

Report on an unannounced short follow-up inspection of

HMYOI Brinsford

(Juvenile)

30 November – 3 December 2009

by HM Chief Inspector of Prisons

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Introduction

This is the last report on the juvenile unit at Brinsford young offender institution. By the time of the inspection, it had been announced that young people would no longer be held there. Pressure on the over-18 estate, and falling numbers in the under-18 estate, had accelerated plans by the Youth Justice Board to move out of 'split sites', holding both under- and over-18 year olds.

Brinsford has been far from an ideal site for young people. The design and size of the units made it difficult to ensure safety, in spite of some noticeable improvements in culture and relationships between staff and young people. Nor are split sites ideal.

Nevertheless, there are some concerns about the precipitate decision to close the juvenile unit, which will mean that some young people are located further from home, and some will go to Werrington, an establishment that has not so far dealt with remanded prisoners, a more volatile and transient population.

It is welcome that the under-18 population in prisons has fallen considerably. It would be even more welcome if this provided an opportunity properly to plan for those young people who are in custody and to ensure that they are in smaller, more manageable units close to home.

Anne Owers
HM Chief Inspector of Prisons

February 2010

Fact page

Task of the establishment

Brinsford is a young offender institution and a remand centre for young people and young adult prisoners up to the age of 21 years. It is purpose built to hold young people either on remand or awaiting appearance at Magistrates or Crown Courts or who are convicted or sentenced. Brinsford forms part of the Prison Service's juvenile estate and holds those on remand and those sentenced under detention training orders (DTOs) and longer sentences.

Area organisation

West Midlands

Number held

93

Certified normal accommodation

545, of which 112 places are allocated for young people

Operational capacity

569, of which 112 places are allocated for young people

Last inspection

Juveniles only (young people) – July 2008

Juveniles and young adults – February 2007

Brief history

Brinsford opened as a young offender institution and remand centre in November 1991. It is situated on the same site as HMP Featherstone.

From April 2000, it changed its role to accommodate a mixed population, including those under the age of 18. All young people are housed in residential units separate from young adult prisoners.

In 2008, residential unit 5 was opened and accommodates sentenced young adults in cells with en-suite showers.

In 2009, the Rowan activities centre opened.

Description of residential units

Unit 1 – Young people, both on remand and sentenced

Unit 2 – Young adults aged 18-21 years

Unit 3 – Young adults aged 18-21 years

Unit 4 – Young adults aged 18-21 years

Unit 5 - Young adults aged 18-21 years. All cells have en-suite showers

Health services – 11 beds

Intervention and assessment unit –16 beds

Section 1: Healthy prison assessment

Introduction

- HP1 All inspection reports include a summary of an establishment's performance against the model of a healthy prison. The four criteria of a healthy prison are:
- | | |
|----------------------------|---|
| Safety | prisoners, even the most vulnerable, are held safely |
| Respect | prisoners are treated with respect for their human dignity |
| Purposeful activity | prisoners are able, and expected, to engage in activity that is likely to benefit them |
| Resettlement | prisoners are prepared for their release into the community and helped to reduce the likelihood of reoffending. |
- HP2 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.
- ...performing well against this healthy prison test.**
There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.
- ...performing reasonably well against this healthy prison test.**
There is evidence of adverse outcomes for prisoners in only a small number of areas. For the majority, there are no significant concerns.
- ...not performing sufficiently well against this healthy prison test.**
There is evidence that outcomes for prisoners are being adversely affected in many areas or particularly in those areas of greatest importance to the well being of prisoners. Problems/concerns, if left unattended, are likely to become areas of serious concern.
- ...performing poorly against this healthy prison test.**
There is evidence that the outcomes for prisoners are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for prisoners. Immediate remedial action is required.
- HP3 This Inspectorate conducts unannounced follow-up inspections to assess progress against recommendations made in the previous full inspection. Follow-up inspections are proportionate to risk. Short follow-up inspections are conducted where the previous full inspection and our intelligence systems suggest that there are comparatively fewer concerns. Sufficient inspector time is allocated to enable inspection of progress and, where necessary, to note additional areas of concern observed by inspectors. Inspectors draw up a brief healthy prison summary setting out the progress of the establishment in the areas inspected. From the evidence available they also concluded whether this progress confirmed or required

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

Safety

- HP4 At the previous inspection, we found that the establishment was not performing sufficiently well against this healthy prison test. We made three main recommendations. Two of the main recommendations had been achieved and one had been partially achieved. Of the remaining 61 recommendations, 21 had been achieved, 16 had been partially achieved and 24 had not been achieved.
- HP5 The establishment kept good records of transport concerns. Greater use was made of the video link. Young people were still travelling with adult prisoners and spending lengthy periods in court following their court appearances and some still arrived late. Young people were not being given the information at court produced by Brinsford.
- HP6 Efforts had been made to improve the reception area, including a new searching area, but all new arrivals continued to be strip-searched regardless of individual risk and despite the introduction of a BOSS (body orifice security scanner) chair. Young people gave different accounts of their treatment by staff in reception, varying from good to poor. There was still no peer support in reception, although some was available on the first night unit.
- HP7 Initial vulnerability assessments produced by first night staff were thorough. Useful written information had been produced for new arrivals, but there was still limited opportunity for them to associate with others which we recommended at the previous two inspections.
- HP8 Induction was delivered by a dedicated, enthusiastic group of staff. The programme had been redesigned, was shorter and covered all relevant areas.
- HP9 A vulnerability strategy had recently been published, but it was limited in scope. There was no care planning system for vulnerable young people other than the ACCT (assessment, care in custody and teamwork) process.
- HP10 A wide range of safeguarding data was collected and a series of meetings took place regularly to discuss all relevant safeguarding areas. However, attendance at the meetings by some departments was inconsistent and representation from residential units was generally poor, which limited discussion and follow-up action on any concerns identified. The weekly violence reduction meeting was very well managed. Child protection procedures remained sound and there continued to be good engagement with the local authority and better management of allegations against staff.
- HP11 Young people indicated that bullying remained a problem and staff supported this view. Residential staff had been briefed on the use of the new anti-bullying procedures and understood how to use them, which was an improvement. However, the system was not being implemented as intended. There were few interventions for bullies and no care planning for victims. Peer supporters were properly selected and were now appropriately supervised by the staff responsible for their work.

