

Report on an unannounced full follow-up  
inspection of

**HMP/YOI Eastwood Park**

**Mary Carpenter Unit**

13 - 17 August 2012

by HM Chief Inspector of Prisons

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# Introduction

The Mary Carpenter Unit is a small facility for 17-year-old young women, which is located in Eastwood Park women's prison, Gloucestershire. Although it can hold up to 16 young women, at the time of our inspection there were just six in the facility.

This unannounced inspection followed up the findings and recommendations of our previous visit in early 2011. Although we found some changes, with both improvements and some emergent weaknesses, overall the unit continued to ensure good and meaningful outcomes for young women through an approach that was tailored to their individual needs.

The unit was a safe place. There was little bullying, supported by the good supervision that came from effective staff engagement and the confidence that young women and staff had in being able to report and challenge any incidents. Formal child protection structures had improved, and behaviour management arrangements seemed to work and were understood by all. There had been a slight increase in the use of force but we were satisfied the unit had a proportionate approach to security and control.

Although it remained good overall, we had criticisms of some aspects of respect on the unit. Relationships between staff and young people remained excellent and the quality of engagement was both consistent and purposeful. Young women from minority backgrounds were well supported, although some structures to support diversity needed some improvement. However, the quality of the environment was disappointing. Communal areas were reasonable and access to amenities was good, but cells were grubby and the unit had an institutional feel at odds with our other observations. Hygiene in the kitchen was also poor and the food unappetising. Health care was good, with the mental health service exceptional.

The provision of activity had deteriorated slightly since our last visit. There was slightly less time out of cell for young women, although it remained good, and there had been contraction in the range of education and vocational training, with training now quite limited. There was also a need for greater engagement with young women in planning their learning objectives.

The unit's approach to the planning of resettlement remained essentially bespoke, and was mostly organised and coordinated by its youth offending team (YOT) worker. The approach was collaborative, there was effective use of temporary release to support resettlement, and clear evidence of joint working with the young person's home YOT and other agencies.

The Mary Carpenter Unit is a highly specialised facility. Although it holds only a few young women, the challenge of providing interventions that work, for arguably some of the most damaged and vulnerable young women in the country, should not be underestimated. The evidence we saw suggests that the unit continues to provide a good service with good outcomes.

**Nick Hardwick**  
HM Chief Inspector of Prisons

November 2012



# Fact page

## **Task of the establishment**

The task of the Mary Carpenter unit is to look after 17-year-old young women on remand, serving detention and training orders or Section 91/92 sentences.

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

Public

## **Region/Department**

South west

## **Number held**

6

## **Certified normal accommodation**

16

## **Operational capacity**

17

## **Date of last full inspection**

10-14 January 2011

## **Brief history**

The Mary Carpenter unit was opened on 24 October 2005 as a discrete, dedicated juvenile unit in the grounds of Eastwood Park. It is built over two storeys with 16 beds.

## **Short description of residential units**

The unit has 15 single cells, one of which has been adapted for a young woman with a disability, and one double cell. Living, dining and association areas are on the upper floor. Education, youth offending team, young people's substance misuse service and administrative areas are on the lower floor.

## **Name of governor/director**

Simon Beecroft

## **Escort contractor**

GeoAmey custodial services

## **Health service commissioner and providers**

Bristol Community Health

North Bristol NHS Trust CAMHS

Hanham Health

Serco Health

There is separate provision in the establishment health care contract for a designated nurse for the unit and dedicated mental health provision through the child and adolescent mental health service.

## **Learning and skills providers**

Norton Radstock College

Connexions

**Independent Monitoring Board chair**  
Jonathan Doran

# Healthy prison summary

## Introduction

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HP1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police, courts and customs custody.

HP2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.

HP3 All Inspectorate of Prisons reports include a summary of an establishment's performance against the model of a healthy prison. The four criteria of a healthy prison are:

<b>Safety</b>	children and young people, particularly the most vulnerable, are held safely
<b>Respect</b>	children and young people are treated with respect for their human dignity
<b>Purposeful activity</b>	children and young people are able, and expected, to engage in activity that is likely to benefit them
<b>Resettlement</b>	children and young people are prepared for their release into the community and helped to reduce the likelihood of reoffending.

HP4 Under each test, we make an assessment of outcomes for children and young people and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed nationally.

**- outcomes for children and young people are good against this healthy prison test.**

There is no evidence that outcomes for children and young people are being adversely affected in any significant areas.

**- outcomes for children and young people are reasonably good against this healthy prison test.**

There is evidence of adverse outcomes for children and young people in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.

**- outcomes for prisoners are not sufficiently good against this healthy prison**

**test.**

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

**- outcomes for children and young people are poor against this healthy prison test.**

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

- HP5 The Inspectorate conducts follow-up inspections to assess progress against recommendations made in the previous full inspection. Follow-up inspections may be announced or unannounced and are proportionate to risk. In full follow-up inspections inspectors conduct a new inspection of the establishment and also assess whether recommendations made at the previous inspection have been achieved. They also investigate areas of serious concern identified in the previous inspection, or matters of concern subsequently drawn to the attention of the Chief Inspector. Inspectors use the findings of prisoner surveys (where available), prisoner focus groups, research analysis of prison data and observation. This enables a reassessment of previous healthy prison assessments held by the Inspectorate on all establishments, and published in reports from 2004 onwards. Full follow-up reports are presented as full inspection reports with a new set of recommendations. Repeated recommendations are, however, indicated within the main report, and a list of recommendations from the previous inspection, and our assessment of whether they have been achieved, is contained in the appendices.

## Safety

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- HP6 Late arrivals continued to occur and caused unnecessary disruption. Young people were treated positively on admission and were dealt with well during the early days phase. Staff prioritised the welfare of young women and this helped make them feel safe on the unit. Child protection procedures had improved and were now good, but the care-planning arrangements were still not integrated. Little bullying took place on the unit, but where it did occur, staff dealt with it effectively. Vulnerable young women were well cared for. Checks and balances had been introduced to improve the disciplinary procedures. The use of force was not high and was only carried out when necessary. Separation was used sparingly and young women subject to this procedure were reintegrated into the mainstream regime as quickly as possible. Young women said they felt safe on the unit.
- HP7 Outcomes for children and young people were good against this healthy prison test.
- HP8 At the last inspection in January 2011, we found that outcomes for young women were reasonably good against this healthy prison test. We made 23 recommendations in the area of safety. At this follow-up inspection we found that 20 of the recommendations had been achieved or partially achieved, one had not been achieved and two were no longer relevant.

- HP9 Young women did not report any concerns about the way they were treated while on escort to the prison. The majority of young women were admitted before 7pm, but a significant minority arrived much later than this.<sup>1</sup>
- HP10 Court video-link facilities were still underused but we were aware of work being undertaken to address this.
- HP11 First-night procedures for most young women were comprehensive. Risk was well managed and initial vulnerability screening was effective. Young women told us they were made to feel welcome and safe on arrival. Cells were not well prepared for new arrivals and many were dirty with graffiti throughout.
- HP12 The 'rough guide' provided a useful introduction to life on the unit and most young women said they found the induction process helpful.
- HP13 The establishment were active participants on the South Gloucestershire Safeguarding Children Board and there was a comprehensive jointly agreed safeguarding policy. The quarterly safeguarding committee addressed all key aspects of safeguarding, but attendance remained erratic.
- HP14 The weekly multidisciplinary unit meeting was well attended, and records reflected a high level of overall care for all young women on the unit. Care plans remained underdeveloped and did not contain clear assessments.
- HP15 The governance of child protection had improved and there was close independent oversight by the local authority. Staff received good training in child protection and this had been extended to include duty governors.
- HP16 We found no evidence of widespread bullying or intimidation, and young people were confident about how to report bullying to staff. Staff had a heightened awareness of bullying and were alert to the prospect of it occurring. The high level of staff engagement and supervision, supplemented by the widespread CCTV coverage, reduced the opportunities for bullying to occur, but where it did, staff addressed it directly.
- HP17 The number of self-harm incidents had increased slightly since the previous inspection but these were closely monitored through the safeguarding committee. The majority of ACCTs (assessment, care in custody and teamwork) were opened in response to concerns about young women rather than actual self-harm incidents. The ACCT process had been adapted to try to maximise the involvement of staff without disrupting the young woman's educational experience. The quality of ACCT

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<sup>1</sup>**Inspection methodology:** There are five key sources of evidence for inspection: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections, we use a mixed-method approach to data gathering, applying both qualitative and quantitative methodologies. All findings and judgements are triangulated, which increases the validity of the data gathered. Survey results show the collective response (in percentages) from prisoners in the establishment being inspected compared with the collective response (in percentages) from respondents in all establishments of that type (the comparator figure). Where references to comparisons between these two sets of figures are made in the report, these relate to statistically significant differences only. Statistical significance is a way of estimating the likelihood that a difference between two samples indicates a real difference between the populations from which the samples are taken, rather than being due to chance. If a result is very unlikely to have arisen by chance, we say it is 'statistically significant'. The significance level is set at 0.05, which means that there is only a 5% chance that the difference in results is due to chance. (Adapted from Towl et al (eds), *Dictionary of Forensic Psychology*.)

documentation was good, with regular multidisciplinary input, and additional ad hoc reviews were convened in response to new information or events.

- HP18 The behaviour management policy was comprehensive and each of the component parts was monitored effectively through the safeguarding committee. Rules about expected behaviour were clear and proportionate and young women understood them.
- HP19 Several positive changes had been made to the way the rewards and sanctions scheme operated and there was some evidence that it was motivational. The popular credit scheme that operated alongside the rewards and sanctions scheme provided young women with an additional opportunity for receiving reward for good behaviour.
- HP20 Overall the security arrangements were proportionate to the function of the unit. Dynamic security was underpinned by very good relationships between staff and young women and security information was shared effectively.
- HP21 Half the young women had been subject to adjudication procedures and they all said the process had been explained clearly to them. Minor reports were underused.
- HP22 Searching arrangements were appropriate to the age group and there was no routine strip-searching. We welcomed the fact that forcible strip-searching was explicitly prohibited.
- HP23 There had been a slight increase in the use of force since the last inspection. The documentation showed that force was only used when other means of dealing with a situation had failed and that it was not used for longer than necessary. Governance of use of force was thorough. Debriefs following use of force were conducted by someone not involved in the incident and provided valuable information about the young woman's perception of the event.
- HP24 The use of good order or discipline (GOOD) was slightly lower than reported at the previous inspection. The targets being set for young women on GOOD were not specific to the individual and tended to be formulaic. Although daily reviews of GOOD had been introduced and were being used effectively to help young women re-engage, the regime on GOOD remained very limited.
- HP25 The substance misuse service available for young women was very good. The supply reduction strategy on the unit was effective and mandatory drug testing results were consistently negative. Psychosocial interventions were comprehensive and the clinical management was good. Voluntary drug testing was available: there had been no recent positive tests.

## Respect

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- HP26 The standard of the living accommodation had deteriorated. Relationships remained very good, with key workers continuing to provide a high level of individual support. Young women's views were taken seriously at the consultation meeting and complaints were dealt with fairly. Meals were eaten communally in a pleasant environment, but young women did not like the food. Young women from minority groups received good support and there were no signs of obvious discrimination. The

chaplain had a high profile on the unit. Health care services in general were good and particularly good in relation to mental health.

HP27 Outcomes for children and young people were good against this healthy prison test.

HP28 At the last inspection in January 2011, we found that outcomes for young women in the Mary Carpenter unit were good against this healthy prison test. We made 17 recommendations in the area of respect. At this follow-up inspection we found that 13 of the recommendations had been achieved or partially achieved, and four had not been achieved.

HP29 Communal areas were clean and bright but cells in general were in need of decoration. The overall atmosphere on the unit was rather institutionalised.

HP30 Many of the cells contained graffiti, some of which was offensive. Toilets and sinks were dirty and some were in a poor state of repair. Laundry facilities were good and the clothing provided was in good condition.

HP31 Applications were well managed, with most requests being dealt with informally by unit staff.

HP32 Access to telephone calls was good but there was a delay in the mail being delivered.

HP33 The interaction which we observed between young people and staff was consistently respectful. In our survey and during the inspection, contact between young women and all the staff on the unit was positive, showing an appropriate balance of care and control. The key worker scheme operated well and the weekly contact with young women's families was a positive feature. Staff regularly made useful written entries on wing records but not all key staff contributed.

HP34 Not all protected diversity characteristics were identified formally on admission. All staff on the unit had completed equality related training. Diversity matters were dealt with on an individual basis and, where staff were aware of the need, young women from minority backgrounds received good personal support. There were designated diversity staff on the unit, but young women were not always aware of who they were. The small number of discrimination incident report forms raised were investigated thoroughly.

HP35 The education department, unit chaplain and diversity officer provided a range of activities to promote and celebrate diversity on the unit, but displays about diversity were limited.

HP36 There were procedures in place to ensure that young women from a foreign national background received their additional entitlements.

HP37 The unit chaplain had a high profile and regularly attended the unit multidisciplinary meeting. She was popular with the young women and they could contact her easily. Young women were well supported in practising their faith. They had the opportunity to attend corporate services and adequate provision was made for those following minority faiths. Pastoral care was good.

HP38 Young women felt confident about expressing their views and on a day-to-day basis many complaints were dealt with by staff informally. Young women did not raise large

numbers of formal complaints but, where they were made, they were dealt with promptly and respectfully.

- HP39 On admission, young women were given clear information about the nature of their sentence or remand status. Young women had good access to their legal advisers and were permitted free confidential telephone calls when they needed them. Unit staff arranged contact with key professionals involved in bail applications, which enabled assessments to be completed on time.
- HP40 Young women were happy with the health care services they received. Governance arrangements had improved since our last inspection and the health centre had been refurbished to a high standard. Best practice had been established in infection control and in the way immediate life-threatening situations were dealt with.
- HP41 Primary care of young women was very good, although there was a lack of visiting specialists. Pharmacy and dental services were good. Mental health care for young women was exceptional. Provision was now available for clinical psychology and speech and language therapy.
- HP42 In our survey, most of the young women said the food was poor; the meals we sampled varied in quality but were mostly bland and unappetising. Young women received advice about healthy eating and food hygiene in education classes.
- HP43 Cleaning routines in the prison kitchen were disorganised and hygiene in the prisoner toilet and shower areas was particularly poor.

## Purposeful activity

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- HP44 There had been a slight reduction in the amount of time young women were unlocked. There had also been a significant reduction in the level of learning and skills provision. The standard of coaching, teaching and learning was good and there were no problems with attendance and punctuality. Levels of accreditation were appropriate but the range of vocational training was poor. Records of progress lacked detail and young women were not sufficiently involved in planning their work. All young women had sufficient access to the library and the gym.
- HP45 Outcomes for children and young people were reasonably good against this healthy prison test.
- HP46 At the last inspection in January 2011 we found that outcomes for young women in the Mary Carpenter unit were good against this healthy prison test. We made seven recommendations in the area of purposeful activity. They were all either achieved or partially achieved.
- HP47 Since the previous inspection, there had been a reduction in the amount of time out of cell. Despite this, during the week most young women still met our indicator of spending at least 10 hours each day out of their cell. Time out of cell at weekends had improved for young women on the lowest level of the rewards and sanctions scheme.

- HP48 The published regime was mostly adhered to, although we had some concerns that association had recently been cancelled or curtailed when staff were needed elsewhere in the establishment.
- HP49 There had been a reduction in the funded hours available for learning and skills from the main education and training provider and this had had an adverse impact on young women's learning. Unit staff had attempted to offset this deficit by providing creative activity sessions, but this was no substitute for professionally delivered education and training.
- HP50 The educational element of the induction process was effective and learning styles were taken into account to help identify suitable programmes and levels of study.
- HP51 The standard of teaching and learning was good. Lessons were well planned, focussed, and interesting. Teaching staff challenged young women appropriately on behaviour, attitude and respect for others. Attendance at class and punctuality were good. Assessment was satisfactory and while most homework was marked appropriately, some spelling and accuracy was not recorded sufficiently well to help young women know what they had to do to improve.
- HP52 The range of vocational training was poor; levels of accreditation were appropriate. The progress that young women made against their learning objectives was satisfactory.
- HP53 Facilities and resources were satisfactory. The virtual campus was not connected and young women did not have access to sufficient information about future learning and employment opportunities.
- HP54 Young women had adequate opportunities to attend the library. There was sufficient stock to meet most of their needs but there was a lack of material covering work related opportunities.
- HP55 All young women had sufficient access to the gym. The facilities were good and classes were well run. Gym staff promoted the importance of health and fitness well during activity sessions.

