	
9.4l	Your offence/crime?	4%	3%	4%	
9.6	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	7%	20%	7%	4%
If you have felt victimised by a member of staff/group of staff members, did the incident involve:					
9.5a	Insulting remarks?	4%	11%	4%	4%
9.5b	Physical abuse?	0%	4%	0%	4%
9.5c	Sexual abuse?	4%	1%	4%	0%
9.5d	Racial or ethnic abuse?	0%	3%	0%	0%
9.5e	Your religious beliefs?	0%	1%	0%	
9.5f	Your disability?	0%	1%	0%	
9.5g	Drugs?	4%	1%	4%	0%
9.5h	Having your canteen/property taken?	0%	2%	0%	0%
9.5i	Because you were new here?	4%	3%	4%	0%
9.5j	Being from a different part of the country than others?	0%	2%	0%	0%

Key to tables

	Any percent highlighted in green is significantly better than the comparator.	Carford Unit 2009	Young people's comparator	Carford Unit 2009	Carford Unit 2008
	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.				
Number of completed questionnaires returned		27	1111	27	27
SECTION 9: SAFETY cont.					
9.5k	Gang related issues?	4%	2%	4%	
9.5l	Your offence/crime?	0%	3%	0%	
9.9	If you were being victimised by another young person or a member of staff would you be able to tell anyone about it?	50%	62%	50%	81%
9.10	If you did tell a member of staff that you were being victimised do you think it would be taken seriously?	46%	38%	46%	48%
9.11	Is shouting through the windows a problem here?	3%	39%	3%	
9.12	Have staff checked on you personally in the last week to see how you are getting on?	46%	35%	46%	46%
SECTION 10: ACTIVITIES					
10.1	Were you 14 or younger when you were last at school?	59%	39%	59%	48%
10.2a	Have you ever been excluded from school?	97%	88%	97%	81%
10.2b	Have you ever truanted from school?	74%	69%	74%	70%
Do you currently take part in any of the following:					
10.3a	Education?	100%	77%	100%	100%
10.3b	A job in this establishment?	38%	27%	38%	40%
10.3c	Vocational or skills training?	21%	41%	21%	46%
10.3d	Offending behaviour programmes?	55%	26%	55%	
For those who have taken part in the following activities, whilst in this prison: Do you think that they will help you when you leave prison?					
10.4a	Education?	76%	74%	76%	
10.4b	A job in this establishment?	53%	69%	53%	
10.4c	Vocational or skills training?	78%	70%	78%	
10.4d	Offending behaviour programmes?	63%	63%	63%	
10.5	Do you usually have association everyday?	100%	45%	100%	96%
10.6	Do you go to the gym more than five times each week?	3%	8%	3%	4%
10.7	Can you usually go outside for exercise every day?	89%	22%	89%	68%
SECTION 11: KEEPING IN TOUCH WITH FAMILY AND FRIENDS					
11.1	Are you able to use the telephone every day?	96%	49%	96%	92%
11.2	Have you had any problems with sending or receiving letters or parcels?	19%	33%	19%	20%
11.3	Is it easy/very easy for your family and friends to visit you here?	54%	42%	54%	40%
11.4	Have you had two or more visits in the last month?	35%	48%	35%	46%
11.5	Do your visits start on time?	78%	45%	78%	
11.6	Are you and your visitors treated well/very well by visits staff?	69%	54%	69%	65%
SECTION 12: PREPARATION FOR RELEASE					
For those who have met their personal officer:					
12.1	Did you meet your personal officer within the first week?	79%	50%	79%	64%
12.2	Do you see your personal officer at least once a week?	83%	63%	83%	
12.3	Do you feel your personal officer has helped you?	67%	60%	67%	79%
12.4	Do you have a training plan?	83%	47%	83%	
For those with a training plan:					
12.5a	Were you involved in the development of your training plan?	62%	55%	62%	
12.5b	Do you understand the targets set in your training plan?	76%	73%	76%	
12.5c	Can you see your training plan when you want to?	63%	38%	63%	64%
12.6	Has your YOT worker been in touch since you arrived here?	93%	83%	93%	
12.7	Do you know how to get in touch with your YOT worker?	89%	60%	89%	