- HP12 Young people who were being monitored through the ACCT system said that staff paid good attention to them. However, care maps varied in quality and targets and actions often remained too general. Reviews were not always multidisciplinary, although attendance by healthcare was good.
- HP13 The gathering of intelligence from the wings had improved. Most adjudications now took place on the wings, but their use had increased. Young people located in the intervention and assessment unit (IAU) were treated well. They were now permitted to attend the gym, but not the chapel or mainstream education. Communication between the security and safeguarding departments had improved. Use of force was well monitored and young people were now properly debriefed. The special cell had not been used for over a year.
- HP14 Drugs were not a significant problem, but mandatory drug testing procedures still involved strip-searching without risk assessment. Detoxification was carried out safely when necessary, but there was delay for young people who arrived at the weekend.
- HP15 Overall, based on this follow-up inspection, we judged that the establishment was still not performing sufficiently well against this healthy prison test.

Respect

- HP16 At the previous inspection, we found that the establishment was performing reasonably well against this healthy prison test. We made two main recommendations which had not been achieved and 87 other recommendations, of which 28 had been achieved, 24 had been partially achieved and 35 had not been achieved.
- HP17 The gradual reduction in the number of young people had resulted in fewer young people held in the large residential units. However, they still held over 40 young people and, coupled with the poor design, staff still felt unable to unlock them all at the same time. The condition of cells varied considerably from good to poor. Allocations to double cells were sensitive to the needs of vulnerable young people who would benefit from sharing, as well as to risk. Staff made efforts to offer young people opportunities to shower during the day, but our survey results indicated that access to showers was still inadequate. Breakfast was now served on the morning it was eaten and meals were served on time. Young people continued to eat out on a rota basis and did not have the option of dining out at all meals.
- HP18 We observed a number of positive interactions between staff and young people. Young people said that most staff treated them well, although our survey results on some relationship indicators were poor. There was good representation of young people in consultation groups, which seemed to work well. Systems supporting the complaints procedure had improved.
- HP19 Contact with personal officers had improved, but they were still not routinely attending meetings such as training planning and ACCT reviews.
- HP20 Young people understood the rewards and sanctions scheme, but complained that it was hard to progress through the system. Although it was not clear from the records if young people were being told on a routine basis how they had lost or gained points each week, overall governance of the scheme had improved.

- HP21 Monitoring of racist incidents had improved, but diversity training for staff had ceased and significant aspects of the diversity action plan had not been implemented. Work with foreign nationals was underdeveloped.
- HP22 The chaplaincy team were better integrated, but were still not permitted to escort young people, which unnecessarily constrained their work.
- HP23 Initial health screening had improved and some improvements had been made to treatment rooms in healthcare. There was still no wing-based nursing and few nurse-led clinics. There had been no changes to escorting arrangements and young people still spent lengthy periods in the holding room. Lack of discipline staff cover continued to result in a poor regime for inpatients, some of whom did not have a clinical need. Disappointingly, there had been a reduction in primary mental health provision. As before, the healthcare department was not well integrated with other establishment services.
- HP24 Overall, based on this follow-up inspection, we judged that the establishment was still performing reasonably well against this healthy prison test.

Purposeful activity

- HP25 At the previous inspection, we found that the establishment was not performing sufficiently well against this healthy prison test. We made one main recommendation, which had been partially achieved, and a further 16 recommendations, of which six had been achieved, four had been partially achieved and six had not been achieved.
- HP26 Increased association time and more opportunities to dine out had mitigated the potential reduction in time out of cell following changes to the education contract. However, young people were still only able to access evening association every other day and few were likely to spend eight hours out of cell each day, which was the revised target agreed with the Youth Justice Board.
- HP27 Initial assessment of learning needs had improved and young people were allocated to their activity more quickly, but they were still repeating courses as we previously reported. Staff absences resulted in lack of continuity and cancelled classes. The curriculum was, however, enhanced through a range of external partners, such as dance and theatre groups. The fire cadets' course was particularly appreciated by young people.
- HP28 Young people had not been able to access vocational training in the Rowan Centre as we understood they were intended to. The curriculum for young people under school-leaving age still did not adequately meet their needs or prepare them for a possible return to mainstream education. Attendance and punctuality had improved, although some young people arrived unacceptably late to lessons. Learning support assistants and the Foundation Room provided very good support for young people with additional learning needs, including ESOL (English for speakers of other languages) provision. Access to the library had improved, despite limited evening access and no weekend access which we had recommended.
- HP29 Attendance at PE had improved. Good progress had been made in improving internal accreditation, but there was scope for more. Focus groups worked well to improve PE provision in line with young people's suggestions and requests. The quality of

showers in the gym had improved significantly. The use of release on temporary licence in PE was developing well.

HP30 Overall, based on this follow-up inspection, we judged that the establishment was still not performing sufficiently well against this healthy prison test.

Resettlement

HP31 At the previous inspection, we found that the establishment was performing reasonably well against this healthy prison test. We made one main recommendation which had been partially achieved and a further 28 recommendations, of which five had been achieved, three had been partially achieved and 19 had not been achieved. One was no longer applicable.

HP32 Little progress had been made in the area of resettlement, other than substance use services, and some aspects had deteriorated. Meetings of the resettlement policy committee had lapsed. Staffing in the psychology department had reduced and offending behaviour programmes were no longer being delivered. Interventions for young people convicted of sexual offences were still not available.