## Resettlement

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- HP56 The strategic management of resettlement was in a state of flux. The planning arrangements continued to work well. Pathway work was generally effective and delivered mainly by the unit based youth offending team worker. Young women who did not receive visits required additional support to maintain contact with their family.
- HP57 Outcomes for children and young people were good against this healthy prison test.
- HP58 At the last inspection in January 2011 we found that outcomes for young women in the Mary Carpenter unit were good against this healthy prison test. We made eight recommendations in the area of resettlement. At this follow-up inspection we found that two of the recommendations had been achieved and six had not been achieved.

- HP59 The strategic direction of resettlement was currently under review and a new resettlement strategy was in the process of being drafted. Full resettlement strategy meetings were not yet being held, and all the relevant data were not being collected.
- HP60 Release on temporary licence was used effectively to help young women maintain contact with their family and for other individualised support, but there were still no training or work experience placements.
- HP61 All young women continued to have detailed training and remand management plans, with clear targets, which were properly reviewed at planning meetings. Training planning and remand management meetings were timely and we observed a very difficult meeting that was well managed by unit staff. Although attendance at review meetings by internal staff appeared to have been satisfactory, this was not monitored and it was not known if there were regular absences from specific departments.
- HP62 Early release arrangements for detention and training orders were managed well and there was evidence of the unit correctly releasing young women early, even when there was some resistance from their local youth offending team (YOT).
- HP63 There were good arrangements in place to identify young women who were assessed as being a risk to the public. Risk was monitored regularly and the internal YOT worker was able to attend all relevant multi-agency public protection meetings in the community.
- HP64 All young women admitted to the unit who had looked-after status were promptly identified and the relevant local authority was notified.
- HP65 Work to prepare young women for release was led by the internal YOT worker and was mostly effective. There was good engagement with agencies which could help young women with housing difficulties and support was given to those who wished to attend college. Appropriate help was given to assist young women to manage their money properly. All young women were able to attend regular group and individual interventions, to help improve their life skills.
- HP66 All young women were offered pre-release health assessments and advice on accessing health services in the community, including those who needed help with drug and alcohol problems.
- HP67 Take up of visits was low and staff did not readily know which young women were not receiving visits. The duration of visits was too short and family days did not take place often enough.

# Section 1: Safety

The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report.

## Courts, escorts and transfers

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Expected outcomes:

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

- 1.1 Young women were escorted in reasonably equipped, clean vans. Some journeys were long and some young women did not arrive at the prison until late evening. Information about Mary Carpenter unit was not given to young women before their arrival.
- 1.2 Escort vehicles that we observed were clean, in good order and carried adequate refreshments.
- 1.3 The prison's catchment area extended from the Midlands to South Cornwall, leading to some lengthy journeys to and from court; despite this, video-court facilities had only been used on two occasions during 2012.
- 1.4 Court detention records that we examined were not fully completed and in two cases out of 12 monitoring had not been recorded for over six hours. None of the young women we spoke to had received any information about the unit prior to arrival.
- 1.5 A stock of suitable clothing was available for young women to wear to court if they did not have sufficient personal clothing.
- 1.6 Arrival procedures were efficient and young women arriving at the prison were located on the unit promptly.
- 1.7 Records showed that young women sometimes arrived at the prison over an hour after lock-up: they were locked up immediately after initial safety screening with little opportunity for staff to introduce them to the unit or to allow them time to settle in.

## Recommendations

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- 1.8 Greater use should be made of the video conferencing facilities.
- 1.9 Comprehensive custody records should be maintained while young women are out of the prison.

## Housekeeping point

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- 1.10 Young women being admitted to the unit should be supplied with written information about it in advance.

## Early days in custody

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### Expected outcomes:

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

- 1.11 Reception procedures were thorough, although interviews were not held in private. The initial screening process was comprehensive but the cells used to locate young women on their first night were sometimes dirty and not properly prepared. Induction took place soon after arrival and young women were confident that they received all the information they needed to make full use of the services and opportunities available on the unit.
- 1.12 Reception procedures, which took place on the unit, were comprehensive and included a wide range of initial safety checks and vulnerability screening. Young women were made to feel welcome and given the opportunity to raise any concerns with staff before being located on the residential landing. Confidential personal interviews continued to be conducted in an area that was used by other staff as a thoroughfare and adjacent to the unit activity areas. A free telephone call was offered to all newly arriving young women.
- 1.13 It was very rare for young women to be strip-searched and this would only be carried out following a risk assessment. Procedures governing the level of search were clear to all staff and an appropriate level of authority was required prior to anything other than a rub-down search.
- 1.14 Most young women arrived in time for first night procedures to be completed before day staff went off duty. They were introduced to other young women and shown around the unit. Otherwise, first night procedures were conducted by the night patrol officer who was one of the regular staff on shift rotation. This level of continuity enabled a consistently high level of work practice to be maintained.
- 1.15 There were no designated first-night cells and almost all the empty cells that we inspected were dirty and had offensive graffiti on walls, picture boards, mirror surrounds and doors (see section on residential units).
- 1.16 Induction started the day after reception with a one-to-one session between a key worker and the young woman (see section on relationships). A wide range of information was provided and discussed to enable young women to make best use of services and opportunities on the unit.

## Recommendations

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- 1.17 Reception interviews should be carried out in private. (Repeated recommendation 1.16)
- 1.18 Young women should arrive at the prison in time for the full range of first night procedures to take place.

## Housekeeping point

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- 1.19 Cells should be properly prepared for occupation.

# Care and protection of children and young people

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## Safeguarding

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### Expected outcomes:

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

- 1.20 There were strong links with the local safeguarding children board. The quarterly safeguarding committee addressed all key aspects of safeguarding, but attendance remained erratic. The weekly multidisciplinary meeting was well attended and the discussions that took place reflected a high level of overall care for young women. However, written care plans remained underdeveloped and did not describe clearly how a young woman's assessed needs would be met.
- 1.21 The unit manager was an active member of the South Gloucestershire Safeguarding Children Board (SGSCB). The unit had a comprehensive overarching safeguarding policy, which had been agreed with the SGSCB.
- 1.22 The safeguarding committee met quarterly to examine key aspects of safeguarding, including the monitoring of all injuries to young women. Minutes of the meeting were detailed and demonstrated a good level of scrutiny. This was confirmed by the representative from the SGSCB, who was also the local authority designated officer (LADO). However, despite the best efforts of the committee's chair and secretary to ensure good participation, this remained erratic and only a small group of people from the establishment attended consistently.
- 1.23 Relevant data were submitted to the meeting, but the small number of young women made it difficult to identify patterns and trends in increased risk or vulnerability. However, the committee was able to identify particularly vulnerable young women and scrutinise their care.
- 1.24 The unit held a weekly multidisciplinary meeting, which was well attended by staff from relevant departments. All young women were discussed at this meeting and the level of knowledge and understanding that staff had of the issues that individual young women faced was excellent

- 1.25 All young women had a care plan, but these remained underdeveloped and still did not contain a thorough assessment of the young women's needs or plans to show how these needs would be addressed. We scrutinised all the care plans of the young women who were on the unit and found that in most cases departments used them as a record of work being undertaken. Care plans were still not linked to the other types of plan that existed and there was no consistent method of recording the daily contact staff had with young women.

## Recommendations

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- 1.26 **Attendance by members of the safeguarding committee should be monitored and appropriate action taken following failures to attend.** (Repeated recommendation 3.8)
- 1.27 **All young women should have individual care plans based on a thorough assessment of their needs which address all aspects of their care and behaviour management.** (Repeated recommendation 3.10)

## Housekeeping point

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- 1.28 All contact with young women should be recorded in a consistent manner.

## Child protection

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### Expected outcomes:

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

- 1.29 The governance of child protection procedures had improved, with the introduction of a database and effective internal quality assurance by the child protection coordinator and safeguarding committee. There was independent oversight by the LADO, who approved the establishment's response to all child protection referrals. Child protection training gave unit staff a good grounding and it had been appropriately extended to include all duty governors.
- 1.30 A comprehensive child protection policy, which covered the whole establishment, had been agreed with the LADO, who also represented the SGSCB. The establishment whistle-blowing policy now included suitable reference to child protection matters and it was clear that staff understood their obligation to report any concerns they had about the young women in their care.
- 1.31 Child protection referrals continued to be referred initially to the duty governor and there was now an effective system for all referrals to be passed immediately to the child protection coordinator. In the child protection coordinator's absence, referrals were dealt with effectively by the duty governor who had taken the initial referral. All duty governors had now been trained in child protection procedures. Procedures had been put in place to ensure that all referrals were followed up by the child protection coordinator and their progress monitored. All completed referrals were signed off by the child protection coordinator and the LADO, once she was satisfied that investigations had been successfully concluded.
- 1.32 All new child protection referrals were entered on a database, which could be accessed by staff and was made available to the LADO. This enabled managers to identify patterns and trends, including repeated referrals involving the same members of staff. Examination of child

protection referrals showed that there had been one minor allegation of inappropriate behaviour by a member of staff. This had been properly investigated, and the child protection coordinator and LADO had agreed that there was no cause for concern. The nine other referrals made in 2012 involved historic abuse, potential risks to children in the community, concerns about young women's behaviour with each other, or possible contact with adults in the community. The child protection coordinator dealt directly with local authorities over potential concerns and the outcomes of these referrals were recorded. The safeguarding committee considered all outstanding child protection referrals, and the LADO told inspectors that she was confident the unit was managing child protection issues effectively.

- 1.33 All staff continued to receive basic child protection training through JASP (juvenile staff awareness programme) and the local authority continued to organise regular training. Staff said that the training they had received was helpful.

## Victims of bullying and intimidation

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### Expected outcomes:

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

- 1.34 The high staffing ratios helped to provide a safe environment and young women were confident about reporting antisocial behaviour. Incidents of bullying and intimidation were rare and were responded to quickly.

- 1.35 In our survey and during the inspection, young women told us that they were confident they could talk to staff about bullying. Staff had a good understanding of potential concerns and were clear how they would address them. The behaviour management policy laid out procedures for managing antisocial behaviour.

- 1.36 The very high staff-to-prisoner ratio and excellent interaction between staff and young women (supplemented by comprehensive CCTV coverage) afforded a supportive environment for young women. An information leaflet was available to be passed to their friends and families but it lacked guidance on how to raise concerns over safety.

## Housekeeping point

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- 1.37 Information on safety and how to report concerns should be included in the families' information leaflet.

## Suicide and self-harm prevention

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### Expected outcomes:

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

1.38 Self-harm incidents had increased, largely due to a small number of prolific self-harmers. Self-harm documents were completed to a good standard. Young women who harmed themselves or were at risk of harming themselves were well looked after, but the records did not always reflect this.

1.39 Self-harm and suicide prevention was monitored effectively by the safeguarding committee. There had been 65 incidents of self-harm during the period January to July 2012, with 52 of these in the first quarter. This was an increase since the previous inspection, but two young women accounted for 36 of the incidents. Injuries were usually minor and none had required outside medical care. The safeguarding committee discussed prolific self-harmers in detail and looked for any patterns and trends.

1.40 Nine assessment, care in custody and teamwork (ACCT) self-harm monitoring documents had been opened in the six months prior to the inspection, and three were open at the start of the inspection. Most had been opened as a result of concerns about young women rather than self-harm incidents. Young women we spoke to on ACCTs said they felt cared for. ACCT documents were completed to a good standard. Effective use was made of the weekly multidisciplinary meeting to discuss the care of young women on open ACCTs and make recommendations for their support. Young women subject to the ACCT process were interviewed before and after the multidisciplinary meeting to make sure their views were taken into account. However, this high level of involvement was not reflected in the records. Ad hoc reviews involving young women were convened in response to new incidents or information. Family and community youth offending team involvement in ACCT reviews was minimal, although there was evidence that they telephoned the unit with information about potential for self-harm and vulnerability in general.

## Housekeeping point

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1.41 Records of ACCT reviews should be more detailed and reflect the contribution made by young women themselves.

## Behaviour management

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### Expected outcomes:

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

1.42 The behaviour management policy encompassed all the relevant aspects of managing the young women's behaviour. Rules were clear and understood by the young women.

1.43 The behaviour management policy was comprehensive and it incorporated all the procedures available to manage behaviour, including guidance on the use of separation which had previously been omitted. Rules about acceptable and unacceptable behaviour were explained to young women during induction and displayed in the dining area.

## Rewards and sanctions

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### Expected outcomes:

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

- 1.44 The rewards and sanctions scheme had been improved and was now administered more fairly. Young people understood how the scheme worked and there was evidence that it was motivational for almost half the group.
- 1.45 The rewards and sanctions scheme had been updated in September 2011 and the way it worked was clearly set out in a policy document. In our survey, all the young women said they knew what the scheme was and half said that it motivated them to change their behaviour. Significant improvements had been made to the scheme since the previous inspection: young women now attended their weekly reviews; there were no automatic demotions; and young women on the lowest level had one afternoon of association at the weekends.
- 1.46 The unit also operated a credit system which enabled young women to earn points for keeping their cells clean and tidy, assisting with cleaning communal areas and other tasks that demonstrated a positive approach to communal living. Points could be traded in every few weeks for toiletries, make up or stationery. The young women were motivated by this and looked forward to exchanging their accrued points for an item they wanted.

## Security and disciplinary procedures

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### Expected outcomes:

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

- 1.47 Information and intelligence sharing was managed well. Security arrangements, including searching, were risk led and proportionate. Adjudications were used appropriately and the use of minor reports had been introduced.
- 1.48 Dynamic security was effective and was underpinned by the good relationships staff had with the young women. Staff used security intelligence reports (SIRs) effectively to share appropriate information.
- 1.49 There was no routine strip-searching of young women and strip-searches that were conducted had to be authorised by a duty governor. Two had been authorised since November 2011, both of which had resulted in illicit items being discovered. These were raised as SIRs and logged in the unit observation book with the name of the authorising governor, but no written authorisation for the searches was available. Forcible strip-searching was explicitly prohibited.
- 1.50 Half the young women in our survey said they had had an adjudication and that the process had been explained clearly to them. Records indicated that hearings were conducted fairly. There was a clear tariff of punishments for adjudications and minor reports, and the

documentation showed that punishments were towards the lower end of the tariffs. There was evidence of suspended punishments and a small number of adjudications had been dismissed. There was no procedure for reviewing the consistency of awards across adjudicators.

## Recommendation

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- 1.51 Written authorisations for strip-searches should be obtained, recorded and retained.

## Housekeeping point

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- 1.52 Adjudication punishments should be monitored for consistency across adjudicators.

## Bullying and violence reduction

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**Expected outcomes:**

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

- 1.53 Levels of bullying were low and where bullying did occur it was taken seriously and dealt with efficiently.
- 1.54 The unacceptability of violence and bullying was well publicised on the unit. Information about types of bullying and how to report it was clarified during induction and regularly discussed at the consultation meeting called 'Listen Up'. An antisocial behaviour and violence reduction survey was conducted every six months.
- 1.55 A log of incidents was kept which recorded perpetrators and victims and action taken. Incidents of bullying were rare and staff had high expectations about how the young women should behave. If there were incidents, such as low-level name calling, staff quickly intervened and attempted to mediate between parties.
- 1.56 The antisocial behaviour programme had been used with four young women during 2012, each for a period of one week's observation. The close supervision occurring within this small unit had resulted in satisfactory resolution in each case. Some staff had undergone formal mediation training.

## The use of force

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**Expected outcomes:**

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

- 1.57 Force was used infrequently and was subject to appropriate governance. Debriefs carried out with young women after force had been used had improved and were now good.
- 1.58 Recorded use of force had increased slightly since the previous inspection but remained relatively low, having been used eight times so far in 2012. None of the young women on the

unit during the inspection had had force used against them. Detailed use of force documentation described events leading up to the use of force and the degree of force used. In the records we examined, there was clear evidence of de-escalation by staff and force being used for as short a time as possible. Quality assurance was good, including review of CCTV footage and the completed paperwork by the unit manager. Areas of concern were flagged up and acted on. Use of force was monitored by the safeguarding committee.

- 1.59 Young women subject to restraint took part in a debrief session with a member of staff who had not been involved in the incident, usually the unit YOT worker, an advocate or a member of the young people's substance misuse service (YPSMS) or CAMHS. Records of the debriefs showed that the young women's views and experience were properly explored but there was no evidence that their perceptions were shared with the safeguarding committee.

## Housekeeping point

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- 1.60 Findings from debriefs following use of force should be examined by the safeguarding committee.

## Separation/removal from normal location

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### Expected outcomes:

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

- 1.61 Separation was seldom used and then only when it was necessary. Its use was carefully monitored but the separation regime could be very restrictive.
- 1.62 There was no segregation unit and any young woman who was separated because of her behaviour remained on the unit and in her own cell under GOOD procedures.
- 1.63 GOOD had been used slightly less since the previous inspection and had been used six times since the beginning of 2012. On the occasions it was used, the reasons were justified. Its use was monitored by the safeguarding committee.
- 1.64 The regime on GOOD was restricted and on the first day involved no communal dining, association or classroom attendance. Young women on GOOD had daily reviews and an individual care and reintegration plan which facilitated a gradual return to the full unit regime. Their reintegration was carefully managed, but behaviour targets were not specific to the individual.