Key to tables

	Any percent highlighted in green is significantly better than the comparator.	Carlford Unit 2009	Young people's comparator	Carlford Unit 2009	Carlford Unit 2009
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	Percentages which are not highlighted show there is no significant difference.				
Number of completed questionnaires returned		27	1111	27	27
SECTION 12: PREPARATION FOR RELEASE cont.					
Please 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?	52%	42%	52%	52%
12.8b	Are you going to school or college on release?	46%	50%	46%	64%
12.8c	Do you have a job to go to on release?	23%	24%	23%	16%
Do you know who to contact for help with the following, in preparation for your release:					
12.9a	Finding accommodation	68%	44%	68%	
12.9b	Getting into school or college	68%	56%	68%	
12.9c	Getting a job	68%	55%	68%	
12.9d	Help with money/finances	73%	42%	73%	
12.9e	Help with claiming benefits	57%	38%	57%	
12.9f	Continuing health services	52%	31%	52%	
12.9g	Opening a bank account	73%	40%	73%	
12.9h	Avoiding bad relationships	44%	30%	44%	
Do you think you will have a problem with the following, when you are released:					
12.10a	Finding accommodation?	18%	23%	18%	
12.10b	Getting into school or college?	14%	26%	14%	
12.10c	Getting a job?	32%	48%	32%	
12.10d	Help with money/finances?	27%	33%	27%	
12.10e	Help with claiming benefits?	5%	24%	5%	
12.10f	Continuing health services?	0%	11%	0%	
12.10g	Opening a bank account?	5%	14%	5%	
12.10h	Avoiding bad relationships?	0%	19%	0%	
12.11	Is there anything you would still like help with before you are released?	27%	38%	27%	24%
For those who were sentenced:					
12.13	Do you want to stop offending?	100%	91%	100%	96%
12.14	Have you done anything or has anything happened to you here that you think will make you less likely to offend in the future?	64%	51%	64%	64%



Diversity comparator: Ethnicity/religion HMYOI Warren Hill and Carlford 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

		Black and minority ethnic young people	White young people	Muslim young people	Non-Muslim young people
	Any percent highlighted in green is significantly better.				
	Any percent highlighted in blue is significantly worse.				
	Any percent highlighted in orange shows a significant difference in demographic details.				
	Percentages which are not highlighted show there is no significant difference.				
Number of completed questionnaires returned		41	86	14	111
SECTION 1: ABOUT YOU					
1.2	Are you a foreign national?	4%	4%	0%	5%
1.3	Is English your first language?	86%	96%	90%	93%
1.4	Are you from a minority ethnic group (including all those who did not tick White British, White Irish or White Other category)?			90%	24%
1.5	Do you consider yourself to be Gypsy/Romany/Traveller?	0%	10%	0%	8%
1.6	Are you Muslim?	32%	2%		
SECTION 2: ABOUT YOUR SENTENCE					
2.2	Are you sentenced?	86%	85%	83%	83%
2.6	Is this the first time that you have been in a YOI, secure children's home or secure training centre before?	30%	30%	30%	30%
SECTION 3: COURTS, TRANSFERS AND ESCORTS					
For your most recent journey, either to or from court, or between prisons, we want to know:					
3.4	Did you travel with any adults (over 18) or anyone of a different gender?	33%	22%	30%	25%
3.8	Were you treated well/very well by the escort staff?	56%	63%	28%	64%
3.9	Did someone tell you where you were going when you left court?	80%	83%	70%	83%
SECTION 4: YOUR FIRST FEW DAYS HERE					
4.3	When you were searched was this carried out in an understanding way?	95%	87%	95%	90%
4.4	Were you treated well/very well in reception?	74%	77%	70%	76%
When you first arrived, were you given any of the following:					
4.7a	A reception pack?	77%	84%	74%	82%
4.7b	The opportunity to have a shower?	39%	31%	37%	34%
4.7c	Something to eat?	89%	90%	85%	90%
4.7d	A free phone call to friends/family?	88%	86%	85%	87%
4.9	Did you feel safe on your first night here?	85%	85%	95%	82%
4.11	Did the induction course cover everything you needed to know about the establishment?	63%	86%	69%	81%
SECTION 5: DAILY LIFE HERE					
5.6a	Do you feel your religious beliefs are respected?	63%	44%	83%	48%
5.6b	Can you speak to a religious leader in private if you want to?	67%	65%	95%	63%
5.7a	Is there a member of staff you can turn to with a problem?	67%	79%	53%	78%
5.7b	Do most staff treat you with respect?	57%	87%	44%	82%