HP33 A pre-release course had not been developed as recommended and our survey indicated gaps in support relating to continuing health services, accommodation and finance. Contributions to training planning reviews by some departments remained inadequate. However, findings were significantly better in relation to help with a school or college placement on release and young people we spoke to were positive about the pre-release support they had received.

HP34 Our survey results indicated poor access to telephones, but we did not observe this during the inspection. There was no family liaison officer. The improvements to the visits hall that we had recommended had not been made and visitors complained about long-standing difficulties in booking visits. However, there was a comfortable visitors' centre and staff were helpful. Young people were still required to wear fluorescent bibs during their visits, which was unnecessary.

HP35 Overall, based on this follow-up inspection, we judged that the establishment was still performing reasonably well against this healthy prison test.

Section 2: Progress since the last report

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

Main recommendations (from the previous report)

- 2.1 **A comprehensive first night policy should be introduced with clear procedures to ensure that young people are, and feel, safe on their first night in custody. (HP40)**

Achieved. There was a first night policy which formed part of an overarching induction policy. This gave clear guidance to staff on what to look for when meeting new arrivals and how to prepare them for their first night in custody. In our survey, 79% of young people said that they felt safe on their first night at Brinsford.

- 2.2 **Residential units should hold no more than 40 young people. (HP41)**

Not achieved. There were two residential units, each with a capacity for 56 young people. At the time of the inspection, with numbers of young people decreasing, the units housed 44 and 48 young people.

- 2.3 **There should be a vulnerability strategy and a coordinated system of care planning setting out how to identify, assess and meet the needs of the most vulnerable young people. (HP42)**

Partially achieved. A vulnerability strategy had recently been published, but it was limited in scope. It set out principles and statements, but did not include procedures to identify, assess and produce a care plan for the most vulnerable young people. There was no care planning process for vulnerable young people other than the ACCT (assessment, care in custody and teamwork) process.

- 2.4 **All staff should be trained and supported in recognising and challenging bullying behaviour and in the use of the anti-bullying strategy. (HP43)**

Achieved. All staff had received an hour's training in the new Brinsford anti-bullying procedures and staff we spoke to understood how the system worked. Some staff had been trained to work with young people who had been placed on the highest level of monitoring who were located in the intervention and assessment unit (IAU). Not enough staff had been trained to implement the designated intervention with young people on a lower level of monitoring and the intervention was used sporadically (see also paragraph 2.49).

- 2.5 **A strategy should be developed to improve the integration of health services with other services and departments in the establishment. (HP44)**

Not achieved. There was no formal strategy and little evidence of the involvement of healthcare in wider establishment processes. The mental health in-reach team had developed positive working relationships and were better integrated with other services and departments in the establishment.

- 2.6 **There should be sufficient activity places to ensure that all young people are purposefully occupied throughout the majority of their day. (HP45)**

Partially achieved. There were sufficient activity places to ensure that all young people were allocated an activity for a minimum of three hours each day, which accorded with the recently revised education contract. Staff absences had created a lack of continuity in teaching and class cancellations were too high. There were periods during the day when young people spent time on the wings carrying out various domestic tasks when it could not be said that they were wholly purposefully occupied (see also paragraph 2.139).

- 2.7 **Staff who carry out direct work with young people and have a useful contribution to make should attend relevant training planning reviews or send a detailed report in advance. (HP46)**

Partially achieved. Attendance by staff from different disciplines and departments in the establishment had improved slightly, although written reports were rarely submitted.

Other recommendations

Arrival in custody

First days in custody

- 2.8 **Young people should not be transported with young adults. (1.8)**

Not achieved. The establishment had kept good records of transport arrangements. Records for the most recent six months showed that there had been six instances of young people travelling with young adults.

- 2.9 **Young people who have completed their court appearance should be transported to their destination within an acceptable and agreed timescale so that they arrive in good time to be properly settled on their first night in custody. (1.9)**

Partially achieved. The majority of young people arrived at Brinsford in good time to move to the induction throughcare and support unit (ITSU) and for their immediate needs to be dealt with before they were locked up for the night. The escort contract allowed the escort providers to wait 30 minutes after the final warrant had been received before leaving the court. Records showed that some young people had to wait a long time to get on to transport to the establishment. In August 2009, one young person had had to wait for more than six hours before leaving the court at 6pm, arriving at Brinsford at 6.45pm. In the previous month, two young people had waited 6.5 hours, leaving court at 5pm and arriving at the establishment at 6pm.

- 2.10 **Young people should receive information at court about what is going to happen to them. (1.10)**

Partially achieved. The establishment had provided an information leaflet to the courts they served to be given to young people. The leaflet described what young people could expect during their first few hours at Brinsford. Translated leaflets had been given to courts which provided the greatest number of receptions to Brinsford. However, in our survey, only 4% of young people said they had been given written information at court. The leaflet was available at the establishment in English and 10 other languages for young people who had not seen it.

- 2.11 **Escort vans should be clean, comfortable and free of graffiti. (1.11)**

Not achieved. Young people reported that the vans were often dirty and uncomfortable. In our survey, 35% of young people reported that the van was clean, which was significantly worse than the comparator of 47%. They also told us that they felt unsafe in seats without seat belts and that they had been provided with bags if they needed to urinate during the journey.

2.12 Greater use should be made of the video link. (1.12)

Achieved. The establishment was not able to separate use of the video link by young adults and young people, but 302 court appearances had been made using the link between May and October 2009. We saw warrants on wing files which showed that courts were specifying appearances by video link rather than requiring the young person to attend court.

Reception

2.13 The design and decoration of reception should be age appropriate. (1.38)

Partially achieved. The design and decoration of reception had not altered, although efforts had been made to use the space more effectively when a greater degree of privacy was required. Specifically, a new searching area had been introduced which gave young people improved privacy. Strip-searching, as well as use of the BOSS (body orifice security scanner) chair, was unnecessary.