## Recommendation

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- 1.65 Behaviour targets for young women on GOOD should be individualised to address their behaviour.

# Substance misuse

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## Expected outcomes:

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

- 1.66 The young people's substance misuse service was very effective. Mandatory drug testing was consistently negative and the supply reduction strategy was effective. Psychosocial interventions were comprehensive and clinical management was good. Voluntary drug testing was available; there had been no recent positive tests.
- 1.67 All young women received prompt screening and assessment for substance misuse. Symptomatic relief for withdrawal was available on the first night and prescribing for substance misuse therapy was available within national clinical guidelines. Kinnon unit on the adult site was available to young women requiring enhanced observations and this provided a suitable resource. Doctors and nurses were appropriately trained to offer therapy. No young women were in treatment at the time of our inspection.
- 1.68 The drugs strategy was focused and up to date. The drugs strategy meeting was well attended by representatives of relevant prison departments and the YPSMS was involved in pertinent meetings in other departments. Sixty young women had been admitted to the unit since April 2012, all of whom the YPSMS had seen. Age-appropriate health promotion and harm minimisation information was available to young women and general drug and alcohol education was delivered via several prison departments in association with the YPSMS.
- 1.69 The primary problem for the majority of YPSMS clients was heavy use of alcohol. There was a substantial range of formal and bespoke one-to-one and group psychosocial interventions to address this.

## Section 2: Respect

The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report.

### Residential units

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Expected outcomes:

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

- 2.1 Communal areas were comfortable, clean and tidy. Unoccupied cells were bare and in some cases dirty, with graffiti. All cells had integral sanitation, and access to cleaning and hygiene equipment was good. Access to laundry and telephones was good but mail was unnecessarily delayed for 24 hours after delivery at the prison.
- 2.2 The residential area was on the upper floor of the unit. Communal areas were clean and bright with comfortable seating for the young women to use during association. Meals were taken communally with staff in the unit dining area which reinforced the excellent staff/prisoner relationships.
- 2.3 There were 16 cells which included an adapted cell for wheelchair users and a double cell. Occupied cells were neat and tidy but there had been no attempt to soften the living environment which retained an institutional atmosphere. All cells had integral sanitation and showers. Toilets did not have seats or lids and most were dirty and badly scaled. Some sinks leaked constantly with towels laid underneath to control the flow of water. Most cells had graffiti on walls, doors, picture boards and mirror surrounds, some of which was offensive and some dated back to 2011.
- 2.4 Empty cells were dirty and bare with graffiti scrawled on walls and doors. These cells were used to house young women when they arrived, presenting a poor first impression. The cells were cleaned during the inspection in response to our comments and were much improved by the end of the week.
- 2.5 Young women could wear their own clothing and there was a rota for use of the washing machines and driers on the unit. Prison-issue clothing was available if required and the kit supplied was in good condition.
- 2.6 The consultation arrangements worked well and the 'listen-up' meeting was a useful forum for young women to pursue on-going issues. The standing agenda was wide ranging and we saw evidence of issues followed up at subsequent meetings.
- 2.7 Applications were well managed and young women had confidence in the process. The majority of requests were dealt with informally and most of the written applications related to changes to telephone pin numbers and requests for special letters.
- 2.8 Incoming mail was processed by the main prison correspondence office and, although there were only a few letters for the unit each day, was delivered to the unit the day after arrival. Outgoing mail was collected each morning and left the prison the same day. Systems for

monitoring mail and for managing official mail were appropriate and records were kept if any official mail was opened.

## Recommendations

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- 2.9 Toilets should be kept clean and free of scale.
- 2.10 In-cell sanitary ware should be repaired and routinely maintained.
- 2.11 Cells should be well decorated and free of graffiti.
- 2.12 Personal mail should be delivered to young women on the day it arrives in the prison.

## Relationships between staff and children and young people

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### Expected outcomes:

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

- 2.13 Relationships between staff and young women were mutually respectful and all staff had a sound knowledge of the young women in their care.
- 2.14 In our survey and in discussions during the inspection, we were told by young women that they were treated with respect and got on well with staff on the unit.
- 2.15 Discipline staff had achieved an effective balance between care and control. Features such as the soft uniform worn by staff and shared mealtimes contributed to a relaxed atmosphere and helped underpin the excellent relationships which we observed. The key worker scheme was effective and officers met young women regularly to discuss their care plans. Key workers contacted young women's families each week to discuss progress and to share significant information.
- 2.16 Computer records were updated regularly and provided a clear picture of young women's behaviour and achievements, although not all staff contributed to them. Information from staff such as the unit youth offending team (YOT) worker was recorded elsewhere and could not be passed on if the young woman transferred to another prison.

## Recommendation

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- 2.17 All relevant staff who have direct contact with young women should record their contact with them on the electronic case notes.

## Good practice

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- 2.18 *Key workers made contact with families each week which enabled significant information to be shared and enhanced the support provided to young women.*

## Equality and diversity

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### Expected outcomes:

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

- 2.19 Not all protected characteristics were identified during reception or induction. Where needs were identified, staff offered personalised support. Incidents relating to diversity were properly scrutinised and investigated thoroughly. The promotion of diversity through visible displays was limited.

## Strategic management

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- 2.20 There was an equality and diversity policy for the whole prison, which covered the legal framework, but was not based on a needs analysis and did not make reference to Gypsy, Roma and Traveller groups.
- 2.21 The governor chaired the prison diversity, race and equality action team (DREAT), which met every two months. A member of unit staff and a young woman representative attended these meetings. A representative of Hibiscus, a charity set up to address the needs of foreign national women imprisoned in the UK, also routinely attended the DREAT.
- 2.22 A full-time, trained diversity officer and a deputy covered the whole prison. Two unit staff took on the role of diversity champions, but young women did not know who they were. All staff diversity leads and the prisoner representative had job descriptions.
- 2.23 NOMS SMART ethnicity monitoring was used for the whole prison, but was not suitable for the unit in isolation. There was no monitoring of other protected characteristics. There was a diversity and equality action plan, but this did not consider all the protected groups, and matters were not progressed quickly. Six equality impact assessments had been completed, but none was specific to the unit.
- 2.24 Discrimination incident report forms (DIRFs) were freely available on the unit. Between January and July 2012, 15 DIRFs had been submitted against three in the same period in 2011. This increase was principally due to the diversion of routine complaints to the DIRF process (see section on complaints).

- 2.25 DIRF investigations were carried out by the diversity officer or his deputy. We found that investigations were thorough and carried out promptly, with fair, polite responses. Most DIRFs concerned inappropriate language or comments. Completed reports showed that conversations took place with young women to increase their awareness and understanding of individual issues.
- 2.26 Effective monitoring of DIRFs took place at the DREAT, but there was no analysis of individual trends for the unit. The deputy director of custody signed off the diversity reports during his visits, and Hibiscus and the Independent Monitoring Board (IMB) checked all completed documents.
- 2.27 Staff used a range of measures to deal with the perpetrators of discriminatory behaviour from mediation to disciplinary procedures. There had been no serious cases of discrimination, but procedures were in place to monitor and support any victim.
- 2.28 The unit induction booklet included information about equality and diversity, and how to submit a DIRF. 'Enrichment' sessions were held every Tuesday morning. They were delivered in imaginative ways by the unit chaplain or the diversity officer and covered a wide spectrum of diversity related subjects.
- 2.29 The education department worked with the young women to promote and celebrate diversity, and the catering department provided meals for some cultural events. Displays celebrating the diversity of the population and the wider community were limited.

## Diverse needs

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- 2.30 All unit staff had completed NOMS accredited 'Challenge it, change it' training, and most had completed the women and juvenile awareness staff programmes (WASP and JASP).
- 2.31 Protected characteristics were identified during reception and induction, except for sexuality, and Gypsy, Roma and Traveller groups. Diversity staff did not routinely introduce themselves to young women during induction.
- 2.32 A range of support organisations covering most of the protected groups was listed in the induction booklet. Support relating to protected characteristics was offered by staff on an individual basis, when needs had been identified.
- 2.33 A system was in place to identify young women who had been convicted of a current or previous racially motivated offence. The public protection officer published a weekly list of all women who were subject to restrictions. Cases were discussed at the interdepartmental risk management team meeting, which also reviewed cell-sharing risk assessments.
- 2.34 Young women from a foreign national background received the recommended entitlement to air mail letters and extra pin phone credit. They also received a free, five-minute telephone call overseas each month.
- 2.35 An official from the UK Border Agency attended the prison regularly, and a solicitor provided independent immigration advice.
- 2.36 Telephone interpretation services were used, but their use was not recorded. The prison maintained a list of staff who spoke other languages, and documents were translated using a computer software package.

- 2.37 No young women had been assessed as disabled at the time of the inspection, although two declared a disability in our survey. There was one large adapted cell on the unit, but there had been no necessity to use it. Staff were aware of the personal emergency evacuation plan procedure, and there was a specialist evacuation chair on the upper landing. Teachers were qualified to screen for learning disabilities.
- 2.38 Young women were not asked about their sexuality, but if it became known that they were lesbian or bisexual, one-to-one support was offered by a specialist staff champion. A wing representative had raised concerns about homophobic language at the April 2012 DREAT meeting and the diversity officer had promptly ensured that procedures for dealing with such incidents were communicated to all staff.

## Recommendations

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- 2.39 The equality and diversity policy should be based on a needs analysis, and should include references to Gypsy/Roma/Traveller groups, and specify how outcomes for all protected groups will be achieved.
- 2.40 The diversity and equality action plan should cover all protected groups, and actions should be progressed promptly.
- 2.41 Equality impact assessments should consider the needs of young women on the unit.

## Housekeeping points

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- 2.42 The induction questionnaire should include all protected groups.
- 2.43 Staff champions on the unit should routinely introduce themselves to young women during induction.
- 2.44 Monitoring of protected groups should be refined for the unit.
- 2.45 A log of the use of accredited telephone interpretation services should be maintained.

## Faith and religious activity

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### Expected outcomes:

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

- 2.46 Young women were all able to attend group worship. Adequate provision was made for young women following minority faiths. Pastoral care was good.
- 2.47 A chaplain met all young women within 24 hours of their arrival to give them information about the support available from the chaplaincy team and ensure that their religion had been recorded accurately. The dedicated unit chaplain was respected and had a high profile; he attended the weekly multi-agency meetings at which all young women were discussed.

- 2.48 In our survey, all young women who declared themselves to have a faith said it was easy to see the chaplain and attend corporate worship. There were good links with faith leaders in the community and at other prisons, who could come in to give one-to-one support to young women of minority faiths.
- 2.49 Services were well advertised and young women could attend group worship in the main prison with adult women; appropriate safeguarding arrangements were in place.
- 2.50 Faith study was facilitated on an individual basis and enrichment classes for all young women included faith awareness.
- 2.51 Young women could buy religious artefacts and were given prayer cards; Muslim young women were given prayer beads by the Muslim chaplain. A wide programme of faith celebrations had been organised, which included the provision of cultural meals.
- 2.52 Chaplains took young women to the chapel individually for contemplation, reflection or prayer. The unit chaplain was an ACCT (assessment, care in custody and teamwork) assessor and was able to arrange and monitor support for young women who had self-harmed, or were in crisis. One of the unit diversity officers was a trained bereavement counsellor.

## Complaints

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### Expected outcomes:

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

- 2.53 Most complaints were dealt with informally by staff. Complaints submitted formally were dealt with promptly and fairly, and respectful responses were delivered and explained in person.
- 2.54 Complaint forms were freely available on the unit, and information about how to submit a complaint was displayed above the complaints box, which was emptied each weekday by the complaints clerk.
- 2.55 Fifty complaints had been submitted between January and July 2012, compared with 19 for the same period in 2011. The most significant increase related to complaints about staff, most of which were for low-level matters, such as night staff being too noisy.
- 2.56 Complaints that we examined had been answered politely and fully addressed the issues raised. Complaints about staff were answered by a unit manager. Each time a complaint was responded to, a unit manager provided an explanation to ensure that the young woman understood.
- 2.57 Each month a thorough management check was carried out on a random sample of 10 complaints and we saw examples of poor responses being challenged. Monitoring of complaints covered ethnicity, topic, location and trends over time. If discrimination had been identified as a factor in complaints, they were investigated through the DIRF process.

## Good practice

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- 2.58 *Every time a young woman made a complaint, the unit manager provided a personal explanation.*

## Legal rights

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### Expected outcomes:

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

- 2.59 Young women were given clear information about their sentence or remand status. They had good access to their legal advisers and were permitted free confidential telephone calls. The unit arranged contact with professionals involved in bail applications, which enabled assessments to be completed on time.
- 2.60 Young women were well supported in exercising their legal rights and were referred to a specialist adviser by the unit YOT worker or advocate. All young women were given clear information about the nature of their sentence or remand status, including details of significant dates.
- 2.61 Young women had good access to their legal advisers and were allowed free confidential telephone calls. Specialist legal advice was required for bail applications, appeals against sentence, external adjudications and contact with local authorities to meet their obligations under the Care Leavers Act. The unit estimated that 20% of young women needed legal advice on securing appropriate accommodation. It was evident that unit staff fully supported young women to make contact with their legal advisers, including writing or reading documents.
- 2.62 Remanded young women were given appropriate support to exercise their right to make a bail application and the unit YOT worker ensured effective communication among all concerned parties. The remand cases that we scrutinised had been dealt with effectively.

## Health services

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### Expected outcomes:

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

- 2.63 Young women told us they were happy with health care. Primary care was well managed, age appropriate and very good; better use could have been made of visiting specialists. The delivery of pharmacy and the management of medicines were both in a state of transition but some improvements were evident. Dental services were good and the surgery complied with best practice standards. Mental health care was exceptional.

## Governance arrangements

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- 2.64 Young women on the unit told us that they were happy with the health care services which they received.
- 2.65 The service was commissioned by NHS South Gloucestershire. From June 2012 Bristol Community Health (BCH), together with Hanham Health GP Services, had provided primary care. There was a health needs analysis (HNA) and supervision of actions arising from the HNA was led by a partnership board, which was well attended. Health care staff regularly attended the weekly unit multidisciplinary team meetings and relevant meetings in other departments.
- 2.66 Clinical governance arrangements were strong and there was a balanced medical and health team across the prison site. A senior nurse had recently been appointed to improve services across the site. Clinical supervision was offered informally via the peer group and to some individuals on an ad hoc basis.
- 2.67 Clinical records were held electronically and subject to annual audit. Prevention of communicable diseases was driven by a comprehensive policy.
- 2.68 The Pathways health centre was used by all prisoners at Eastwood Park, including young women from the unit. It had recently been refurbished to a very high standard. Infection control advice had been sought during the refurbishment; there was routine audit of infection control and 98% compliance, which was outstanding. Only hand-washing practices required attention.
- 2.69 There was a wide range of relevant, properly located resuscitation equipment available, which staff were trained to use.
- 2.70 Emergency childbirth equipment was available and regularly checked. Following our last inspection, medical advice had been taken on who should use the equipment. It was determined that GPs and midwives only should use it and receive training. A new category of ambulance response had also been agreed - 'immediate life-threatening situation' - between the prison, BCH, Hanham and Great Western Ambulance Service, so that response times to medical crises were swifter than standard emergencies.
- 2.71 Staff members were in uniform and clearly identifiable. We observed positive relationships between clinicians and young women. During initial health screening, young women were given written information about health services, with pictorial prompts to help those with reading difficulties.
- 2.72 Young women we spoke to knew how to make written comments or complaints about care, though they preferred to take them to the wing-based nurse for attention. Complaints were routed via the general prison complaints department, which potentially compromised medical in-confidence information. There had been only two formal complaints about health care since January and the responses were focussed and easy to read. There was no regular young women's health care forum due to the high turnover. However, health care was raised as an agenda item at the prison consultation group and occasional surveys were carried out to take the views of service users.
- 2.73 There was an active health promotion group chaired by the deputy governor. Representatives from the unit attended the group as did BCH staff. There was a monthly timetable of activities and events but promotion was hampered by a lack of display space on the unit; action was in hand to rectify this. There were assertive, age-appropriate disease prevention and screening

programmes. Immunisation and vaccination programmes mirrored national campaigns, including MMR (measles, mumps and rubella), hepatitis and meningitis C. Sexual health promotion was prominent and barrier protection, advertised on the wings, was available along with advice. Use of condoms, rather than dental dams, was promoted; the service policy on dental dams was unclear.

## Recommendations

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- 2.74 Clinical staff, including the lead nurse, should have access to documented and ongoing clinical supervision.
- 2.75 The process for making a complaint about health care should be confidential.