Key to tables

		Black and minority ethnic young people	White young people	Muslim young people	Non-Muslim young people
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	Any percent highlighted in blue is significantly worse.				
	Any percent highlighted in orange shows a significant difference in demographic details.				
	Percentages which are not highlighted show there is no significant difference.				
Number of completed questionnaires returned		41	86	14	111
SECTION 6: HEALTHCARE					
6.2a	Is it easy for you to see the doctor?	48%	61%	50%	56%
6.2b	Is it easy for you to see the nurse?	73%	81%	88%	76%
6.2e	Is it easy for you to see the pharmacist?	27%	33%	22%	32%
6.3	Have you had any problems getting your medication?	31%	13%	50%	17%
6.6	Is it easy/very easy to get illegal drugs here?	4%	20%	0%	16%
6.7	Do you feel you have any emotional or mental health problems?	14%	16%	10%	16%
SECTION 7: APPLICATIONS AND COMPLAINTS					
7.2	Is it easy to make an application?	93%	90%	95%	90%
7.3a	Do you feel applications are sorted out fairly?	67%	79%	72%	74%
7.3b	Do you feel applications are sorted out promptly (within seven days)?	55%	66%	56%	62%
7.5	Is it easy to make a complaint?	91%	82%	100%	82%
7.6a	Do you feel complaints are sorted out fairly?	38%	57%	33%	50%
7.6b	Do you feel complaints are sorted out promptly (within seven days)?	43%	58%	33%	54%
SECTION 8: REWARDS & SANCTIONS, AND DISCIPLINE					
8.1	Are you on the enhanced (top) level of the reward scheme?	53%	37%	68%	39%
8.2	Do you feel you have been treated fairly in your experience of the reward scheme?	52%	73%	47%	68%
8.3	Do the different levels make you change your behaviour?	62%	59%	63%	60%
8.4	Have you had a 'nicking' (adjudication) since you have been here?	79%	42%	90%	48%
8.5	Was the 'nicking' (adjudication) process explained clearly to you?	90%	96%	87%	94%
8.6	Have you been physically restrained (C & R) since you have been here?	52%	20%	55%	26%
8.7	Did the staff treat you well/very well?	13%	39%	8%	33%
SECTION 9: SAFETY					
9.1	Have you ever felt unsafe in this prison?	18%	35%	0%	35%
If you have felt victimised by another young person/group of young people, did the incident involve:					
9.4b	Physical abuse?	4%	11%	0%	12%
9.4d	Racial or ethnic abuse?	4%	0%	0%	1%
9.4e	Your religious beliefs?	4%	0%	0%	1%
9.4f	Your disability?	4%	2%	0%	2%
9.4k	Gang related issues?	6%	3%	0%	5%
9.6	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	15%	15%	21%	15%

Key to tables

		Black and minority ethnic young people	White young people	Muslim young people	Non-Muslim young people
	Any percent highlighted in green is significantly better.				
	Any percent highlighted in blue is significantly worse.				
	Any percent highlighted in orange shows a significant difference in demographic details.				
	Percentages which are not highlighted show there is no significant difference.				
Number of completed questionnaires returned		41	86	14	111
If you have felt victimised by a member of staff/group of staff members, did the incident involve:					
9.5b	Physical abuse?	9%	2%	10%	3%
9.5d	Racial or ethnic abuse?	4%	2%	10%	1%
9.5e	Your religious beliefs?	4%	2%	10%	1%
9.5f	Your disability?	0%	2%	0%	1%
9.5k	Gang related issues?	2%	2%	0%	2%
9.9	If you were being victimised by another young person or a member of staff would you be able to tell anyone about it?	47%	61%	50%	58%
SECTION 10: ACTIVITIES					
Do you take part in any of the following:					
10.3a	Education?	91%	84%	100%	85%
10.3b	A job in this establishment?	16%	26%	10%	24%
10.3c	Vocational or skills training?	27%	36%	47%	32%
10.3d	Offending behaviour programmes?	26%	25%	40%	21%
10.5	Do you usually have association everyday?	86%	97%	85%	95%
10.6	Do you go to the gym more than five times each week?	4%	8%	10%	6%
10.7	Can you usually go outside for exercise every day?	43%	36%	40%	38%
SECTION 11: KEEPING IN TOUCH WITH FAMILY AND FRIENDS					
11.1	Are you able to use the telephone every day?	84%	87%	75%	88%
11.2	Have you had any problems with sending or receiving letters or parcels?	42%	38%	44%	38%
11.3	Is it easy/very easy for your family and friends to visit you here?	43%	47%	33%	46%
SECTION 12: PREPARATION FOR RELEASE					
12.3	Do you feel helped by your personal officer?	61%	83%	56%	78%
12.4	Do you have a training plan?	71%	64%	68%	64%
12.5b	Do you understand the targets set in your training plan?	87%	79%	81%	81%
12.6	Has your YOT worker been in touch since you arrived here?	89%	84%	85%	86%
12.11	Is there anything you would still like help with before you are released?	38%	28%	47%	29%
12.13	Do you want to stop offending?	89%	90%	88%	91%
12.14	Have you done anything or has anything happened to you here that you think will make you less likely to offend in the future?	63%	52%	56%	56%