2.14 All staff should introduce themselves to, and engage positively with, young people. (1.39)

Partially achieved. In our survey, 68% of young people said they were treated well/very well in reception and young people we spoke to gave varying accounts of their experience at reception from good to poor. It was not part of reception procedures for staff to introduce themselves to young people and few staff wore name badges.

2.15 New arrivals should be addressed by their preferred name. (1.40)

Achieved. Young people told us that reception staff did ask them what name they would prefer to be known by (see also paragraph 2.39).

2.16 Information for new arrivals should be provided in languages other than English and in media other than the printed word. (1.41)

Partially achieved. Written information about what would happen in the first few hours at Brinsford had been translated into 10 languages. Information was not available in any other media.

2.17 The cell-sharing risk assessment should be completed free from interruption and in private. (1.42)

Partially achieved. A discrete corner of reception was used for completing the risk assessment, but it could be noisy and there were no seats.

2.18 Reception staff should give young people specific information about what to expect after the reception procedures have been completed. (1.43)

Not achieved. Young people moved to the ITSU as soon as reception procedures were completed, but they were not given any information by reception staff about what would happen to them following completion of reception procedures.

2.19 The means to pass the time should be provided in reception holding rooms. (1.44)

Achieved. There were televisions and magazines in the holding rooms.

2.20 Young people should be offered a telephone call and a shower in reception. (1.45)

Partially achieved. We were told that young people could shower in reception, unless they were returning from court and going straight back to their wing. However, in our survey, only 33% of young people said they were offered a shower when they first arrived. There were no records in reception of which young people had been offered and/or had taken a shower. Good records were kept in the first night unit demonstrating that telephone calls had been offered, but records did not confirm that all new arrivals had been offered a shower.

2.21 Young people should be taken to the induction throughcare and support unit (ITSU) as soon as they have finished the reception procedure. (1.46)

Achieved. Transfers to the ITSU were timely following initial reception procedures and more time-consuming initial assessments, such as the first night vulnerability assessments (T1Vs), were completed by ITSU staff.

2.22 Peer support should be available to young people in reception. (1.47)

Not achieved. Some peer support was available on the ITSU, but not in reception.

2.23 Officers should wear name badges. (1.48)

Not achieved. Officers did not routinely wear name badges.

First night

2.24 The quality of vulnerability assessments should be improved to reflect fully the information received about the young person. (1.49)

Achieved. Completed T1Vs indicated good use of the information available and key concerns noted were flagged up for other staff. It was clear that staff on the first night unit had a good understanding of the assessment process and took pride in the quality of the T1Vs they produced. Wherever possible, they reviewed the young person's electronic asset records prior to their arrival on the ITSU by way of preparation for the vulnerability assessment interview.

2.25 Some out of cell activity should be provided on the induction throughcare and support unit, particularly for young people on their first night in custody. This should include time for young people to read information on display in the unit. (1.50)

Not achieved. There had been little improvement to the activities available to young people on the ITSU and there was limited opportunity for association on their first night. The introduction of first night peer supporters provided a useful additional source of information and advice for young people who arrived on the ITSU before 7pm. However, they needed more training and staff support to increase their confidence and ensure that the support and advice they offered to young people was appropriately supervised.

Induction

- 2.26 **All young people should receive well-planned induction information in a suitable environment the day after their arrival. (1.51)**

Achieved. Most young people moved to A1 wing within two days of arrival to undertake an induction programme which had been redesigned by some committed and enthusiastic staff. It was a three-day rolling programme which new arrivals could join without delay. The programme included a tour of the establishment so that young people could see where activities and services were located. Phase two of induction involved education and PE staff and took place away from the residential unit. The room in which induction took place was adequate, with comfortable seating, but not particularly age appropriate.

- 2.27 **Young people should be fully occupied by a structured and comprehensive induction programme. (1.52)**

Partially achieved. The shorter induction programme was more appropriate to the age group than the previous programme. Each day comprised 3.5 hours of induction activity with some free time in the afternoon which could be used for showers or telephone calls.

- 2.28 **The induction feedback and review forms should be evaluated and used to develop the programme as necessary. (1.53)**

Not achieved. We saw examples of completed feedback and review forms during the inspection, but they were not formally evaluated and it was not clear how they were used by managers to develop the programme.

Environment and relationships

Residential units

- 2.29 **Remanded young people should not share cells with sentenced young people. (2.14)**

Not achieved. Remanded and sentenced young people still shared cells. The units each had 12 shared cells and, at the time of the inspection, 30 young people were sharing a cell. Cell-share risk assessments were completed to a satisfactory standard and updated regularly. Efforts were made to allocate shared cells to young people with the potential to develop supportive relationships, for example foreign nationals who spoke the same language or vulnerable young people, who preferred to share a cell, were placed together.

- 2.30 **A copy of the Asset record, combining risk and planning information to date, should be included on wing files to keep wing staff fully informed. (2.15)**

Achieved. E-Asset, which contained all relevant information on young people, was available to all staff on residential units.

- 2.31 **A programme of regular deep cleaning should deal with ingrained dirt, graffiti or debris in cells. (2.16)**

Not achieved. The establishment had decided that it was not operationally viable to introduce a programme of regular deep cleaning. Young people said that they were given cleaning

equipment to use in their cells, but the state of cleanliness of cells varied considerably from good to poor.

2.32 Young people should be able to shower daily. (2.17)

Partially achieved. Each unit contained eight showers which were used early in the morning on a rota basis and staff said they ensured that a minimum of 24 young people on each unit showered at this time. Young people who did not shower on the units in the morning could do so if they had evening association or at other times of the day as permitted by staff. There were young people who could not be guaranteed access to a daily shower, for example those who returned or arrived late from court and those who were not on evening association. In our survey, only 42% of young people said they could normally shower every day, which was significantly worse than the comparator of 60%.