## Housekeeping point

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- 2.76 The policy on dental dams should be clarified.

## Good practice

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- 2.77 *Consultation with infection control staff during the refurbishment of the health care centre Pathways ensured an environment in which best practices were possible.*
- 2.78 *The 'immediate life-threatening response' category introduced by the prison, health care and GWAS was innovatory and demonstrated good partnership working.*

## Delivery of care (physical health)

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- 2.79 On admission young women underwent a comprehensive initial health screen and a secondary health assessment, which included identification of alcohol problems. They all saw a GP. Young women were asked for consent to acquire/share health care information with GPs and others at several stages of assessment. Intensive efforts were made to ensure the acquisition of pre-admission information from community sources.
- 2.80 Young women had almost immediate access to a dedicated nurse on the unit. While nurses offered triage, the practice was not supported by triage algorithms. The health care centre Pathways was reserved for young women to attend clinics from 9am for 30 minutes. Unit staff members accompanied the young women who went immediately to their appointments. There was an array of nurse and GP-led primary care clinics, including those for life-long conditions, and specialist clinics, such as sexual health and blood borne viruses. Practice nurses specialised in the care of long-term conditions such as diabetes. Consideration was being given to the provision of clinics run by external specialists, including diagnostics, physiotherapy and telemedicine. Hanham provided out-of-hours GP cover, but in practice on-site nurses provided the majority of out-of-hours responses.
- 2.81 Ante-natal care was provided by visiting midwives. Two heavily pregnant 17-year-old young women had recently been admitted to the mother and baby unit following individual risk assessments of their safety. The relocation was agreed with the Youth Justice Board and demonstrated sensitive and appropriate care while minimising risk.

- 2.82 Young women enjoyed good access to secondary care which was rarely interrupted for security reasons.

## Recommendation

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- 2.83 **Clinical triage algorithms should be used by nursing staff to ensure consistency of advice and treatment for young women.** (Repeated recommendation 5.31)

## Pharmacy

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- 2.84 There were no pharmacy-led clinics or medicines use reviews. There was access to up-to-date reference sources, including the British National Formulary for Children, though out-of-date reference materials were present in several rooms. Temperature checking of the refrigerator in the unit medical room had not been regularly recorded during August 2011. Medicines management and governance procedures were good.
- 2.85 Prescribing was appropriate for the age group. Written information from the medicines containers was available to patients, but information in an easy-read format was not available.
- 2.86 The administration of medicines was done professionally on an individual basis. Young women were able to access medication out of hours and a night nurse administered night-time medications. There was a good range of patient group directions and nurse prescribers in primary care. Patients had lockable cabinets in their cells to store in-possession medications. The medicines management committee met regularly to ratify policies and receive aggregated prescribing data for analysis purposes.

## Recommendation

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- 2.87 **The new pharmacist should be supported to develop services such as pharmacy-led clinics and medicines use reviews.**

## Housekeeping points

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- 2.88 Obsolete reference books should be discarded and only the most recent copy should be retained.
- 2.89 Maximum-minimum temperatures should be recorded daily for the drug refrigerators to ensure that heat-sensitive products are stored correctly. Corrective action should be taken where necessary and should be monitored by pharmacy staff.
- 2.90 Information on medicines, available to young women, should be presented in an easy-to-read format.

## Dentistry

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- 2.91 All young women received a dental screen within a few days of arrival on the unit. There was no waiting time for follow-up appointments. Unit staff ensured that young women kept their appointments. A full range of treatments was available, as was oral hygiene advice. Dental products on the canteen list were not compatible with professional advice on oral health

promotion for young women. Emergency dental cover was in place but rarely used. The dental surgery was of a high standard, though it also doubled as an office for dental administration purposes. It complied with best practice guidance on decontamination. Maintenance and certification of dental equipment were up to date and the surgery had been inspected in the last year by the health protection and safety agency. Dental waste was disposed of professionally.

## Recommendation

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- 2.92 The prison should take professional advice on the range of oral hygiene products available to young women via the canteen list.

## Housekeeping point

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- 2.93 Arrangements for dental administration should be reconsidered following the refurbishment of the health care centre Pathways.

## Delivery of care (mental health)

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- 2.94 Uniformed officers in the prison as a whole received mental health awareness training but the precise number of officers on the unit who had been trained was unclear.
- 2.95 Screening for mental health problems occurred at reception and during induction.
- 2.96 Developmental, emotional and attachment problems were found commonly among young women on the unit. Wing-based general, mental health and learning disability nurses were available to the young women via daily unit drop-in clinics. North Bristol NHS Trust child and adolescent mental health services (CAMHS) staff attended the unit, with a nurse available for five sessions per week and at other times by request. There was an open door policy.
- 2.97 Young women requiring support were offered one-to-one solution-based approaches using dialectical behavioural therapy principles. Bereavement/loss counselling was available from a unit uniformed officer. Families were involved in therapy as appropriate. There was a variety of material available to help prevent self-harm, including a guide which had been designed along with young women themselves. A clinical psychologist provided EMDR (eye movement desensitisation and reprocessing) therapy for those with post-traumatic stress issues. Young women with complex presentations were managed under the care programme approach; a CAMHS consultant was available to treat such patients. Speech and language therapy was available following referral.
- 2.98 Transfer of patients under the Mental Health Act was efficient. There had been three transfers in the last two years and all had been completed within current transfer guidelines, the longest wait being nine days.

## Good practice

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- 2.99 *The transfer time between first assessment and the patient being admitted to a health service bed was exceptionally low.*

## Catering

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### Expected outcomes:

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

2.100 Most young women said the food was poor. Parts of the prison kitchen were not clean. Women received advice about healthy eating and food hygiene, and valued the opportunities they had to cook for themselves.

2.101 Young women received the same food as women in the main prison, including supplements for pregnant women. In addition, they received a supper pack containing items such as biscuits, yoghurts and fruit. There was a reasonable selection of food, which reflected religious, cultural and medical requirements. Most young women in our survey said that the food was bad or very bad. The food we sampled varied in quality and was bland and unappetising.

2.102 Women were consulted about the food in a formal annual survey and regularly at the unit forums. The food comments book was well used and checked frequently by the catering manager, IMB and governors.

2.103 The servery on the unit was clean, and there were separate utensils for serving halal food. Staff served all meals wearing protective clothing, but not hats, and we observed one young woman who found a hair in her meal. The same concern had been raised by young women in their February wing meeting. Staff ate their meals with the young women at a large communal table in a relaxed atmosphere.

2.104 Cleaning procedures in the prison kitchen were disorganised, and the prisoner toilet and shower areas and the sluice room were dirty and untidy.

2.105 Young women received advice about healthy eating and food hygiene in education classes. They valued sessions on Thursdays and Saturdays when they could cook for themselves. One young woman described these sessions as 'the highlight of the week'.

## Recommendations

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2.106 The consistently negative views young women express about the quality of the food should be acted on.

2.107 The governance of hygiene in food serving areas should be urgently improved.

## Purchases

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### Expected outcomes:

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

**2.108** There was a good selection of products on the canteen list, but young women were not made aware of additional products. Some young women could wait too long to receive their first canteen order.

**2.109** Young women received a free canteen pack on arrival, but some had to wait up to 10 days to receive their first order from the full product range. Canteen was delivered to the unit by staff from the contractor DHL, and issued under the supervision of unit staff.

**2.110** There was regular consultation about the product list and a full annual review at the end of June. Canteen provision was also discussed at the DREAT meeting every four months, to ensure that there was adequate provision of religious and cultural items.

**2.111** There was a wide range of products on the canteen list. Four additional hair products could be ordered through the finance department, but young women had not been informed of this. Young women on the gold regime could order products from the Avon catalogue.

**2.112** Young women could arrange for newspapers and magazines to be delivered, but this had to be organised and paid for by their families.

## **Recommendation**

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**2.113** All young women should be able to place an order within 24 hours of arrival. (Repeated recommendation 8.12)

## **Housekeeping points**

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**2.114** Young women should be advised of the availability of additional hair products from the finance department.

**2.115** Consideration should be given to the direct provision of a selection of newspapers and magazines.



## Section 3: Purposeful activity

The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report.

### Time out of cell

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Expected outcomes:

Children and young people spend most of their time out of their cell, engaged in activities such as education, leisure and cultural pursuits, seven days a week.<sup>2</sup>

- 3.1 Overall the amount of time out of cell had reduced slightly since the previous inspection but it was still adequate. Young women were purposefully occupied when unlocked and had regular access to association.
- 3.2 Time spent out of cell had decreased since the previous inspection but, despite this, most young women spent more than 10 hours each weekday out of their cells but with less time unlocked at the weekends. Most time out of cell was used purposefully. Young women were now locked in their cells for study time around meals when previously cells had been left unlocked. In our survey, all the young women said they usually had association every day.
- 3.3 There were exceptions to having 10 hours out of cell each day. Young women on the lowest level of the rewards and sanctions scheme did not have evening association on Tuesday and Thursday and only young women on the highest level of the scheme had evening association at weekends. Young women on the lowest level now had afternoon association on one weekend day, which was an improvement since the previous inspection. Evening association had recently been cancelled or curtailed on weekdays and at weekends so that other parts of the establishment could be staffed.
- 3.4 There was no formal education on a Tuesday. Instead this time was filled with “creative activity” sessions. These classes covered subjects such as health care, attitudes and beliefs, diversity and substance misuse. In order to avoid disruption to the formal education programme, each young woman had two periods a week allocated to “interagency work”. These sessions were intended to be used for training planning meetings and interviews with specialist staff. This arrangement worked well with internal staff, but meetings with colleagues from the community sometimes took place outside these designated times and interrupted classes.

### Recommendation

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- 3.5 Association should not be cancelled or curtailed to facilitate activities elsewhere in the establishment.

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<sup>2</sup> Time out of cell, in addition to formal ‘purposeful activity’, includes any time children and young people are out of their cells to associate or use communal facilities to take showers or make telephone calls.

## Education, learning and skills

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*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:

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

3.6 Young women continued to benefit from good individual support in learning and skills. This was delivered four days a week due to the reduction in funded hours, with constructive activities on the fifth day. This reduction had had a detrimental effect on young women's learning. The range of education was appropriate for the small population but the range of vocational training was poor. Teaching, learning and individual coaching were good and the range of activities helped to motivate and interest young women. Achievements were good and accreditation took account of each young woman's stay on the unit. Attendance and punctuality were good but there were unnecessary interruptions to classes. Access to the library met the young women's individual needs. The operational management of vocational training and education was good but there was no effective strategy to link learning and skills with constructive activities. Individual learning plans had improved and remained satisfactory. There were high levels of mutual respect between tutors, officers and young women. Standards of behaviour in learning and skills were generally good.

### Management of education and learning and skills

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- 3.7 The day-to-day management of learning and skills was good. The management of the recent restructuring of the department had been effective in enabling Norton Radstock College to deliver some activities outside the core education day as well as an initial advice and guidance service.
- 3.8 The plan to manage the detrimental impact of the reduction in education and training input by introducing constructive activities was not effective. There was no strategy to deliver literacy and numeracy as part of the practical sessions. The constructive activities day had too many interruptions, with a detrimental impact on learning.
- 3.9 A comprehensive prison self-assessment process was in place which linked effectively to quality improvement but there was no separate section for the unit and no link to the constructive activities day. The self-assessment process included the learning and skills staff who had a good understanding of how it linked to quality improvement. The quality improvement group was effective in identifying areas for improvement which were solution focussed.

- 3.10 No learning sessions were cancelled and the college was very effective in ensuring appropriate staff cover for specialist education and training sessions. The wide range of effective links between the unit and community agencies, including education and training providers, was good.
- 3.11 Equality and diversity was well promoted in sessions, with behaviour and language challenged appropriately. This engendered a good work environment and respect between staff, tutors and young women in education and training. The young women reported feeling safe.

## Recommendations

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- 3.12 **The constructive activities day should form part of the wider learning and skills strategy.**
- 3.13 **A strategy should be developed to include literacy and numeracy in all learning sessions.**
- 3.14 **All learning activities should be included in the self-assessment process.**

## Provision of activities

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- 3.15 Young women on the unit had a range of education and training needs which the learning and skills provision met appropriately. They attended learning sessions in literacy, numeracy, information and communications technology, and vocational training in cookery, hairdressing and beauty therapy. The learning and skills hours had been reduced and college provision was delivered across four days with a programme of 'constructive activities' delivered by the unit for one day. This detracted significantly from the opportunity for young women to ensure timely progression to employment and/or further education and training on their release, or to extended learning and provision on transfer.
- 3.16 The range of education provision was appropriate but the range of vocational training was poor. Managers had identified further vocational training needs such as motor vehicle maintenance but the risk assessment process had delayed progress. Horticulture had been introduced but the unit was awaiting a full tutor complement to begin training. There was no internal GCSE programme, but the college worked well with external providers to meet individual subject study requests. The education session designated 'all agencies' lacked a coherent plan and was not used effectively, resulting in periods of inactivity for the young women.
- 3.17 Learning and skills induction was well planned and completed within five days of reception. It comprised one-to-one interviews with a tutor, a full review of previous education and training experiences and achievements, an initial and diagnostic assessment and identification of their preferred learning styles. The information was used well to plan their learning programme and agree relevant learning objectives.
- 3.18 Careers advice and guidance was appropriate and met the needs of most young women. The virtual campus was not in operation, which was detrimental to the young women and prevented them from fulfilling further learning opportunities and completing tasks to help plan their future employment and/or training on release.

## Recommendations

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- 3.19 Interruptions to constructive activities sessions should be reduced.
- 3.20 The virtual campus should be opened to provide young women with appropriate access to learning and preparation for release.

## Quality of provision

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- 3.21 Most learning sessions comprised individual coaching except for constructive activities. Coaching for young women was good in education and vocational training. One constructive activities session that we observed was very good but was interrupted continually, which distracted the tutors and learners and detracted from learning. Another session was poor with no useful learning for the young women. Where young women had barriers to learning, tutors encouraged and supported them well. Learning sessions were short and focussed which helped to maintain interest, and in most cases young women worked well and kept to task. Tutors and unit staff used praise and encouragement well and challenged and sought reasons for incorrect answers. Behaviour management in sessions was good and the young women were challenged appropriately to change their behaviour when necessary.
- 3.22 Young women developed good basic employability skills, including cooking skills. Tutors were well qualified and some were following further qualifications. Assessment practice was satisfactory. Homework was appropriate and marked by the tutor but some spelling and grammar mistakes were not corrected.
- 3.23 Individual learning plans had improved since the last inspection but some statements remained too general and parts of the plan were devoid of comments. Some lacked sufficient information to help young women understand how to improve their work. Learners were not involved in identifying their own progress or in reviewing or changing their learning objectives as appropriate.
- 3.24 The education and training rooms were well resourced. Young women were given sufficient opportunity to understand the world of work, build their skill base and understanding and move to more challenging roles. Training was well managed and the tutors continually made appropriate reference to commercial practice and standards.
- 3.25 Due to the reduction in learning hours since the previous inspection, some programmes, such as art and personal, social and health education, were no longer offered. Tutors made good use of existing programmes to support personal development and social skills. The unit continued to enter individual learners in the Koestler awards for art to good effect. Young women reported that they would like to see more choice in training and work tasters to help them choose what to do when they were released. There was no coherent plan to match the criteria for literacy and numeracy to the vocational training provision. Staffing arrangements ensured adequate cover for absenteeism and no sessions were cancelled.

## Recommendations

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- 3.26 Learners should be involved in monitoring their progress in individual learning plans better to understand what they have to do to improve.

- 3.27 Homework should be properly marked, taking account of grammar and spelling.
- 3.28 Additional vocational training and taster opportunities should be introduced to help young women decide what they want to do on release.

## Education and vocational achievements

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- 3.29 Achievements and standards were good. The unit had developed qualifications at levels 1 and 2 and young women whose length of stay allowed gained a good range of qualifications. In some cases, these enabled young women to progress to employment and further education or training on their release or to higher levels of study on transfer to another prison. Many learners were able to take a range of units of accreditation rather than the full qualification to reflect their short stay on the unit. This worked well and helped to encourage young women to continue study on release. Overall achievement rates for literacy, language and numeracy were good.
- 3.30 Tutors encouraged a good work ethic which enhanced personal employability. Young women were questioned and challenged appropriately to help their problem-solving techniques. Young women improved their skills and knowledge, particularly when they had the opportunity to work together. Attendance and punctuality were good. Very few young women refused or were allowed to absent themselves from learning and skills. Young women felt safe and enjoyed their learning, although they said that some sessions were too repetitive.

## Library

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- 3.31 The library was well organised and young women had adequate access to it through scheduled weekly sessions. There were not enough books on working in different sectors of business to help young women better understand the world of work. Library stock was regularly replenished and the book stock had improved.

## Recommendation

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- 3.32 The library stock should be enhanced to include books about working in different business sectors.