Survey responses from children and young people: HMYOI Warren Hill 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

		HMYOI Warren Hill 2009	Young people's comparator	HMYOI Warren Hill 2009	HMYOI Warren Hill 2008
	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.				
Number of completed questionnaires returned		104	1138	104	79
SECTION 1: ABOUT YOU					
1.1	Are you 18 years of age?	11%	9%	11%	3%
1.2	Are you a foreign national?	5%	2%	5%	
1.3	Is English your first language?	93%	93%	93%	93%
1.4	Are you from a minority ethnic group (including all those who did not tick White British, White Irish or White Other category)?	30%	32%	30%	39%
1.5	Do you consider yourself to be Gypsy/Romany/Traveller?	8%		8%	
1.6	Are you Muslim?	10%	9%	10%	
1.7	Do you have any children?	8%	12%	8%	9%
SECTION 2: ABOUT YOUR SENTENCE					
2.2	Are you sentenced?	80%	78%	80%	81%
2.3	Is your sentence 12 months or less?	44%	37%	44%	52%
2.4	Do you have less than six months to serve?	56%	53%	56%	63%
2.5	Have you been in this prison less than a month?	19%	22%	19%	17%
2.6	Is this the first time that you have been in a YOI, secure children's home or secure training centre before?	30%	43%	30%	47%
2.7	Have you been to any other YOI during this sentence?	22%	28%	22%	24%
SECTION 3: COURTS, TRANSFERS AND ESCORTS					
For your most recent journey, either to or from court, or between prisons, we want to know:					
3.1	Was the van clean?	53%	46%	53%	58%
3.2	Was the van comfortable?	9%	11%	9%	3%
3.3	Did you feel safe?	82%	76%	82%	80%
3.4	Did you travel with any adults (over 18) or anyone of a different gender?	25%	32%	25%	
3.5	Did you spend more than four hours in the van?	7%	6%	7%	8%
For those who spent two or more hours in the escort van:					
3.6	Were you offered a toilet break if you needed it?	20%	18%	20%	18%
3.7	Were you offered anything to eat or drink?	54%	34%	54%	
3.8	Were you treated well/very well by the escort staff?	62%	60%	62%	60%
3.9	Did someone tell you where you were going when you left court?	82%	80%	82%	
3.10	Did you receive written information about where you were going when you left court?	3%	4%	3%	
SECTION 4: YOUR FIRST FEW DAYS HERE					
4.1	Were you in reception for less than two hours?	82%	78%	82%	89%
4.2	Were you seen by a member of healthcare staff in reception?	91%	88%	91%	81%
4.3	When you were searched was this carried out in an understanding way?	90%	81%	90%	86%
4.4	Were you treated well/very well in reception?	80%	69%	80%	69%