2.33 Ventilation in the shower areas should be improved. (2.18)

Not achieved. The shower areas remained poorly ventilated and in some areas paint was peeling off the walls because of the continual dampness. Young people reported that the temperature of the showers fluctuated and, if the water was hot on the first floor, it would be cold on the ground floor and vice versa.

2.34 Young people should be able to launder their clothing and bedding weekly. (2.19)

Partially achieved. Bedding and prison clothing were sent to the laundry each week and replaced with freshly laundered items. Young people who had their own clothes could use a washing machine on the unit, but, as there was only one machine, young people reported that they were not always able to get items washed weekly. Staff acknowledged the problems and advised that they were waiting for new machines to be plumbed in which would rectify the difficulties.

2.35 Young people sharing cells should have secure lockers. (2.20)

Not achieved. The majority of shared cells had lockers, but none was secure. We saw one shared cell with only one locker and one of the young people had no option but to put his personal belongings on a table.

2.36 Curtains should be standard issue. (2.21)

Achieved. Cells now had curtains as standard issue.

2.37 All young people should have an outdoor jacket. (2.22)

Not achieved. Outdoor jackets were available when young people had duties outside. However, during the inspection, we observed young people in the exercise yard without jackets in freezing temperatures.

Relationships between staff and young people

2.38 The names, photographs and role of young people's representatives should be displayed on notice boards alongside minutes of consultative meetings. (2.29)

Achieved. The names and photographs of young people's representatives were prominently displayed on unit notice boards. The monthly consultative meetings were well attended and the

minutes were clearly written and displayed next to the names and photographs of young people's representatives.

2.39 Young people's preferred names should be routinely used and recorded. (2.30)

Partially achieved. Young people reported that reception staff asked them for their preferred name when they arrived at the establishment. However, some wing files that we saw did not have a record of the preferred name and a number of cells did not have the names displayed outside cell doors. We observed staff talking respectfully to young people using their first names and it was clear that staff knew the names of the young people (see also paragraph 2.15).

2.40 Advocates who have been working with young people should be notified of their pending transfer to enable them to make arrangements, such as referral to advocates at the next establishment. (2.31)

Not achieved. Advocates reported that there had been a number of occasions when young people they had been working with had been transferred to another establishment without their knowledge.

Additional information

2.41 We observed a number of positive interactions between staff and young people. The majority of young people we spoke to said that staff generally treated them well and in our focus groups readily named staff who they thought were particularly helpful. However, in our survey, only 63% of young people said there was a member of staff they could turn to with a problem, which was significantly worse than the comparator of 74%. Fifty-eight per cent of young people said that most staff treated them with respect, which was significantly worse than the national comparator of 70% and the 2008 Brinsford survey result, which was 78%.

Personal officers

2.42 Personal officers should engage and make regular, legible entries in wing records in accordance with the establishment's policy. (2.35)

Achieved. Wing files contained regular entries by personal officers, with a minimum of one entry a week. The regularity and quality of the entries were monitored by senior officers who made frequent comments in wing files. The quality of personal officers' entries was variable. Some comments were restricted to whether the young person was managing on the unit. Others demonstrated that officers had clearly spent time with a young person and their entries reflected these conversations and gave a good picture of the young person's experience of custody.

Additional information

2.43 Young people were familiar with the personal officer scheme and our survey showed an improvement in contact during the young person's first week in custody. Fifty per cent of young people said they had met their personal officer in their first week, which was significantly better than the 2008 Brinsford survey result of 31%. However, only 52% of young people said they saw their personal officer once a week, which was significantly worse than the comparator of 67%. The majority of young people at Brinsford said that their personal officer had helped them.

- 2.44 Personal officers said that they did not routinely attend important meetings involving young people they were responsible for, such as training planning or ACCT, but there was a system of back-up officers, which ensured that someone from the unit was available to attend meetings when required.

Duty of care

Safeguarding

- 2.45 Regular reports should be submitted to the safeguarding committees covering each safeguarding area. They should set out an analysis of safeguarding areas and identify patterns and trends for consideration and action. (3.7)

Achieved. Coordinators responsible for safeguarding areas produced monthly committee reports, which included key data on patterns and trends. However, residential units consistently failed to provide operational reports to the committees and therefore discussion of the issues was limited. In October 2009, it had been agreed that patterns and trends would be analysed by a separate tasking and tactical coordination group to bring about necessary improvements.

- 2.46 Weekly safeguarding meetings should focus on the care of young people identified as particularly vulnerable or in need of individual care planning. (3.8)

Partially achieved. The needs of vulnerable young people were discussed at weekly meetings, including the safeguarding team meeting and the child protection meeting. However, records of the discussions which took place about individual young people were limited and not all young people who had been identified as vulnerable had an individual care plan.

- 2.47 Statistical information should be gathered on all relevant safeguarding areas in a standard format and used to provide trend analysis. This should include the use of force, all injuries sustained by young people, incidents of strip-searching and the use of separation and the special cell. All relevant departments should be represented at all safeguarding meetings. (3.9)

Not achieved. Each month a day was set aside for a series of separate safeguarding meetings. Meetings were held for child protection, suicide and self-harm prevention and different aspects of violence reduction. Each meeting was separately chaired, worked to a separate agenda and produced its own set of minutes. Attendance at the different meetings was inconsistent, particularly suicide and self-harm prevention meetings, and representation from residential units was particularly poor. Inconsistent attendance had been raised as a concern by staff who attended the meetings regularly. There was no standard format for the collection of statistics relevant to safeguarding areas and all reports differed. The head of safeguarding told us that the development of consistently formatted reports across all areas was work in progress.