## Physical education and healthy living

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### Expected outcomes:

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

- 3.33 Use of the gym was promoted well and access was good. Staff maintained a record of young women refusing to attend the gym and used this to encourage future attendance. Health and well being was a key focus for gym activities, which were well planned and interesting and run at a good pace. The range of accredited programmes had increased.

- 3.34** Access to PE was good despite the low staffing levels. A suitable range of highly inclusive activities was offered which encouraged young women to learn, enjoy and raise their awareness and understanding of staying healthy. Young women received a good induction before using the gym. Appropriate health information was received from health care staff if there was concern for a young woman. Accredited PE provision was high. Sessions were divided between individual fitness training and team games when these were possible.
- 3.35** PE staff were well qualified and enthusiastic, and motivated young women to participate fully in activities. Accommodation was good and well managed. A sports hall was used to provide an adequate range of indoor activities, including basketball, hand ball, volleyball and circuit training. The gym had a good range of cardiovascular and free weights equipment. New equipment had been purchased since the previous inspection which had been designed specifically for pregnant women and those with back injuries. Young women wore appropriate kit for PE and were able to shower in their cells after sessions.
- 3.36** PE staff regularly collected information on young women when they refused to attend the gym. This information was shared with staff and young women, and reasons for the refusal were established and discussed to help them attend.

## Section 4: Resettlement

The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report.

### Pre-release and resettlement

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Expected outcomes:

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

- 4.1 The strategic direction of resettlement was under review and a new resettlement strategy was being drafted. There was no resettlement strategy committee and relevant data were not collected. Information from community youth offending teams (YOTs) on resettlement outcomes was starting to be monitored, and it was intended that this, together with the views of young women, would be used to inform a new resettlement needs analysis. Release on temporary licence (ROTL) was used effectively to help young women maintain contact with their family and for other support, but there were still no training or work experience placements.
- 4.2 The strategic direction of resettlement was under review and a new strategy was being drafted. The full resettlement committee had not met in the previous six months, and a small working group had been convened to develop the work, although progress had been slow. The unit was consulting young women through focus groups and questionnaires to help develop the strategy, and were contacting YOTs for details of resettlement outcomes after the young women had left the unit. It was intended that this information would be used to inform a new needs analysis, which would form the basis of the new resettlement strategy.
- 4.3 The unit relied heavily on the knowledge and experience of the seconded YOT worker to help them understand the nature of young women's resettlement needs. However, the lack of data and a functioning committee meant that there was no strategic overview of resettlement outcomes or checks that work was carried out effectively.
- 4.4 Despite the lack of strategic oversight, we found that there was an effective multidisciplinary approach to resettlement, with all departments involved when required. The pre-release arrangements were effectively coordinated by the YOT worker, with support from other staff, particularly the substance misuse workers. The education department was fully engaged with the process and key workers had a good understanding of the young women's needs and talked to them about their hopes and concerns.
- 4.5 Young women placed in the unit came from a very wide geographical area and the unit did not make links with local YOTs. The YOT worker worked hard to engage with young women's home YOTs, and we received very positive feedback about the unit's work from a visiting YOT worker. However, although there were good links with key statutory organisations, there were still no formal links with voluntary or community organisations with the potential to assist in resettlement arrangements.

- 4.6 ROTL was now considered for all young women who met the criteria and had more than doubled since the last inspection, with 11 placements in the previous 12 months. ROTL was used for college interviews, taster days at prospective employers' premises, family links, introduction to new accommodation and meeting key workers in the community. There continued to be no work or training placements to enable young women to gain valuable experience prior to release.

## Recommendations

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- 4.7 Collaborative links should be developed with a range of voluntary, statutory and community organisations to assist with resettlement arrangements, including the development of post-release support. (Repeated recommendation 9.6)
- 4.8 The development of good quality training placements and employment opportunities through well-organised release on temporary licence arrangements should be part of the training planning process. (Repeated recommendation 9.7)
- 4.9 A resettlement committee should meet to monitor the implementation of the new resettlement strategy.

## Training planning and remand management

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### Expected outcomes:

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

- 4.10 All young women continued to have detailed training and remand management plans with clear targets, which were appropriately reviewed at planning meetings. The planning arrangements were administered efficiently. Early release arrangements for detention and training orders (DTOs) were managed well, but the unit was not equipped to assess and plan for young women serving indeterminate sentences. Transfers to the adult side of the establishment were managed very well.
- 4.11 We examined all the training planning and remand management plans of the young women on the unit and others who had been recently released. Training documentation continued to be completed to a high standard by the YOT worker, with thorough initial assessments and clear individualised targets. There was effective multidisciplinary engagement and appropriate input from specialist staff. Contact with young women was discussed and coordinated at the unit weekly multidisciplinary meeting, which enabled staff to feed back progress and share their plans for ongoing work. These meetings enabled training and remand management plans to be linked with the young women's other plans, but written care plans did not reflect these links (see section on safeguarding).
- 4.12 Training planning and remand management meetings were held regularly and efforts were made to ensure the right people attended. Attendance from most unit staff at review meetings appeared to be good, but no record was kept and it was unclear if there were any regular absences from specific departments. Our own analysis showed that attendance by health care

continued to be poor and that residential staff were not always present. There was very good attendance from community YOTs, but only approximately 50% of families attended.

- 4.13 We observed two training planning reviews, in both of which the young woman was central to the meeting and was able to express her views. They were both well managed by the YOT worker and demonstrated a flexible approach that allowed those present to express their views. The meeting addressed the well being of the young woman and feedback was given on how she was progressing against her training plan targets, which included detailed information from the education department. Emphasis was rightly placed on praising the young woman for her positive achievements. Community YOT workers advised on interventions that should be delivered to the young woman in custody. Family members were present at one meeting and were very involved in the discussion. They reported that unit staff were accessible and helpful.
- 4.14 Very good arrangements were made for young women who transferred to the adult side of the establishment. They were able to visit their new accommodation before the move and staff kept in touch with them for a period after the transfer. Review meetings for those on DTO were still managed by the YOT worker with involvement from other staff from the unit, which was appropriate.

### Housekeeping point

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- 4.15 Attendance at young women's review meetings should be monitored so that any frequent absences can be identified and rectified.

### Good practice

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- 4.16 *Training planning reviews were flexibly managed to accommodate the young woman's needs.*
- 4.17 *There was ongoing contact and support for young women who had moved to the adult side of the establishment.*

### Public protection

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- 4.18 The YOT worker was responsible for identifying young women who were a risk to the public and had a thorough understanding of relevant issues. Young women with high-risk offences were quickly identified and their details passed to the establishment offender management unit. Young women presenting a potential risk to the public were discussed at the establishment interdepartmental risk management team fortnightly meeting, which reviewed all public protection cases across the establishment. Unit staff attended when one of the young women was discussed. Young women's risks were routinely monitored and any changes in circumstances acted on.
- 4.19 The unit did not collect data, but we were told that very few young women had been considered a high risk to the public. Our analysis of the data collected by the establishment public protection coordinator showed that there had been none in the last three months. However, unit staff had continued to be involved in the care of a young woman, who was now 18 years old and residing in the adult site. The YOT worker continued to report to the interdepartmental risk management team, and unit staff had maintained regular contact with the young woman.

- 4.20 The YOT worker attended all relevant multi-agency public protection meetings in the community.
- 4.21 Restrictions on the young woman's contacts in the community while she was in custody were reviewed regularly and adapted when circumstances changed. Advice was appropriately taken from community YOTs, but on rare occasions this was challenged by the unit, when they considered that the restrictions the YOT wished to impose were not proportionate to the risk to the young woman or the public.

## Looked-after children

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- 4.22 Although no figures were directly available, unit staff indicated that a large proportion of young women coming through the unit had been in the care of the local authority. Three of the six young women on the unit during the inspection said that they had been 'looked-after children'.
- 4.23 There were good arrangements to identify looked-after young women on their arrival and the YOT worker notified their local authorities of their presence on the unit. The unit was rigorous in ensuring that local authorities met their obligations to the young women in their care and, if they met resistance, VOICE advocates intervened on the young woman's behalf.
- 4.24 The unit facilitated looked-after children reviews, which were held separately or combined with training planning meetings. It was estimated that 75% of social workers attended training planning meetings of looked-after children, which was an improvement on 50% prior to our last inspection.

## Reintegration planning

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### Expected outcomes:

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

- 4.25 Work to prepare young women for release was effective and was led principally by the YOT worker. There was suitable contact with agencies which could help young women with housing difficulties, and support was given to those who wished to attend college, which included the effective use of ROTL. Appropriate support was given to help young women manage their money properly and all young women were able to attend regular group and individual interventions to help improve their life skills. All young women were offered pre-release health assessments and advice on accessing health services in the community, including those who needed help with drug and alcohol problems.
- 4.26 All young women had a release plan, prepared by their community YOT shortly before their release. The plan covered key areas which the training plan had identified as needing addressing and it was clear what was expected of the young woman.
- 4.27 Young women were properly supported by residential staff prior to their leaving. Care was taken to make sure their money was available and they left with clean clothes and a proper bag to hold their belongings. Arrangements were made to ensure young women left the unit with a responsible adult.

## Accommodation

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- 4.28 Accommodation needs were jointly assessed by unit staff and community YOTs at the start of each young woman's sentence or remand period. Legal advice was given to those who required support from their local authority (see section on legal rights). However, despite these efforts, a few young women did not know where they were going to live until just before they left the unit. The unit reported that all young women left with an address to go to, though there was a concern that some accommodation was unsuitable.
- 4.29 The independent advocacy service continued to advocate on behalf of young women who were having difficulty securing suitable accommodation on their release and many of their referrals related to accommodation.

## Good practice

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- 4.30 *Young women had access to good legal advice to help them secure accommodation on their release.*

## Education, training and employment

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- 4.31 Connexions and the college worked well together to provide sufficient information about opportunities for employment and further education or training in areas of work that were local to the young women on their release. Staff transferred information about the young women to the local college or employer in a timely manner. Young women were given their portfolios on release or to take to their next prison placement.
- 4.32 Young women were supported well in developing personal skills to maximise opportunities to engage in training and education to improve their employability on release or as they progressed through the prison system. The lack of the virtual campus facility meant that young women did not have access to the full range of learning and work preparation activities (see recommendation 3.20). The YOT worker met the young women regularly to help plan their release and their future employment and/or further education and training needs.

## Health care

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- 4.33 Young women were seen by the wing-based nurse before release or transfer and arrangements were made for them to have take-home medications and harm minimisation materials as necessary. Young women without GPs were offered advice on how to obtain one. Nurses encouraged young women who were not going home to register with external health agencies. Palliative care was available within Bristol Community Health policy but nobody could recall it being required on the unit. The child and adolescent mental health service (CAMHS) team worked with the adult mental health in-reach team to ensure smooth transfer of patients with mental health problems between the unit and adult wings.

## Drugs and alcohol

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- 4.34 Young people's substance misuse service (YPSMS) workers concentrated on harm minimisation and support for clients before they moved on. Communication and coordination of transitional care between YPSMS and the CARATs (counselling, assessment, referral, advice and through care) team at Eastwood Park was effective. Young women came from across the

midlands, the south of England and Wales which created some logistical challenges. YPSMS staff engaged with community agencies at least six weeks prior to a client's release and attended post-release coordination meetings as far away as Birmingham. Individual case working ensured that treatment targets were achieved.

## **Finance, benefit and debt**

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- 4.35 Young women were given a weekly update of their finances and were offered help to manage their money in custody. Some were able to save a small amount each week and they were all given access to their money on release. The education department offered a regular course on money management, which covered personal finances and managing money in business.

## **Children, families and contact with the outside world**

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- 4.36 Visits usually took place on the unit in a small comfortably furnished meeting room. On the rare occasions when there was more than one visit at a time, classrooms were used as additional venues and it was difficult to see how visits could be arranged if the unit was fully occupied. Visits were held on Tuesday and Thursday evenings and weekend afternoons. Take up of evening visits was minimal and most visits occurred on Sundays. Visits continued to be of one hour's duration which was too short.
- 4.37 Effective booking arrangements were carried out on the unit and visitors could use the refreshment machines before they were taken to the unit.
- 4.38 Two family days had been held on the unit over the previous 12 months. This was inadequate given the poor take-up of visits (only 32 during the first eight months of 2012), and the frequently long distances from home. A visitors' survey had been carried out but the reasons for many families not visiting had not been established. Staff whom we spoke to said they did not keep records of young women who did not receive visits nor did they enquire why.

## **Recommendations**

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- 4.39 **Visits should be for a minimum of one and a half hour's duration.** (Repeated recommendation 9.42)
- 4.40 **Efforts should be made to consult regularly with families and visitors to ascertain the reasons for the low take up of visits.** (Repeated recommendation 9.43)
- 4.41 **Family days should be organised at least monthly.** (Repeated recommendation 9.44)

## **Attitudes, thinking and behaviour**

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- 4.42 Young women were offered regular sessions with appropriately qualified staff. They had good opportunities to discuss personal issues with the YOT worker, one of the substance misuse workers or the CAMHS nurse. The YOT worker also offered a range of individual and group work interventions. Although none was formally accredited, the programmes were often used by YOTs, but it remained unclear if young women benefited from them.

## Recommendation

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- 4.43 Interventions and programmes should be subject to evaluation to measure their effectiveness. (Repeated recommendation 9.27)

## Good practice

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- 4.44 *Young women had excellent access to workers qualified to help them with complex personal issues.*



# Section 5: Summary of recommendations and housekeeping points

The following is a listing of repeated and new recommendations, housekeeping points 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, or in the previous report where recommendations have been repeated.

## Recommendation

To NOMS

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### **Courts, escort and transfers**

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- 5.1 Comprehensive custody records should be maintained while young women are out of the prison. (1.9)

## Recommendations

To the Governor

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### **Courts, escort and transfers**

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- 5.2 Greater use should be made of the video conferencing facilities. (1.8)

### **Early days in custody**

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- 5.3 Reception interviews should be carried out in private. (1.17, repeated recommendation 1.16)
- 5.4 Young women should arrive at the prison in time for the full range of first night procedures to take place. (1.18)

### **Care and protection of children and young people**

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- 5.5 Attendance by members of the safeguarding committee should be monitored and appropriate action taken following failures to attend. (1.26, repeated recommendation 3.8)
- 5.6 All young women should have individual care plans based on a thorough assessment of their needs which address all aspects of their care and behaviour management. (1.27, repeated recommendation 3.10)

### **Security and disciplinary procedures**

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- 5.7 Written authorisations for strip-searches should be obtained, recorded and retained. (1.51)

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

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- 5.8 Behaviour targets for young women on GOOD should be individualised to address their behaviour. (1.65)

## **Residential units**

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- 5.9 Toilets should be kept clean and free of scale. (2.9)
- 5.10 In-cell sanitary ware should be repaired and routinely maintained. (2.10)
- 5.11 Cells should be well decorated and free of graffiti. (2.11)
- 5.12 Personal mail should be delivered to young women on the day it arrives in the prison. (2.12)

## **Relationships between staff and children and young people**

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- 5.13 All relevant staff who have direct contact with young women should record their contact with them on the electronic case notes. (2.17)

## **Equality and diversity**

---

- 5.14 The equality and diversity policy should be based on a needs analysis, and should include references to Gypsy/Roma/Traveller groups, and specify how outcomes for all protected groups will be achieved. (2.39)
- 5.15 The diversity and equality action plan should cover all protected groups, and actions should be progressed promptly. (2.40)
- 5.16 Equality impact assessments should consider the needs of young women on the unit. (2.41)

## **Health services**

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- 5.17 Clinical staff, including the lead nurse, should have access to documented and ongoing clinical supervision. (2.74)
- 5.18 The process for making a complaint about health care should be confidential. (2.75)
- 5.19 Clinical triage algorithms should be used by nursing staff to ensure consistency of advice and treatment for young women. (2.83, repeated recommendation 5.31)
- 5.20 The new pharmacist should be supported to develop services such as pharmacy-led clinics and medicines use reviews. (2.87)
- 5.21 The prison should take professional advice on the range of oral hygiene products available to young women via the canteen list. (2.92)

## **Catering**

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- 5.22 The consistently negative views young women express about the quality of the food should be acted on. (2.106)
- 5.23 The governance of hygiene in food serving areas should be urgently improved. (2.107)

## **Purchases**

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- 5.24 All young women should be able to place an order within 24 hours of arrival. (2.113, repeated recommendation 8.12)

## **Time out of cell**

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- 5.25 Association should not be cancelled or curtailed to facilitate activities elsewhere in the establishment. (3.5)