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SECTION 4: YOUR FIRST FEW DAYS HERE cont.					
When you first arrived, did staff ask if you needed help or support with any of the following:					
4.5a	Not being able to smoke?	57%	64%	57%	
4.5b	Loss of property?	28%	23%	28%	
4.5c	Housing problems?	28%	19%	28%	
4.5d	Needing protection from other young people?	30%	22%	30%	
4.5e	Letting family know where you are?	64%	58%	64%	
4.5f	Money worries?	21%	17%	21%	
4.5g	Feeling low/upset/needing someone to talk to?	41%	45%	41%	
4.5h	Health problems?	56%	53%	56%	
4.5i	Getting phone numbers?	53%	41%	53%	
4.6	Did you have any problems when you first arrived?	68%	74%	68%	80%
When you first arrived, did you have problems with any of the following:					
4.6a	Not being able to smoke?	46%	45%	46%	48%
4.6b	Loss of property?	7%	10%	7%	5%
4.6c	Housing problems?	15%	11%	15%	22%
4.6d	Needing protection from other young people?	4%	5%	4%	5%
4.6e	Letting family know where you are?	17%	20%	17%	22%
4.6f	Money worries?	8%	16%	8%	30%
4.6g	Feeling low/upset/needing someone to talk to?	15%	19%	15%	28%
4.6h	Health problems?	10%	11%	10%	5%
4.6i	Getting phone numbers?	25%	25%	25%	
When you first arrived, were you given any of the following:					
4.7a	A reception pack?	84%	80%	84%	
4.7b	The opportunity to have a shower?	31%	25%	31%	
4.7c	Something to eat?	92%	82%	92%	
4.7d	A free phone call to friends/family?	91%	83%	91%	88%
4.7e	Information about the PIN telephone system?	60%	61%	60%	
4.7f	Information about feeling low/upset?	45%	36%	45%	
Within your first 24 hours, did you have access to the following people or services:					
4.8a	The chaplain or religious leader?	55%	41%	55%	47%
4.8b	Someone from healthcare?	79%	55%	79%	65%
4.8c	A peer mentor, Listener or Samaritans?	23%	15%	23%	14%
4.8d	Did you have access to the prison shop/canteen?	14%	16%	14%	14%
4.9	Did you feel safe on your first night here?	83%	83%	83%	81%
For those who had an induction:					
4.10	Did you go on an induction course within your first week?	85%	75%	85%	96%
4.11	Did the induction course cover everything you needed to know about the establishment?	78%	67%	78%	69%

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SECTION 5: DAILY LIFE HERE					
5.1	Can you normally have a shower everyday if you want to?	92%	56%	92%	96%
5.2	Is your cell call bell normally answered within five minutes?	20%	31%	20%	20%
5.3	Do you find the food here good/very good?	12%	22%	12%	12%
5.4	Does the shop/canteen sell a wide enough variety of products?	62%	38%	62%	37%
5.5	Is it easy/very easy for you to attend religious services?	75%	55%	75%	60%
5.6a	Do you feel your religious beliefs are respected?	54%	49%	54%	
5.6b	Can you speak to a religious leader in private if you want to?	67%	65%	67%	
5.7a	Is there a member of staff you can turn to with a problem?	82%	71%	82%	
5.7b	Do most staff treat you with respect?	79%	71%	79%	77%
SECTION 6: HEALTHCARE					
6.1	Do you think the overall quality of the healthcare is good/very good?	60%	59%	60%	52%
6.2a	Is it easy for you to see the doctor?	52%	48%	52%	48%
6.2b	Is it easy for you to see the nurse?	73%	69%	73%	70%
6.2c	Is it easy for you to see the dentist?	19%	27%	19%	22%
6.2d	Is it easy for you to see the optician?	18%	21%	18%	19%
6.2e	Is it easy for you to see the pharmacist?	28%	27%	28%	
6.3	For those on medication: Have you had any problems getting your medication?	20%	34%	20%	11%
6.4a	Did you have any problems with alcohol when you first arrived?	19%	15%	19%	12%
6.4b	Do you have any problems with alcohol now?	4%	5%	4%	
6.4c	Have you received any help with any alcohol problems here?	25%	18%	25%	24%
6.5a	Did you have any problems with drugs when you first arrived?	42%	25%	42%	20%
6.5b	Do you have any problems with drugs now?	6%	10%	6%	
6.5c	Have you received any help with any drug problems here?	41%	29%	41%	47%
6.6	Is it easy/very easy to get illegal drugs here?	15%	26%	15%	
6.7	Do you feel you have any emotional or mental health problems?	17%	29%	17%	
If you feel you have emotional or mental health problems, are you being helped by any of the following:					
6.8a	Do not have any/not getting any help	54%	33%	54%	
6.8b	Doctor?	8%	26%	8%	
6.8c	Nurse?	8%	29%	8%	
6.8d	Psychiatrist/psychologist?	31%	30%	31%	
6.8e	Counsellor?	31%	15%	31%	
SECTION 7: APPLICATIONS AND COMPLAINTS					
7.1	Do you know how to make an application?	94%	88%	94%	
7.2	Is it easy to make an application?	90%	80%	90%	
For those who have made an application:					
7.3a	Do you feel applications are sorted out fairly?	73%	68%	73%	
7.3b	Do you feel applications are sorted out promptly (within seven days)?	60%	58%	60%	
7.4	Do you know how to make a complaint?	93%	78%	93%	89%
7.5	Is it easy to make a complaint?	84%	72%	84%	