Bullying and violence reduction

- 2.48 Bullying data should be expanded to include information on the ethnic and faith background of victims and perpetrators, as well as recording bullying incidents related to debt. The anti-bullying strategy should then address these issues. (3.20)

Not achieved. The bullying database had been set up two months before the inspection, but it only included the ethnicity of young people and made no reference to faith or incidents relating to debt. No data were collected on the type of behaviour that constituted bullying.

- 2.49 Target-setting for young people on the anti-bullying strategy should relate to the individual's behaviour and take place at the commencement of the procedure. Meaningful activities and interventions should be identified and recorded clearly and the young person's progress against the targets should form part of the review. (3.21)**

Not achieved. Targets were not set when bullying procedures were initiated. Although the behaviour that constituted bullying was described by the member of staff, there was no record of their discussion with the young person or targets and interventions which might help them improve their behaviour and they were simply told that they would be observed. Targets were set for young people who continued on the Brinsford anti-bullying procedures after the first review, but many were formulaic and in some instances only included an instruction to stop bullying. Anti-bullying procedures focused on regular observations by staff rather than targeted interventions designed to prevent further bullying behaviour. Young people who repeatedly bullied others were placed in the IAU and some one-to-one work was carried out (see also paragraph 2.4).

- 2.50 Anti-bullying monitoring records should include evidence of what behaviour has been observed. (3.22)**

Achieved. When bullying monitoring records were opened, the initiating officers described the behaviour that had been observed.

- 2.51 The violence reduction strategy should be reviewed and practice brought in line with the strategy. (3.23)**

Achieved. The violence reduction strategy had been reviewed and re-issued in June 2009. The new Brinsford anti-bullying procedures had been implemented in line with this review.

- 2.52 Internal bullying surveys should take place annually and the results analysed to inform policy and practice. (3.24)**

Not achieved. A bullying survey had been carried out in 2009, but the findings had not been analysed to inform revision of the policy and related practice.

- 2.53 All unexplained injuries should be investigated as potential bullying incidents and this should be monitored by the Brinsford reducing aggression and violence efficiently strategy committee. (3.25)**

Achieved. Unexplained injuries were recorded by healthcare staff and information sent to residential units for residential staff to investigate whether it was a bullying incident. Completed investigations were reported to a weekly incident review meeting and also the monthly safeguarding meeting for discussion and ratification.

- 2.54 Victims of bullying should be supported through clear individual care plans. Managers should monitor the implementation of the plans and ensure consistently good quality. (3.26)**

Not achieved. There were no care plans for the victims of bullying.

- 2.55 The selection process for, and training of, peer supporters should be reviewed and overseen by a senior member of the Brinsford reducing aggression and violence efficiently strategy committee. Formal supervision of peer mentors should be introduced. (3.27)

Achieved. Peer supporters were nominated by residential staff and managers and their suitability assessed by the two coordinators responsible for the management and supervision of the scheme. One of the coordinators attended violence reduction and safeguarding meetings. Peer supporters received formal training, met regularly with responsible staff and received good supervision on the units.

- 2.56 Identified bullies or victims should be referred for interventions that match their individual needs. (3.28)

Partially achieved. All young people who were identified as bullies and became subject to the procedures under the Brinsford anti-social behaviour strategy were placed on a standard compact outlining what behaviour was expected of them. Young people on the first tier of the anti-bullying strategy (green zone) were monitored for a minimum of two weeks and a maximum of four weeks. A review took place with wing staff after one week. Standard compacts for young people on the second and third tiers (amber and red zones) advised young people of how their services and regime activities would be restricted. Although the compact for those on the second and third tiers stated that 'programmes designed to modify your behaviour' were available, these were only sporadically used with young people on amber and were only delivered to those in the red zone who were usually re-located to the IAU. Victims were not assessed for interventions to address their specific needs.

Additional information

- 2.57 Young people in our focus groups said that bullying was a significant problem at Brinsford and this was confirmed in our survey, which indicated that one third of young people had been victimised by other young people. Seventeen per cent of these young people said that they had suffered physical abuse, which was significantly higher than the comparator of 10%.
- 2.58 Staff had a good understanding of how young people bullied each other. They told us that debt for cigarettes was a common concern and staff were vigilant about checking cells for property that did not belong to the occupants. In our survey, 9% of young people said they had had their canteen or property taken, which was significantly worse than the comparator of 4%. Two of the three young people on the Brinsford anti-bullying scheme were on the first stage because property not belonging to them had been found in their cell.

Self-harm and suicide

- 2.59 The head of safeguarding should lead on actions arising from death in custody reports and monitor their completion. This should include a joint approach between the primary care trust and the governor to deliver the actions identified. (3.38)

Not achieved. The establishment action plan recorded that a suitable system would be put in place for dealing with actions arising from death in custody and this would be led by the head of safeguarding. Actions identified would be managed and jointly monitored with the heads of healthcare and diversity through the monthly healthcare governance meeting between the establishment and the Primary Care Trust (PCT), but this had not been established at the time of the inspection. There had been no deaths in custody on the young people's side of the

prison. The deputy governor was the designated officer to lead on action planning following deaths in custody. In the two most recent plans involving the death in custody of two young adults, there had been no involvement with the PCT.

2.60 Care maps should include targets for activity for the young person. (3.39)

Partially achieved. Care maps varied in quality. Some gave details of activities to help the young person, for example to gain in confidence by attending education and gym regularly; others were too general with no details of activities to help keep the young person safely occupied. One care map said that the young person's goal was to transfer from the establishment when he reached the age of 18 years, implying that nothing could be done to help him while he was still on the under-18 unit.

2.61 Targets set should name the person accountable and the actions should be time bound. The subsequent review should assess whether targets have been met and set new and relevant targets. (3.40)

Not achieved. Targets did not always name the person accountable and some were allocated to 'all staff'. Targets were rarely time bound. Notes of review meetings did not indicate a discussion of the targets and, while some care maps showed that a target had been achieved, further targets to reduce risk were not set.