## **Education, learning and skills**

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- 5.26 The constructive activities day should form part of the wider learning and skills strategy. (3.12)
- 5.27 A strategy should be developed to include literacy and numeracy in all learning sessions. (3.13)
- 5.28 All learning activities should be included in the self-assessment process. (3.14)
- 5.29 Interruptions to constructive activities sessions should be reduced. (3.19)
- 5.30 The virtual campus should be opened to provide young women with appropriate access to learning and preparation for release. (3.20)
- 5.31 Learners should be involved in monitoring their progress in individual learning plans better to understand what they have to do to improve. (3.26)
- 5.32 Homework should be properly marked, taking account of grammar and spelling. (3.27)
- 5.33 Additional vocational training and taster opportunities should be introduced to help young women decide what they want to do on release. (3.28)
- 5.34 The library stock should be enhanced to include books about working in different business sectors. (3.32)

## **Pre-release and resettlement**

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- 5.35 Collaborative links should be developed with a range of voluntary, statutory and community organisations to assist with resettlement arrangements, including the development of post-release support. (4.7, repeated recommendation 9.6)
- 5.36 The development of good quality training placements and employment opportunities through well-organised release on temporary licence arrangements should be part of the training planning process. (4.8, repeated recommendation 9.7)
- 5.37 A resettlement committee should meet to monitor the implementation of the new resettlement strategy. (4.9)

## **Reintegration planning**

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- 5.38 Visits should be for a minimum of one and a half hour's duration. (4.39, repeated recommendation 9.42)
- 5.39 Efforts should be made to consult regularly with families and visitors to ascertain the reasons for the low take up of visits. (4.40, repeated recommendation 9.43)
- 5.40 Family days should be organised at least monthly. (4.41, repeated recommendation 9.44)
- 5.41 Interventions and programmes should be subject to evaluation to measure their effectiveness. (4.43, repeated recommendation 9.27)

## **Housekeeping points**

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### **Courts, escort and transfers**

---

- 5.42 Young women being admitted to the unit should be supplied with written information about it in advance. (1.10)

### **Early days in custody**

---

- 5.43 Cells should be properly prepared for occupation. (1.19)

### **Care and protection of children and young people**

---

- 5.44 All contact with young women should be recorded in a consistent manner. (1.28)

### **Victims of bullying and intimidation**

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- 5.45 Information on safety and how to report concerns should be included in the families' information leaflet. (1.37)

### **Suicide and self-harm prevention**

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- 5.46 Records of ACCT reviews should be more detailed and reflect the contribution made by young women themselves. (1.41)

### **Security and disciplinary procedures**

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- 5.47 Adjudication punishments should be monitored for consistency across adjudicators. (1.52)

### **The use of force**

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- 5.48 Findings from debriefs following use of force should be examined by the safeguarding committee. (1.60)

### **Equality and diversity**

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- 5.49 The induction questionnaire should include all protected groups. (2.42)
- 5.50 Staff champions on the unit should routinely introduce themselves to young women during induction. (2.43)
- 5.51 Monitoring of protected groups should be refined for the unit. (2.44)
- 5.52 A log of the use of accredited telephone interpretation services should be maintained. (2.45)

### **Health services**

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- 5.53 The policy on dental dams should be clarified. (2.76)
- 5.54 Obsolete reference books should be discarded and only the most recent copy should be retained. (2.88)
- 5.55 Maximum-minimum temperatures should be recorded daily for the drug refrigerators to ensure that heat-sensitive products are stored correctly. Corrective action should be taken where necessary and should be monitored by pharmacy staff. (2.89)
- 5.56 Information on medicines, available to young women, should be presented in an easy-to-read format. (2.90)
- 5.57 Arrangements for dental administration should be reconsidered following the refurbishment of the health care centre Pathways. (2.93)

### **Purchases**

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- 5.58 Young women should be advised of the availability of additional hair products from the finance department. (2.114)
- 5.59 Consideration should be given to the direct provision of a selection of newspapers and magazines. (2.115)

### **Training planning and remand management**

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- 5.60 Attendance at young women's review meetings should be monitored so that any frequent absences can be identified and rectified. (4.15)

# Examples of good practice

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## **Relationships between staff and children and young people**

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- 5.61 Key workers made contact with families each week which enabled significant information to be shared and enhanced the support provided to young women. (2.18)

## **Complaints**

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- 5.62 Every time a young woman made a complaint, the unit manager provided a personal explanation. (2.58)

## **Health services**

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- 5.63 Consultation with infection control staff during the refurbishment of the health care centre Pathways ensured an environment in which best practices were possible. (2.77)
- 5.64 The 'immediate life-threatening response' category introduced by the prison, health care and GWAS was innovatory and demonstrated good partnership working. (2.78)
- 5.65 The transfer time between first assessment and the patient being admitted to a health service bed was exceptionally low. (2.99)

## **Training planning and remand management**

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- 5.66 Training planning reviews were flexibly managed to accommodate the young woman's needs. (4.16)
- 5.67 There was ongoing contact and support for young women who had moved to the adult side of the establishment. (4.17)

## **Reintegration planning**

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- 5.68 Young women had access to good legal advice to help them secure accommodation on their release. (4.30)
- 5.69 Young women had excellent access to workers qualified to help them with complex personal issues. (4.44)

## Appendix I: Inspection team

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Martin Lomas	Deputy Chief Inspector
Ian Macfadyen	Team leader
Angela Johnson	Inspector
Ian Thomson	Inspector
Paul Rowlands	Inspector
Rosemarie Bugdale	Inspector
Alice Reid	Researcher

### **Specialist inspectors**

Paul Tarbuck	Health services inspector
Tim Inkson	Care Quality Commission
Jen Walters	Ofsted inspector

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

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

<b>Safety</b>	
<b>Children and young people, particularly the most vulnerable, are held safely.</b>	
<p>At the last inspection in 2011, some young people arrived late after long, uncomfortable journeys. Reception staff dealt with new arrivals sensitively and, together with first night staff, produced good initial assessments. First night procedures were thorough and young women said that they felt safe on their first night. Induction provided essential information straightaway. Aspects of the strategic management of safeguarding needed improvement and there were some serious frailties in the internal child protection arrangements. Good efforts were being made to meet the needs of young women who were looked after by a local authority. Young women who were at risk of self-harm were well cared for. Bullying or victimisation was not a significant problem but there was potential to develop mediation. Some components of the behaviour management strategy lacked proper governance. Aspects of care planning and the review process for young women who were separated from others because of poor behaviour needed to be improved. Staff used de-escalation well to avoid unnecessary use of force. Young women dependent on drugs and/or alcohol were well cared for. Outcomes for young women were reasonably good with regard to this healthy prison test.</p>	
<b>Main recommendations</b>	
Governance of child protection procedures should be improved. This should include the development of an efficient database and frequent quality assurance by a senior manager with child protection expertise, as well as independent oversight by the local authority designated officer. (HP48)	<b>Achieved</b>
All disciplinary procedures, including the yellow and red card system, rewards and sanctions, and GOOD should be monitored for fairness and consistency and robust governance arrangement should address any concerns. (HP49)	<b>Partially achieved</b>
Young women subject to GOOD procedures should have clear care plans, incorporating individualised targets aimed at changing their behaviour, and have adequate specialist support. They should be subject to daily reviews involving them and key staff involved in their care so that they are separated for the shortest time possible and are successfully reintegrated. (HP50)	<b>Partially achieved</b>
<b>Recommendations</b>	
Staff should routinely ask young women about their escort experience. Relevant information should be regularly fed back to escort providers and others involved in escort arrangements, such as the Youth Justice Board, to resolve any concerns. (1.7)	<b>Achieved</b>

Reception procedures should include detailed guidance on strip-searching which includes obtaining the authorisation of a governor and action to be taken if a young woman refuses to be strip-searched. This should prohibit the use of force. (1.15)	<b>Achieved</b>
Reception interviews should be carried out in private. (1.16)	<b>Not achieved</b> (Recommendation repeated, 1.17)
Attendance by members of the safeguarding committee should be monitored and appropriate action taken following failures to attend. (3.8)	<b>Partially achieved</b> (Recommendation repeated, 1.26)
All injuries to young women should be monitored by the safeguarding committee. (3.9)	<b>Achieved</b>
All young women should have individual care plans based on a thorough assessment of their needs which address all aspects of their care and behaviour management. (3.10)	<b>Not achieved</b> (Recommendation repeated, 1.27)
All governors involved in the initial handling of child protection referrals should be fully trained in child protection procedures. (3.17)	<b>Achieved</b>
The whistle-blowing policy should be revised so that it clearly states that concerns about staff behaviour towards young women should be reported through the agreed child protection procedures. (3.18)	<b>Achieved</b>
ACCT reviews should be planned so that all staff with a useful contribution to make are invited to attend or make a written contribution if it is appropriate to do so. (3.23)	<b>Achieved</b>
The antisocial behaviour programme should be properly evaluated and suitably revised in the light of the evaluation. (7.11)	<b>Partially achieved</b>
Instant sanctions should be restricted to the day on which the misdemeanour occurs. If the behaviour is such that further sanctions are considered necessary, there should be a review and this should be within the context of the existing rewards and sanctions scheme. (7.20)	<b>No longer relevant</b>
Young women should be fully involved in the reviews of their status within the rewards and sanctions scheme. (7.21)	<b>Achieved</b>
Demotion within the rewards and sanctions scheme should only take place following a review involving the young woman. (7.22)	<b>Achieved</b>
Young women on the bronze level of the rewards and sanctions scheme should have access to some periods of association at the weekend. (7.23)	<b>Achieved</b>
The use of mediation and restorative justice by suitably trained staff should be routinely considered as part of individual plans to manage young women who bully or victimise others as well as those who are the victims of such behaviour. (3.31)	<b>Partially achieved</b>
The views of young women on the nature and extent of bullying and victimisation should be sought on a regular, confidential basis. (3.32)	<b>Achieved</b>
Debrief sessions for young people following their restraint should involve their active participation and this should be subject to quality assurance by managers. (7.29)	<b>Achieved</b>
The use of the special cell should cease. (7.30)	<b>No longer relevant</b>
A representative from the unit should attend drug strategy committee meetings so that unit-specific issues are covered. (3.60)	<b>Achieved</b>
YPSMS workers should receive regular, professional casework supervision. (3.61)	<b>Achieved</b>

# Respect

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

At the last inspection in 2011, young women occupied a comfortable living environment and their relationships with staff were good. Key workers provided a high level of support to the young women. There was ready access to telephones and staff helped with family contact. Applications and complaints and legal rights were dealt with well. All meals were taken in the dining area, mostly with staff in a convivial atmosphere, and catering arrangements in general were good. Young women from minority groups, including foreign nationals, received good individual care but there was no monitoring of equality of treatment. Young women had unhindered access to religious services and a dedicated unit chaplain. Health care services were generally good, with particularly good mental health provision. Outcomes for young women were good in relation to this healthy prison test.

## Recommendations

There should be effective monitoring procedures in place to ensure that young women from minority groups have equivalent treatment and outcomes. (4.8)	Partially achieved
The diversity representative should have a role description and be supported in her role. (4.9)	Achieved
The communal life and activities of the unit should encourage all young women to take pride in their own cultural heritage and respect that of others. (4.10)	Achieved
The unit manager and the equalities officer should agree how race complaints will be investigated and dealt with. They should also establish a system to monitor equality of treatment and a robust system of governance of equality issues in general. (4.13)	Achieved
Policies and procedures should be reviewed to ensure they enhance partnership working and reflect the needs of young women and current practice in prisons. (5.11)	Achieved
The lead nurse should access regular clinical supervision. (5.12)	Not achieved
All emergency equipment should be checked regularly and this should be recorded. There should be sufficient staff trained to use emergency equipment. (5.13)	Achieved
A system should be in place to monitor explained and unexplained injuries reported on an F213. This should be documented and reported to the safeguarding committee. (5.14)	Achieved
Pharmacy staff should visit the unit frequently to assist with medicines management functions. (5.20)	Achieved
All procedures and policies should be formally reviewed and adopted via the medicines and therapeutics committee. Relevant staff should read and sign the agreed procedures. (5.21)	Achieved
Arrangements for the administration of medicines should be reviewed to enable all registered nursing staff to administer medicines. (5.22)	Achieved
Clinical triage algorithms should be used by nursing staff to ensure consistency of advice and treatment for young women. (5.31)	Not achieved (Recommendation repeated, 2.83)
More health education should be provided by primary care services working jointly with other departments, such as PE and catering. (5.32)	Achieved
Health promotion and health care information across all clinical services should be easily accessible and include age-appropriate information or	Achieved

pictorial information for young women with literacy difficulties. (5.33)	
Young women should have access to a full range of clinics and these should be advertised. (5.34)	<b>Achieved</b>
There should be emergency childbirth equipment and staff should be trained in emergency childbirth. (5.35)	<b>Achieved</b>
All young women should be able to place an order within 24 hours of arrival. (8.12)	<b>Not achieved</b> (Recommendation repeated, 2.113)

## Purposeful activity

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

At the last inspection in 2011, young women enjoyed a good deal of time out of cell, most of it spent purposefully. They could go outside in the grounds every day and trained sports and games officers from the unit organised outdoor activities. Young women benefited from good quality education, resulting in the achievement of high levels of accreditation, although there was considerable variation between subjects. Young women worked hard in lessons and behaved well. Standards of work were generally good. Provision met the needs of the young women well and they had good learning support. Young women had access to good quality PE and access to the library was satisfactory. Outcomes for young women were good in relation to this healthy prison test.

### Recommendations

The quality and consistency of individual learning plans should be improved. (6.14)	<b>Partially achieved</b>
Young women diagnosed with dyslexia should have access to appropriate support. (6.15)	<b>Achieved</b>
The levels of accreditation in art, personal, social and health education and business studies should be improved. (6.16)	<b>Achieved</b>
There should be access to the library at weekends. (6.19)	<b>No longer relevant</b>
Information should be collected on why young women refuse to attend PE so that potential barriers to participation can be identified and addressed. (6.28)	<b>Achieved</b>
Young women's views on PE should be regularly surveyed to ensure that the programme continues to meet their needs. (6.29)	<b>Achieved</b>
Inter-agency time should be used constructively. (6.35)	<b>Partially achieved</b>

## Resettlement

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

The strategic management of resettlement was improving following an excellent needs analysis and the involvement of South Gloucestershire Youth Offending Services. Training planning arrangements worked well and transition planning to the adult prison with ongoing support was commendable. Significant effort was put into finding suitable accommodation for young women prior to their release. Connexions offered a good quality, but limited, service. Almost all young women released had education, training and employment (ETE) placements in place but release on temporary licence

(ROTL) was not used to its full potential. There was some support available for finance management. Planning for ongoing health services was too limited. A range of offending behaviour work was delivered by the YOT. Visits entitlements were good but some young women did not get visits. Outcomes for young women were good in relation to this healthy prison test.