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SECTION 7: APPLICATIONS AND COMPLAINTS cont.					
For those who have made a complaint:					
7.6a	Do you feel complaints are sorted out fairly?	49%	36%	49%	37%
7.6b	Do you feel complaints are sorted out promptly (within seven days)?	51%	44%	51%	
7.6c	Have you ever been encouraged to withdraw a complaint?	20%	25%	20%	17%
Can you speak to the following people when you need to:					
7.7a	A peer mentor or listener?	45%	37%	45%	
7.7b	A member of the IMB (Independent Monitoring Board)	52%	29%	52%	
7.7c	An advocate (an outside person to help you)	41%	40%	41%	34%
SECTION 8: REWARDS & SANCTIONS, AND DISCIPLINE					
8.1	Are you on the enhanced (top) level of the reward scheme?	35%	26%	35%	26%
8.2	Do you feel you have been treated fairly in your experience of the reward scheme?	63%	57%	63%	50%
8.3	Do the different levels make you change your behaviour?	58%	59%	58%	69%
8.4	Have you had a 'nicking' (adjudication) since you have been here?	55%	58%	55%	65%
8.5	Was the 'nicking' (adjudication) process explained clearly to you?	94%	89%	94%	
8.6	Have you been physically restrained (C & R) since you have been here?	35%	27%	35%	38%
8.7	For those who had spent a night in the segregation/CSU: Did the staff treat you well/very well?	26%	43%	26%	31%
SECTION 9: SAFETY					
9.1	Have you ever felt unsafe in this prison?	34%	29%	34%	40%
9.3	Has another young person or group of young people victimised (insulted or assaulted) you here?	31%	24%	31%	36%
If you have felt victimised by another young person/group of young people, did the incident involve:					
9.4a	Insulting remarks?	15%	13%	15%	18%
9.4b	Physical abuse?	12%	9%	12%	14%
9.4c	Sexual abuse?	0%	1%	0%	0%
9.4d	Racial or ethnic abuse?	1%	4%	1%	3%
9.4e	Your religious beliefs?	1%	2%	1%	
9.4f	Your disability?	2%	2%	2%	
9.4g	Drugs?	4%	2%	4%	1%
9.4h	Having your canteen/property taken?	10%	3%	10%	14%
9.4i	Because you were new here?	13%	6%	13%	20%
9.4j	Being from a different part of the country than others?	4%	5%	4%	9%
9.4k	Gang related issues?	6%	7%	6%	
9.4l	Your offence/crime?	2%	3%	2%	
9.6	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	17%	20%	17%	27%
If you have felt victimised by a member of staff/group of staff members, did the incident involve:					
9.5a	Insulting remarks?	12%	11%	12%	20%
9.5b	Physical abuse?	4%	4%	4%	0%
9.5c	Sexual abuse?	1%	1%	1%	1%
9.5d	Racial or ethnic abuse?	2%	3%	2%	7%
9.5e	Your religious beliefs?	2%	1%	2%	
9.5f	Your disability?	1%	1%	1%	
9.5g	Drugs?	1%	1%	1%	0%
9.5h	Having your canteen/property taken?	4%	2%	4%	3%
9.5i	Because you were new here?	2%	3%	2%	4%
9.5j	Being from a different part of the country than others?	1%	2%	1%	1%