2.62 Reviews should be multidisciplinary and the healthcare team should be regular contributors. (3.41)

Partially achieved. There was good attendance by the healthcare team, but attendance by other departments such as psychology and chaplaincy was sporadic. Education staff rarely attended ACCT reviews. Case managers were reasonably consistent in chairing reviews, but there was no indication that attendance at reviews was planned to ensure that staff with a relevant contribution to make were invited to attend or make a written contribution. Young people we spoke to who were being monitored through the ACCT process said that they were well cared for.

2.63 Individual assessments and care planning should replace routine use of ACCT documents for individuals with no evident self-harming issues. (3.42)

Not achieved. The ACCT process was the only method the establishment used to assess young people. There was no other care planning process to support young people who were considered particularly vulnerable, but did not have any evident self-harm issues.

Child protection

2.64 There should be a procedure to consider whether allegations against staff that do not proceed as a child protection concern warrant an internal investigation. The decision should be made in conjunction with the local authority designated officer. (3.50)

Achieved. Child protection procedures remained sound and there continued to be good engagement with the local authority. All allegations against staff were reviewed by the local authority designated officer (LADO). If it was decided not to instigate formal child protection procedures, internal investigations were carried out and the results reported to the LADO.

Race equality

- 2.65 The training plan to widen diversity training, including race equality training, for most staff should be implemented as quickly as possible. (3.61)

Partially achieved. A broad-based diversity training programme had been put in place in May 2009, but diversity training had been put on hold in September 2009 to give priority to P-NOMIS training. Two-thirds of the staff group still needed diversity training.

- 2.66 Logging of racist incident report forms should allow easy identification of those relating to young people, and should include intelligence gathering and analysis of repeat incidents and those involved. (3.62)

Achieved. An electronic log had been introduced, which separated incidents involving young people under 18 and young adults. A database had recently been set up using information about the nature of racist allegations. This included a facility to identify repeat incidents and this was starting to allow the diversity team to identify relevant patterns and trends.

- 2.67 The race equality officer should collaborate with other departments, including the anti-bullying coordinator, to improve intelligence and develop appropriate interventions for perpetrators or victims. (3.63)

Partially achieved. The race equality officer (REO) and the anti-bullying coordinator attended the monthly safeguarding meetings, at which race-related incidents were discussed. There were no appropriate interventions for race-related incidents, although on one occasion a restorative justice meeting had been used.

- 2.68 Collaboration with independent community groups should be strengthened to include independent monitoring of a proportion of racist incident report forms and attendance at relevant meetings. (3.64)

Achieved. A scrutiny group had been set up comprising the establishment-based social worker, a member of the Independent Monitoring Board and a representative from a local children's after-care organisation. This group met bimonthly and examined all race-related complaints with the REO.

- 2.69 A diversity policy and action plan should be developed and implemented as a matter of urgency. (3.65)

Partially achieved. A diversity policy and action plan had been produced. Both these documents were reviewed and monitored at the bi-monthly race equality action team meetings, but significant aspects of the action plan had not been implemented.

Foreign nationals

- 2.70 Designated staff working with foreign nationals should receive appropriate training, following which the policy should be updated. (3.73)

Partially achieved. The foreign national coordinator had received specialist training, but allocated wing officers received only a limited briefing on how to use the foreign national

information pack. A short policy statement had been produced. We were told that the foreign national policy had also been updated, but we did not see this.

- 2.71 The role and function of the monthly foreign national committee meetings should be established and clear terms of reference agreed. Coordinators should always attend and young people should always be represented. (3.74)**

Not achieved. The foreign national committee met bi-monthly. Staff attendance was generally poor and young people did not attend. The role and function of the committee in relation to young people remained unclear.

- 2.72 Further sources of translated material should be identified, including within the Prison Service and UK Border Agency, and following needs assessment the establishment should translate essential local information. (3.75)**

Partially achieved. Software had been obtained to produce relevant translated material as required. In practice, the available information was of limited value and restricted to general documents which had been translated in the principal foreign languages. UK Border Agency surgeries had reduced from monthly to quarterly.

- 2.73 Foreign nationals should be able to attend regular peer support groups with relevant staff. (3.76)**

Not achieved. There were no peer support groups for foreign national young people. Some informal contact took place between young adults and young people under 18 if staff thought this would be beneficial, but this tended to be to resolve a language difficulty rather than to provide regular and ongoing support. Some foreign national young people experienced a high level of informal support by being located together.

- 2.74 Resources for foreign nationals should include access to independent specialist legal advice. (3.77)**

Partially achieved. A list of local solicitors who specialised in working with foreign national clients had been compiled for young people, but there were no other resources.

- 2.75 A professional interpreting service should be used when necessary to ensure that young people have understood essential information on arrival, when completing assessments and during any planning meetings concerning their care. All staff should receive guidance on when to use a professional interpreting service. (3.78)**

Achieved. Good use was made of the Big Word interpreting service. Records showed that this service had been used extensively to assist in the reception and induction of a young person from Vietnam, who had difficulty communicating in English. Staff working in reception, first night and induction had been briefed on how to use the translation service.

- 2.76 Personal officers should check that young people with limited understanding of English understand rules and are able to get entitlements. (3.79)**

Not achieved. There was no evidence that personal officers or other staff were checking to ensure that young people with a limited understanding of English had sufficient understanding of rules and entitlements. Day-to-day responsibility for foreign national young people had been delegated to some wing staff, but these arrangements were ad hoc and we were unable to

identify anyone carrying out this role. The basic entitlements of foreign national young people to letters and telephone calls continued to be adequately met.