### Recommendations

Collaborative links should be developed with a range of voluntary, statutory and community organisations to assist with resettlement arrangements, including the development of post-release support. (9.6)	<b>Not achieved</b> (Recommendation repeated, 4.7)
The development of good quality training placements and employment opportunities through well-organised release on temporary licence arrangements should be part of the training planning process. (9.7)	<b>Not achieved</b> (Recommendation repeated, 4.8)
The input from Connexions should be increased to meet the needs of the young women. (9.21)	<b>Achieved</b>
Young women should be given information on how to access primary care services prior to their release and support in accessing services if required. (9.24)	<b>Achieved</b>
Interventions and programmes should be subject to evaluation to measure their effectiveness. (9.27)	<b>Not achieved</b>
Visits should be for a minimum of one and a half hour's duration. (9.42)	<b>Not achieved</b> (Recommendation repeated, 4.40)
Efforts should be made to consult regularly with families and visitors to ascertain the reasons for the low take up of visits. (9.43)	<b>Not achieved</b> (Recommendation repeated, 4.41)
Family days should be organised at least monthly. (9.44)	<b>Not achieved</b> (Recommendation repeated, 4.42)

## Appendix III: Establishment population profile

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

### Population breakdown by:

Status	Number of young people	%
Sentenced	4	66.6
Recalls	0	
Convicted unsentenced	0	
Remand	2	33.3
Detainee	0	
<b>Total</b>	<b>6</b>	<b>100</b>

Age	Number of young people	%
15 years		
16 years		
17 years	6	100
18 years		
<b>Total</b>	<b>6</b>	<b>100</b>

Nationality	Number of young people	%
British	6	100
Foreign nationals		
<b>Total</b>	<b>6</b>	<b>100</b>

Ethnicity	Number of young people	%
<i>White</i>		
British	4	66.6
Irish		
Other white		
<i>Mixed</i>		
White and black Caribbean	1	16.65
White and black African		
White and Asian		
Other mixed		
<i>Asian or Asian British</i>		
Indian		
Pakistani		
Bangladeshi		
Other Asian		
<i>Black or black British</i>		
Caribbean	1	16.65
African		
Other black		
<i>Chinese or other ethnic group</i>		
Chinese		
Arab		
Other ethnic group		
<i>Not stated</i>		
<b>Total</b>	<b>6</b>	<b>100</b>

Religion	Number of young people	%
Baptist		
Church of England	1	16.65
Roman Catholic		
Other Christian denominations	1	16.65
Muslim		
Sikh		
Hindu		
Buddhist		
Jewish		
Other		
No religion	4	66.6
<b>Total</b>	<b>6</b>	<b>100</b>

Other demographics	Number of young people	%
Gypsy/Romany/ traveller	0	
<b>Total</b>	<b>0</b>	

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

Length of stay	<1 mth	1–3 mths	3–6 mths	6–12 mths	1–2 yrs	2 yrs +	4 yrs +	Total
<b>Age</b>								
15 years								
16 years								
17 years	1		1	1	1			4
18 years								
<b>Total</b>	<b>1</b>		<b>1</b>	<b>1</b>	<b>1</b>			<b>4</b>

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

Length of stay	<1 mth	1–3 mths	3–6 mths	6–12 mths	1–2 yrs	2 yrs+	4 yrs +	Total
<b>Age</b>								
15 years								
16 years								
17 years	2							2
18 years								
<b>Total</b>	<b>2</b>							<b>2</b>

Main offence	Number of young people	%
Violence against the person	2	33.3
Sexual offences		
Burglary		
Robbery	3	50
Theft and handling		
Fraud and forgery		
Drugs offences	1	16.65
Other offences		
Offence not recorded/holding warrant		
<b>Total</b>	<b>6</b>	<b>100</b>

Number of DTOs by age and full sentence length, including the time in the community

Sentence	4 mths	6 mths	8 mths	10 mths	12 mths	18 mths	24 mths	Recall	Total
Age									
15 years									
16 years									
17 years	1			1			1		3
18 years									
<b>Total</b>	<b>1</b>			<b>1</b>			<b>1</b>		<b>3</b>

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

Sentence	Under 2 yrs	2-3 yrs	3-4 yrs	4-5 yrs	5 yrs +	Recall	Total
Age							
15 years							
16 years							
17 years		1					1
18 years							
<b>Total</b>		<b>1</b>					<b>1</b>

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

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

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

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

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

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

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

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## Children and young people survey methodology

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

### Selecting the sample

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At the time of the survey on 8 August 2012, the population of young women at HMYOI Eastwood Park: Mary Carpenter Unit was six. All young women in the unit were offered a questionnaire.

Refusals are noted and no attempts are made to replace them. No young women refused.

Interviews are carried out with any respondents with literacy difficulties. In total, no respondents were interviewed.

### Methodology

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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
- seal the questionnaire in the envelope provided and hand it to a member of staff, if they were agreeable, or
- 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

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In total, six respondents completed and returned their questionnaires. This represented 100% of children and young people in the establishment at the time. The response rate from the sample was 100%.

### Summary

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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 are excluded). The actual numbers will match up as the data are cleaned to be consistent.

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

# Survey summary

## SECTION 1: ABOUT YOU

<b>Q1</b>	<b>How old are you?</b>	
	15.....	0 (0%)
	16.....	0 (0%)
	17.....	6 (100%)
	18.....	0 (0%)
<b>Q2</b>	<b>Are you a British citizen?</b>	
	Yes.....	6 (100%)
	No.....	0 (0%)
<b>Q3</b>	<b>Do you understand spoken English?</b>	
	Yes.....	6 (100%)
	No.....	0 (0%)
<b>Q4</b>	<b>Do you understand written English?</b>	
	Yes.....	6 (100%)
	No.....	0 (0%)
<b>Q5</b>	<b>What is your ethnic origin?</b>	
	White - British.....	4 (67%)
	White - Irish.....	0 (0%)
	White - other.....	0 (0%)
	Black or black British - Caribbean.....	1 (17%)
	Black or black British - African.....	0 (0%)
	Black or black British - other.....	0 (0%)
	Asian or Asian British - Indian.....	0 (0%)
	Asian or Asian British - Pakistani.....	0 (0%)
	Asian or Asian British - Bangladeshi.....	0 (0%)
	Asian or Asian British - Chinese.....	0 (0%)
	Asian or Asian British - other.....	0 (0%)
	Mixed race - white and black Caribbean.....	1 (17%)
	Mixed race - white and black African.....	0 (0%)
	Mixed race - white and Asian.....	0 (0%)
	Mixed race - other.....	0 (0%)
	Arab.....	0 (0%)
	Other ethnic group.....	0 (0%)
<b>Q6</b>	<b>What is your religion?</b>	
	None.....	2 (33%)
	Church of England.....	2 (33%)
	Catholic.....	0 (0%)
	Protestant.....	0 (0%)
	Other Christian denomination.....	2 (33%)
	Buddhist.....	0 (0%)
	Hindu.....	0 (0%)
	Jewish.....	0 (0%)
	Muslim.....	0 (0%)
	Sikh.....	0 (0%)
<b>Q7</b>	<b>Do you consider yourself to be Gypsy/Romany/Traveller?</b>	
	Yes.....	1 (17%)
	No.....	5 (83%)
	Don't know.....	0 (0%)

<b>Q8</b>	<b>Do you have any children?</b>	
	Yes.....	0 (0%)
	No.....	6 (100%)
<b>Q9</b>	<b>Do you consider yourself to have a disability</b> (i.e. do you need help with any long-term physical, mental or learning needs)?	
	Yes.....	2 (33%)
	No.....	4 (67%)
<b>Q10</b>	<b>Have you ever been in local authority care?</b>	
	Yes.....	3 (60%)
	No.....	2 (40%)

## SECTION 2: ABOUT YOUR SENTENCE

<b>Q1</b>	<b>Are you sentenced?</b>	
	Yes.....	4 (67%)
	No - unsentenced/on remand.....	2 (33%)
<b>Q2</b>	<b>How long is your sentence (the full DTO sentence)?</b>	
	<b>Not sentenced</b> .....	2 (33%)
	<i>Less than 6 months</i> .....	1 (17%)
	<i>6 to 12 months</i> .....	2 (33%)
	<i>More than 12 months, up to 2 years</i> .....	0 (0%)
	<i>More than 2 years</i> .....	1 (17%)
	<i>Indeterminate sentence for public protection (IPP)</i> .....	0 (0%)
<b>Q3</b>	<b>How long have you been in this establishment?</b>	
	<i>Less than 1 month</i> .....	3 (50%)
	<i>1 to 6 months</i> .....	2 (33%)
	<i>More than 6 months, but less than 12 months</i> .....	1 (17%)
	<i>12 months to 2 years</i> .....	0 (0%)
	<i>More than 2 years</i> .....	0 (0%)
<b>Q4</b>	<b>Is this your first time in custody in a YOI, secure children's home or secure training centre?</b>	
	Yes.....	4 (67%)
	No.....	2 (33%)

## SECTION 3: COURTS, TRANSFERS AND ESCORTS

<b>Q1</b>	<b>On your most recent journey here, did you feel safe?</b>	
	Yes.....	6 (100%)
	No.....	0 (0%)
	<i>Don't remember</i> .....	0 (0%)
<b>Q2</b>	<b>On your most recent journey here, were there any adults (over 18) or a mix of males and females travelling with you?</b>	
	Yes.....	4 (67%)
	No.....	2 (33%)
	<i>Don't remember</i> .....	0 (0%)
<b>Q3</b>	<b>On your most recent journey here, how long did you spend in the van?</b>	
	<i>Less than 2 hours</i> .....	4 (67%)
	<i>2 to 4 hours</i> .....	2 (33%)
	<i>More than 4 hours</i> .....	0 (0%)
	<i>Don't remember</i> .....	0 (0%)
<b>Q4</b>	<b>On your most recent journey here, were you offered a toilet break?</b>	
	<b><i>My journey was less than 2 hours</i></b> .....	4 (67%)

Yes..... 0 (0%)  
 No..... 2 (33%)  
 Don't remember..... 0 (0%)

**Q5 On your most recent journey here, were you offered anything to eat or drink?**  
**My journey was less than 2 hours**..... 4 (80%)  
 Yes..... 1 (20%)  
 No..... 0 (0%)  
 Don't remember..... 0 (0%)

**Q6 On your most recent journey here, how did you feel you were treated by the escort staff?**  
 Very well..... 2 (33%)  
 Well..... 1 (17%)  
 Neither..... 3 (50%)  
 Badly..... 0 (0%)  
 Very badly..... 0 (0%)  
 Don't remember..... 0 (0%)

**Q7 Before you arrived here, did you receive any information to help you prepare for coming here?**  
 Yes - and it was helpful..... 1 (17%)  
 Yes - but it was not helpful..... 0 (0%)  
 No - I received no information..... 4 (67%)  
 Don't remember..... 1 (17%)

**SECTION 4: FIRST DAYS**

**Q1 How long were you in reception?**  
 Less than 2 hours..... 6 (100%)  
 2 hours or longer..... 0 (0%)  
 Don't remember..... 0 (0%)

**Q2 When you were searched, was this carried out in a respectful way?**  
 Yes..... 6 (100%)  
 No..... 0 (0%)  
 Don't remember/not applicable..... 0 (0%)

**Q3 How well did you feel you were treated in reception?**  
 Very well..... 3 (50%)  
 Well..... 2 (33%)  
 Neither..... 1 (17%)  
 Badly..... 0 (0%)  
 Very badly..... 0 (0%)  
 Don't remember..... 0 (0%)

**Q4 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..... 5 (100%)	Money worries..... 3 (60%)
Loss of property..... 2 (40%)	Feeling worried/upset/needing someone to talk to..... 3 (60%)
Feeling scared..... 3 (60%)	Health problems..... 3 (60%)
Gang problems..... 2 (40%)	Getting phone numbers..... 2 (40%)
Contacting family..... 5 (100%)	<b>Staff did not ask me about any of these</b> ..... 0 (0%)

**Q5 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..... 5 (83%)    Money worries..... 1 (17%)

Loss of property.....	0 (0%)	Feeling worried/upset/needing someone to talk to .....	1 (17%)
Feeling scared .....	1 (17%)	Health problems.....	2 (33%)
Gang problems .....	0 (0%)	Getting phone numbers .....	3 (50%)
Contacting family.....	5 (83%)	<b>I did not have any problems</b> .....	0 (0%)

**Q6 When you first arrived here, were you given any of the following? (Please tick all that apply to you.)**

Toiletries/basic items .....	5 (83%)
The opportunity to have a shower .....	5 (83%)
Something to eat .....	4 (67%)
A free phone call to friends/family.....	6 (100%)
PIN phone credit.....	6 (100%)
Information about feeling worried/upset.....	1 (17%)
Don't remember.....	1 (17%)
<b>I was not given any of these</b> .....	0 (0%)

**Q7 Within your first 24 hours here, did you have access to the following people or services? (Please tick all that apply to you.)**

Chaplain.....	2 (33%)
Peer mentor.....	1 (17%)
Childline/Samaritans.....	0 (0%)
The prison shop/canteen.....	0 (0%)
Don't remember .....	1 (17%)
<b>I did not have access to any of these</b> .....	3 (50%)

**Q8 Before you were locked up on your first night, were you seen by a doctor or nurse?**

Yes.....	4 (67%)
No .....	2 (33%)
Don't remember.....	0 (0%)

**Q9 Did you feel safe on your first night here?**

Yes.....	5 (83%)
No .....	1 (17%)
Don't remember .....	0 (0%)

**Q10 Did the induction course cover everything you needed to know about the establishment?**

<b>I have not been on an induction course</b> .....	0 (0%)
Yes.....	4 (67%)
No .....	1 (17%)
Don't remember.....	1 (17%)

## SECTION 5: DAILY LIFE AND RESPECT

**Q1 Can you normally have a shower every day if you want to?**

Yes.....	6 (100%)
No .....	0 (0%)
Don't know.....	0 (0%)

**Q2 Is your cell call bell normally answered within five minutes?**

Yes.....	4 (67%)
No .....	0 (0%)
Don't know.....	2 (33%)

**Q3 What is the food like here?**

Very good.....	0 (0%)
Good.....	0 (0%)
Neither.....	1 (17%)
Bad .....	1 (17%)

	Very bad .....	4 (67%)
<b>Q4</b>	<b>Does the shop/canteen sell a wide enough variety of products?</b>	
	<i>I have not bought anything yet/don't know</i> .....	0 (0%)
	Yes.....	3 (50%)
	No .....	3 (50%)
<b>Q5</b>	<b>How easy is it for you to attend religious services?</b>	
	<i>I don't want to attend religious services</i> .....	2 (40%)
	Very easy.....	1 (20%)
	Easy.....	2 (40%)
	Neither.....	0 (0%)
	Difficult.....	0 (0%)
	Very difficult.....	0 (0%)
	Don't know.....	0 (0%)
<b>Q9</b>	<b>Are you religious beliefs respected?</b>	
	Yes.....	2 (33%)
	No .....	1 (17%)
	Don't know/not applicable .....	3 (50%)
<b>Q6</b>	<b>Can you speak to a Chaplain of your faith in private if you want to?</b>	
	Yes.....	4 (67%)
	No .....	0 (0%)
	Don't know/not applicable .....	2 (33%)
<b>Q7</b>	<b>Can you speak to a peer mentor when you need to?</b>	
	Yes.....	5 (83%)
	No .....	0 (0%)
	Don't know.....	1 (17%)
<b>Q8</b>	<b>Can you speak to a member of the Independent Monitoring Board (IMB) when you need to?</b>	
	Yes.....	5 (100%)
	No .....	0 (0%)
	Don't know.....	0 (0%)
<b>Q9</b>	<b>Can you speak to an advocate (an outside person to help you) when you need to?</b>	
	Yes.....	5 (100%)
	No .....	0 (0%)
	Don't know.....	0 (0%)

## SECTION 6: RELATIONSHIPS WITH STAFF

<b>Q1</b>	<b>Do most staff treat you with respect?</b>	
	Yes.....	5 (83%)
	No .....	1 (17%)
<b>Q2</b>	<b>If you had a problem, who would you turn to? (Please tick all that apply to you.)</b>	
	No one.....	1 (17%)
	Personal officer.....	2 (33%)
	Wing officer .....	0 (0%)
	Teacher/education staff.....	0 (0%)
	Gym staff .....	0 (0%)
	Chaplain.....	0 (0%)
	IMB.....	1 (17%)
	YOT worker.....	0 (0%)
	Social worker.....	0 (0%)
	Health services staff.....	0 (0%)
	Peer mentor.....	0 (0%)
	Another young person here..	0 (0%)
	Case worker .....	0 (0%)
	Advocate.....	0 (0%)
	Family/friends.....	4 (67%)
	Childline/Samaritans .....	0 (0%)
<b>Q3</b>	<b>Have staff checked on you personally in the last week to see how you are getting on?</b>	
	Yes.....	4 (67%)

	No.....	2 (33%)
<b>Q4</b>	<b>When did you first meet your personal (named) officer?</b>	
	<i>I still have not met him/her</i> .....	1 (17%)
	<i>In your first week</i> .....	3 (50%)
	<i>After your first week</i> .....	1 (17%)
	<i>Don't remember</i> .....	1 (17%)
<b>Q5</b>	<b>How often do you see your personal (named) officer?</b>	
	<i>I still have not met him/her</i> .....	1 (17%)
	<i>At least once a week</i> .....	4 (67%)
	<i>Less than once a week</i> .....	1 (17%)
<b>Q6</b>	<b>Do you feel your personal (named) officer tries to help you?</b>	
	<i>I still have not met him/her</i> .....	1 (20%)
	Yes.....	4 (80%)
	No.....	0 (0%)

## SECTION 7: APPLICATIONS AND COMPLAINTS

<b>Q1</b>	<b>Is it easy to make an application?</b>	
	Yes.....	5 (83%)
	No.....	0 (0%)
	<i>Don't know</i> .....	1 (17%)
<b>Q2</b>	<b>Are applications sorted out fairly?</b>	
	<i>I have not made an application</i> .....	3 (50%)
	Yes.....	1 (17%)
	No.....	2 (33%)
<b>Q3</b>	<b>Are applications sorted out quickly (within 7 days)?</b>	
	<i>I have not made an application</i> .....	3 (50%)
	Yes.....	1 (17%)
	No.....	2 (33%)
<b>Q4</b>	<b>Is it easy to make a complaint?</b>	
	Yes.....	4 (67%)
	No.....	1 (17%)
	<i>Don't know</i> .....	1 (17%)
<b>Q5</b>	<b>Are complaints sorted out fairly?</b>	
	<i>I have not made a complaint</i> .....	2 (33%)
	Yes.....	1 (17%)
	No.....	3 (50%)
<b>Q6</b>	<b>Are complaints sorted out quickly (within 7 days)?</b>	
	<i>I have not made a complaint</i> .....	2 (33%)
	Yes.....	3 (50%)
	No.....	1 (17%)
<b>Q7</b>	<b>Have you ever felt too scared or intimidated to make a complaint?</b>	
	Yes.....	0 (0%)
	No.....	5 (83%)
	<i>Never needed to make a complaint</i> .....	1 (17%)