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SECTION 9: SAFETY cont.					
9.5k	Gang related issues?	1%	2%	1%	
9.5l	Your offence/crime?	2%	3%	2%	
9.9	If you were being victimised by another young person or a member of staff would you be able to tell anyone about it?	60%	62%	60%	51%
9.10	If you did tell a member of staff that you were being victimised do you think it would be taken seriously?	46%	38%	46%	38%
9.11	Is shouting through the windows a problem here?	44%	39%	44%	
9.12	Have staff checked on you personally in the last week to see how you are getting on?	42%	35%	42%	48%
SECTION 10: ACTIVITIES					
10.1	Were you 14 or younger when you were last at school?	50%	39%	50%	44%
10.2a	Have you ever been excluded from school?	96%	88%	96%	91%
10.2b	Have you ever truanted from school?	82%	69%	82%	77%
Do you currently take part in any of the following:					
10.3a	Education?	84%	77%	84%	92%
10.3b	A job in this establishment?	19%	27%	19%	19%
10.3c	Vocational or skills training?	35%	41%	35%	50%
10.3d	Offending behaviour programmes?	18%	26%	18%	
For those who have taken part in the following activities, whilst in this prison: Do you think that they will help you when you leave prison?					
10.4a	Education?	78%	74%	78%	
10.4b	A job in this establishment?	56%	69%	56%	
10.4c	Vocational or skills training?	70%	70%	70%	
10.4d	Offending behaviour programmes?	54%	63%	54%	
10.5	Do you usually have association everyday?	92%	45%	92%	74%
10.6	Do you go to the gym more than five times each week?	6%	8%	6%	1%
10.7	Can you usually go outside for exercise every day?	30%	23%	30%	11%
SECTION 11: KEEPING IN TOUCH WITH FAMILY AND FRIENDS					
11.1	Are you able to use the telephone every day?	86%	50%	86%	78%
11.2	Have you had any problems with sending or receiving letters or parcels?	42%	32%	42%	29%
11.3	Is it easy/very easy for your family and friends to visit you here?	43%	42%	43%	23%
11.4	Have you had two or more visits in the last month?	36%	48%	36%	39%
11.5	Do your visits start on time?	38%	45%	38%	
11.6	Are you and your visitors treated well/very well by visits staff?	49%	54%	49%	51%
SECTION 12: PREPARATION FOR RELEASE					
For those who have met their personal officer:					
12.1	Did you meet your personal officer within the first week?	55%	50%	55%	33%
12.2	Do you see your personal officer at least once a week?	83%	63%	83%	
12.3	Do you feel your personal officer has helped you?	77%	60%	77%	60%
12.4	Do you have a training plan?	62%	47%	62%	
For those with a training plan:					
12.5a	Were you involved in the development of your training plan?	70%	55%	70%	
12.5b	Do you understand the targets set in your training plan?	83%	73%	83%	
12.5c	Can you see your training plan when you want to?	46%	38%	46%	30%
12.6	Has your YOT worker been in touch since you arrived here?	85%	83%	85%	
12.7	Do you know how to get in touch with your YOT worker?	76%	60%	76%	

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SECTION 12: PREPARATION FOR RELEASE cont.					
Please 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?	51%	42%	51%	53%
12.8b	Are you going to school or college on release?	69%	50%	69%	51%
12.8c	Do you have a job to go to on release?	16%	24%	16%	12%
Do you know who to contact for help with the following, in preparation for your release:					
12.9a	Finding accommodation	52%	44%	52%	
12.9b	Getting into school or college	69%	56%	69%	
12.9c	Getting a job	54%	55%	54%	
12.9d	Help with money/finances	38%	42%	38%	
12.9e	Help with claiming benefits	40%	38%	40%	
12.9f	Continuing health services	30%	31%	30%	
12.9g	Opening a bank account	46%	40%	46%	
12.9h	Avoiding bad relationships	29%	30%	29%	
Do you think you will have a problem with the following, when you are released:					
12.10a	Finding accommodation?	32%	23%	32%	
12.10b	Getting into school or college?	27%	26%	27%	
12.10c	Getting a job?	50%	48%	50%	
12.10d	Help with money/finances?	32%	33%	32%	
12.10e	Help with claiming benefits?	24%	24%	24%	
12.10f	Continuing health services?	9%	11%	9%	
12.10g	Opening a bank account?	5%	14%	5%	
12.10h	Avoiding bad relationships?	22%	19%	22%	
12.11	Is there anything you would still like help with before you are released?	31%	38%	31%	47%
For those who were sentenced:					
12.13	Do you want to stop offending?	88%	91%	88%	93%
12.14	Have you done anything or has anything happened to you here that you think will make you less likely to offend in the future?	54%	51%	54%	52%