## SECTION 8: REWARDS AND SANCTIONS, AND DISCIPLINE

<b>Q1</b>	<b>What level of the rewards and sanctions scheme are you on?</b>	
	<i>Don't know what the rewards and sanctions scheme is</i> .....	0 (0%)
	<i>Enhanced (top)</i> .....	2 (33%)

Standard (middle).....	4 (67%)
Basic (bottom).....	0 (0%)
Don't know.....	0 (0%)

**Q2 Have you been treated fairly in your experience of the rewards and sanctions scheme?**

<i>Don't know what the rewards and sanctions scheme is</i> .....	0 (0%)
Yes.....	5 (83%)
No.....	1 (17%)
Don't know.....	0 (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> .....	0 (0%)
Yes.....	3 (50%)
No.....	3 (50%)
Don't know.....	0 (0%)

**Q4 Have you had a minor report since you have been here?**

Yes.....	1 (17%)
No.....	3 (50%)
Don't know.....	2 (33%)

**Q5 If you have had a minor report, was the process explained clearly to you?**

<i>I have not had a minor report</i> .....	5 (83%)
Yes.....	1 (17%)
No.....	0 (0%)

**Q6 Have you had an adjudication ('nicking') since you have been here?**

Yes.....	3 (50%)
No.....	2 (33%)
Don't know.....	1 (17%)

**Q7 If you have had an adjudication ('nicking'), was the process explained clearly to you?**

<i>I have not had an adjudication</i> .....	3 (50%)
Yes.....	3 (50%)
No.....	0 (0%)

**Q8 Have you been physically restrained (C and R) since you have been here?**

Yes.....	0 (0%)
No.....	5 (83%)
Don't know.....	1 (17%)

**Q9 If you have spent a night in the care and separation unit (CSU), how were you treated by staff?**

<i>I have not been to the care and separation unit</i> .....	6 (100%)
Very well.....	0 (0%)
Well.....	0 (0%)
Neither.....	0 (0%)
Badly.....	0 (0%)
Very badly.....	0 (0%)

**SECTION 9: SAFETY**

**Q1 Have you ever felt unsafe here?**

Yes.....	1 (17%)
No.....	5 (83%)

**Q2 Do you feel unsafe now?**

Yes.....	0 (0%)
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No ..... 6 (100%)

**Q3 In which areas have you felt unsafe? (Please tick all that apply to you.)**

<b>Never felt unsafe</b> .....	5 (83%)
<i>Everywhere</i> .....	0 (0%)
<i>Care and separation unit</i> .....	0 (0%)
<i>Association areas</i> .....	0 (0%)
<i>Reception area</i> .....	0 (0%)
<i>At the gym</i> .....	0 (0%)
<i>In an exercise yard</i> .....	0 (0%)
<i>At work</i> .....	0 (0%)
<i>At education</i> .....	1 (17%)
<i>At religious services</i> .....	0 (0%)
<i>At meal times</i> .....	1 (17%)
<i>At healthcare</i> .....	0 (0%)
<i>Visits area</i> .....	0 (0%)
<i>In wing showers</i> .....	0 (0%)
<i>In gym showers</i> .....	0 (0%)
<i>In corridors/stairwells</i> .....	1 (17%)
<i>On your landing/wing</i> .....	0 (0%)
<i>During movement</i> .....	0 (0%)
<i>In your cell</i> .....	0 (0%)

**Q4 Have you ever been victimised by another young person/group of young people here (e.g. insulted or assaulted you)?**

Yes.....	1 (17%)
No .....	5 (83%)

**Q5 If yes, what did the incident(s) involve/what was it about? (Please tick all that apply to you.)**

<i>Insulting remarks (about you, your family or friends)</i> .....	0 (0%)
<i>Physical abuse (being hit, kicked or assaulted)</i> .....	0 (0%)
<i>Sexual abuse</i> .....	0 (0%)
<i>Feeling threatened or intimidated</i> .....	1 (17%)
<i>Having your canteen/property taken</i> .....	0 (0%)
<i>Medication</i> .....	0 (0%)
<i>Debt</i> .....	0 (0%)
<i>Drugs</i> .....	0 (0%)
<i>Your race or ethnic origin</i> .....	0 (0%)
<i>Your religion/religious beliefs</i> .....	0 (0%)
<i>Your nationality</i> .....	0 (0%)
<i>You are from a different part of the country to others</i> .....	0 (0%)
<i>You are from a Traveller community</i> .....	0 (0%)
<i>Your sexuality</i> .....	0 (0%)
<i>Your age</i> .....	0 (0%)
<i>You having a disability</i> .....	0 (0%)
<i>You were new here</i> .....	0 (0%)
<i>Your offence/crime</i> .....	1 (17%)
<i>Gang related issues</i> .....	0 (0%)

**Q7 Have you ever been victimised by staff here (e.g. insulted or assaulted you)?**

Yes.....	1 (17%)
No .....	5 (83%)

**Q8 If yes, what did the incident(s) involve/what was it about? (Please tick all that apply to you.)**

<i>Insulting remarks (about you, your family or friends)</i> .....	0 (0%)
<i>Physical abuse (being hit, kicked or assaulted)</i> .....	0 (0%)
<i>Sexual abuse</i> .....	0 (0%)
<i>Feeling threatened or intimidated</i> .....	0 (0%)

Having your canteen/property taken .....	0 (0%)
Medication .....	0 (0%)
Debt.....	0 (0%)
Drugs.....	0 (0%)
Your race or ethnic origin .....	0 (0%)
Your religion/religious beliefs.....	0 (0%)
Your nationality.....	0 (0%)
You are from a different part of the country to others .....	0 (0%)
You are from a Traveller community .....	0 (0%)
Your sexuality .....	0 (0%)
Your age .....	0 (0%)
You having a disability.....	0 (0%)
You were new here .....	0 (0%)
Your offence/crime .....	0 (0%)
Gang related issues.....	0 (0%)
Because you made a complaint.....	0 (0%)

**Q10 If you were being victimised, would you tell a member of staff?**

Yes.....	2 (33%)
No .....	2 (33%)
Don't know.....	2 (33%)

**Q11 Do you think staff would take it seriously if you told them you told them you had been victimised?**

Yes.....	4 (67%)
No .....	1 (17%)
Don't know.....	1 (17%)

**Q12 Is shouting through the windows a problem here?**

Yes.....	0 (0%)
No .....	4 (67%)
Don't know.....	2 (33%)

## SECTION 10: HEALTH SERVICES

**Q1 Is it easy to see the following people if you need to?**

	Yes	No	Don't know
The doctor .....	3 (50%)	1 (17%)	2 (33%)
The nurse .....	5 (83%)	0 (0%)	1 (17%)
The dentist .....	2 (33%)	3 (50%)	1 (17%)

**Q2 What do you think of the overall quality of the health services here?**

<b><i>I have not been</i></b> .....	1 (17%)
<i>Very good</i> .....	1 (17%)
<i>Good</i> .....	3 (50%)
<i>Neither</i> .....	1 (17%)
<i>Bad</i> .....	0 (0%)
<i>Very bad</i> .....	0 (0%)

**Q3 If you are taking medication, are you allowed to keep some/all of it in your room?**

<b><i>I am not taking any medication</i></b> .....	3 (60%)
<i>Yes, all of my meds</i> .....	0 (0%)
<i>Yes, some of my meds</i> .....	0 (0%)
<i>No</i> .....	2 (40%)

**Q4 Do you have any emotional or mental health problems?**

Yes.....	2 (33%)
No .....	4 (67%)

<b>Q5</b>	<b>Are you being helped by anyone here with your emotional or mental health problems</b> (e.g. a psychologist, doctor, counsellor, personal officer or another member of staff)?	
	<b><i>I do not have any emotional or mental health problems</i></b> .....	4 (80%)
	Yes.....	1 (20%)
	No.....	0 (0%)
<b>Q6</b>	<b>Did you have problems with alcohol when you first arrived here?</b>	
	Yes.....	1 (20%)
	No.....	4 (80%)
<b>Q7</b>	<b>Have you received any help with alcohol problems here?</b>	
	Yes.....	0 (0%)
	No.....	5 (100%)
<b>Q8</b>	<b>Did you have problems with drugs when you first arrived here?</b>	
	Yes.....	0 (0%)
	No.....	5 (100%)
<b>Q9</b>	<b>Do you have problems with drugs now?</b>	
	Yes.....	0 (0%)
	No.....	5 (100%)
<b>Q10</b>	<b>Have you received any help with drugs problems here?</b>	
	Yes.....	1 (20%)
	No.....	4 (80%)
<b>Q11</b>	<b>How easy or difficult is it to get illegal drugs here?</b>	
	<i>Very easy</i> .....	0 (0%)
	<i>Easy</i> .....	0 (0%)
	<i>Neither</i> .....	0 (0%)
	<i>Difficult</i> .....	0 (0%)
	<i>Very difficult</i> .....	1 (20%)
	<i>Don't know</i> .....	4 (80%)

## SECTION 11: ACTIVITIES

<b>Q1</b>	<b>How old were you when you were last at school?</b>	
	<i>14 or under</i> .....	2 (40%)
	<i>15 or over</i> .....	3 (60%)
<b>Q2</b>	<b>Have you ever been excluded from school?</b>	
	Yes.....	5 (100%)
	No.....	0 (0%)
	<i>Not applicable</i> .....	0 (0%)
<b>Q3</b>	<b>Did you ever skip school before you came into custody?</b>	
	Yes.....	5 (100%)
	No.....	0 (0%)
	<i>Not applicable</i> .....	0 (0%)
<b>Q4</b>	<b>Do you CURRENTLY take part in any of the following activities? Please tick all that apply to you.)</b>	
	<i>Education</i> .....	5 (100%)
	<i>A job in this establishment</i> .....	1 (20%)
	<i>Vocational or skills training</i> .....	0 (0%)
	<i>Offending behaviour programmes</i> .....	2 (40%)
	<b><i>I am not currently involved in any of these</i></b> .....	0 (0%)

<b>Q5</b>	<b>If you have been involved in any of the following activities here, do you think they will help you when you leave prison?</b>				
		<b>Not been involved</b>	Yes	No	Don't know
	Education	0 (0%)	5 (100%)	0 (0%)	0 (0%)
	A job in this establishment	1 (25%)	0 (0%)	1 (25%)	2 (50%)
	Vocational or skills training	1 (33%)	0 (0%)	0 (0%)	2 (67%)
	Offending behaviour programmes	0 (0%)	1 (25%)	1 (25%)	2 (50%)
<b>Q6</b>	<b>Do you usually have association every day?</b>				
	Yes.....				5 (100%)
	No.....				0 (0%)
<b>Q7</b>	<b>Can you usually go outside for exercise every day?</b>				
	<b>Don't want to go</b> .....				1 (20%)
	Yes.....				3 (60%)
	No.....				1 (20%)
<b>Q8</b>	<b>How many times do you usually go to the gym each week?</b>				
	<b>Don't want to go</b> .....				0 (0%)
	None.....				0 (0%)
	One to two times.....				3 (60%)
	Three to five times.....				2 (40%)
	More than five times.....				0 (0%)

## SECTION 12: FAMILY AND FRIENDS

<b>Q1</b>	<b>Are you able to use the telephone every day if you want to?</b>				
	Yes.....				5 (83%)
	No.....				0 (0%)
	Don't know.....				1 (17%)
<b>Q2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>				
	Yes.....				3 (50%)
	No.....				2 (33%)
	Don't know.....				1 (17%)
<b>Q3</b>	<b>How many visits do you usually have each week, from family or friends?</b>				
	<b>I don't get visits</b> .....				1 (17%)
	Less than one a week.....				4 (67%)
	About one a week.....				1 (17%)
	More than one a week.....				0 (0%)
	Don't know.....				0 (0%)
<b>Q4</b>	<b>How easy is it for your family and friends to visit you here?</b>				
	<b>I don't get visits</b> .....				1 (17%)
	Very easy.....				1 (17%)
	Easy.....				1 (17%)
	Neither.....				1 (17%)
	Difficult.....				0 (0%)
	Very difficult.....				2 (33%)
	Don't know.....				0 (0%)
<b>Q5</b>	<b>Do your visits usually start on time?</b>				
	<b>I don't get visits</b> .....				1 (17%)
	Yes.....				0 (0%)
	No.....				3 (50%)
	Don't know.....				2 (33%)

## SECTION 13: PREPARATION FOR RELEASE

<b>Q1</b>	<b>Do you think you will have a problem with any of the following things, when you are released? (Please tick all that apply to you.)</b>	
	<i>Finding accommodation</i> .....	2 (33%)
	<i>Getting into school or college</i> .....	2 (33%)
	<i>Getting a job</i> .....	4 (67%)
	<i>Money/finances</i> .....	4 (67%)
	<i>Claiming benefits</i> .....	2 (33%)
	<i>Continuing health services</i> .....	1 (17%)
	<i>Opening a bank account</i> .....	2 (33%)
	<i>Avoiding bad relationships</i> .....	1 (17%)
	<b><i>I won't have any problems</i></b> .....	0 (0%)
<b>Q2</b>	<b>Do you have a training plan, sentence plan or remand plan (i.e. a plan that is discussed in your DTO/planning meetings, which sets out your targets)?</b>	
	Yes.....	2 (33%)
	No.....	1 (17%)
	<i>Don't know</i> .....	3 (50%)
<b>Q3</b>	<b>Were you involved in the development of your plan?</b>	
	<b><i>I don't have a plan/don't know if I have a plan</i></b> .....	4 (67%)
	Yes.....	1 (17%)
	No.....	1 (17%)
<b>Q4</b>	<b>Do you understand the targets that have been set in your plan?</b>	
	<b><i>I don't have a plan/don't know if I have a plan</i></b> .....	4 (67%)
	Yes.....	2 (33%)
	No.....	0 (0%)
<b>Q5</b>	<b>Do you have a caseworker here?</b>	
	Yes.....	3 (50%)
	No.....	1 (17%)
	<i>Don't know</i> .....	2 (33%)
<b>Q6</b>	<b>Has your caseworker helped to prepare you for release?</b>	
	<b><i>I don't have a caseworker</i></b> .....	3 (50%)
	Yes.....	1 (17%)
	No.....	1 (17%)
	<i>Don't know</i> .....	1 (17%)
<b>Q7</b>	<b>Has your social worker been to visit you since you have been here?</b>	
	<b><i>I don't have a social worker</i></b> .....	2 (33%)
	Yes.....	2 (33%)
	No.....	2 (33%)
<b>Q8</b>	<b>Have you had a say in what will happen to you when you are released?</b>	
	Yes.....	1 (20%)
	No.....	3 (60%)
	<i>Don't know</i> .....	1 (20%)
<b>Q9</b>	<b>Do you know who to contact for help with any of the following problems, before your release? (Please tick all that apply to you.)</b>	
	<i>Finding accommodation</i> .....	3 (60%)
	<i>Getting into school or college</i> .....	2 (40%)
	<i>Getting a job</i> .....	2 (40%)
	<i>Help with money/finances</i> .....	3 (60%)
	<i>Help with claiming benefits</i> .....	1 (20%)
	<i>Continuing health services</i> .....	1 (20%)
	<i>Opening a bank account</i> .....	3 (60%)

Avoiding bad relationships..... 1 (20%)  
**I don't know who to contact**..... 2 (40%)

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

<b>Not sentenced</b> ..... 2 (50%)	<i>Having a mentor (someone you can ask for advice).....</i> 1 (25%)
<i>Nothing, it is up to me</i> ..... 0 (0%)	<i>Having a YOT worker or social worker that I get on with</i> ..... 2 (50%)
<i>Making new friends outside</i> ..... 1 (25%)	<i>Having children</i> ..... 0 (0%)
<i>Going back to live with my family..</i> 2 (50%)	<i>Having something to do that isn't crime</i> ..... 2 (50%)
<i>Getting a place of my own</i> ..... 1 (25%)	<i>This sentence</i> ..... 0 (0%)
<i>Getting a job</i> ..... 2 (50%)	<i>Getting into school/college ...</i> 2 (50%)
<i>Having a partner (girlfriend or boyfriend)</i> ..... 1 (25%)	<i>Talking about my offending behaviour with staff</i> ..... 0 (0%)
<i>Staying off alcohol/drugs</i> ..... 1 (25%)	<i>Anything else</i> ..... 0 (0%)

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

**Not sentenced**..... 2 (40%)  
 Yes..... 3 (60%)  
 No ..... 0 (0%)  
 Don't know..... 0 (0%)

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

**Not sentenced**..... 2 (40%)  
 Yes..... 0 (0%)  
 No ..... 3 (60%)