Contact with the outside world

2.77 Young people should have daily access to wing telephones and be able to make calls in private. (3.94)

Achieved. In our survey, 39% of young people said that they were able to use the telephone every day, which was significantly worse than the comparator of 54%. This seemed to relate more to having the funds to make telephone calls, especially to mobile numbers, rather than to access. We saw young people using wing telephones throughout the day during the week of the inspection. Young people did not indicate that this was unusual and we did not receive any complaints about access to telephones. Telephones had privacy hoods and, although their location on the residential units meant that the surrounding area could be noisy at times, access throughout the day was good and the hoods afforded a reasonable level of privacy.

2.78 Personal officers should liaise with parents/guardians and significant others to encourage young people to maintain contact. (3.95)

Not achieved. There was no evidence that personal officers were liaising with parents/guardians and significant others.

2.79 Young people should be allowed to exchange unused visiting orders for extra telephone credit or letters. (3.96)

Not achieved. There was no facility for young people to exchange unused visiting orders for extra telephone credit or letters.

2.80 Evening visits and family days should be provided. (3.97)

Not achieved. Special visiting days for young people to spend time with their own children were held each quarter, but none had actually applied to attend. There were no family days to facilitate contact between young people and their parents, siblings or extended family and no evening visits.

2.81 Siblings and partners under the age of 18 should be permitted to visit unaccompanied unless a risk assessment indicates this is inappropriate. (3.98)

Not achieved. The establishment had rejected this recommendation on the basis that it was against Prison Service instructions.

2.82 Access to the visits booking line should be improved and visitors should be able to book their next visit before the current visit ends. (3.99)

Not achieved. Visitors told us that they often had to phone several times before being able to book a visit. The establishment had introduced an evening booking line, which had alleviated the problem, but had been told that they did not qualify for a second booking facility under benchmarking requirements and it had been withdrawn.

2.83 There should be a designated family liaison officer to ensure that children and young people are encouraged and enabled to maintain contact with their family and friends. (3.100)

Not achieved. There was no family liaison officer. A group of staff had volunteered to work regularly on visits and managers felt that one of these staff would be best placed to take on the liaison officer role, but work had not started to develop this. In our survey, 56% of young people said it was easy for their families to visit them, which was significantly better than the comparator of 43%. Several young people told us that they were worried that, when they were moved to another young people's establishment further from home, it would be far harder for their families and friends to visit them.

2.84 Visits should start at the advertised time. (3.101)

Partially achieved. On the day that we observed visits, they started on time, but visitors told us that this was not always the case. Prior to their visit, visitors could wait in a comfortable, well-equipped visitors' centre with a snack bar. Visitors' centre staff sent groups of visitors across to be admitted to the visits hall to reduce the amount of time they had to wait outside.

2.85 Children under the age of 18 should not be considered as adults for visiting purposes. (3.102)

Not achieved. Children were regarded as adults for the purpose of using a seat during visits. The fixed seating precluded more than three visitors at a time unless there was a small child who could sit on another visitor's lap.

2.86 Visitors should know that closed visits will not be based solely on a drug dog indication. (3.103)

Not achieved. Any visitor receiving an indication by a passive drug dog was in the first instance asked if they would consent to a strip-search. If they refused, they were given the choice of a closed visit or not continuing with the visit. Visitors who were indicated twice by the dog were sent a warning letter and, after three indications, they were banned from visiting for a fixed period of time.

2.87 Closed visit facilities should allow visits to be made in private. (3.104)

Not achieved. The closed visits facility required young people to sit on one side of a clear screen and their visitors on the other. The arrangement of the furniture meant that two young people might have to sit next to each other, with their visitors sitting equally close to each other on the other side of the screen. The fixed seating for visitors, with one stool further away from the screen, made private conversation difficult. The condition of the closed visits facility was generally poor.

2.88 The seating in the visits room should be improved to provide privacy for young people and their visitors and to allow easy contact between them. (3.105)

Not achieved. There were three fixed seats on one side of the table, with a chair for the young person on the other side. Some tables had padded seats and there were some lower tables. The play areas for children in the visitors' centre and the visits hall had been closed.

2.89 Young people should not have to wear a bib in the visits room. (3.106)

Not achieved. Young people were still required to wear fluorescent bibs during visits. Male visitors had their hands stamped before going into the visits hall and this extra level of security was not warranted.

Applications and complaints

- 2.90 Information about applications and complaints should be published in a range of languages. (3.119)**

Achieved. There was a folder on each unit containing information about complaints in a range of languages. For those who could not understand English, information about applications was made available by staff using a translation facility on the wings. In our survey, 46% of foreign national young people said that they found it easy to make an application and 33% said that it was easy to make a complaint, which was significantly worse than the comparators for British nationals of 78% and 71% respectively.

- 2.91 A recording system that provides an audit trail of the progress of applications should be developed to ensure they are answered in a timely way. This system should be subject to quality assurance. (3.120)**

Partially achieved. All applications were recorded in the applications book on the unit with details of who was dealing with the application. However, the records did not indicate when applications had been dealt with and so did not provide a complete audit trail. Unit staff did not routinely check applications to ensure that they had been dealt with. In our survey, 42% of young people felt their applications had been dealt with promptly and 51% thought they had been sorted out fairly, which was significantly worse than the respective comparators of 62% and 71%. The system was subject to monthly quality assurance checks by the diversity team.

- 2.92 The complaints coordinator should receive child protection training. (3.121)**

Not achieved. Despite her willingness to attend child protection training, the complaints coordinator had not been offered child protection training.

- 2.93 Analysis of complaints should be routinely monitored by the senior management team and patterns and trends appropriately acted on. (3.122)**

Achieved. The systems supporting the complaints procedures had improved. Monthly statistics on complaints were produced across the establishment. The data showed that all complaints were answered by their target date. The quality assurance system was led by the head of diversity, who sampled between 10 and 15% of complaints each month. Replies to complaints that we sampled were mostly of a good standard. Patterns and trends were considered by the governor, who alerted heads of functions if action was needed.

- 2.94 Minutes of the young people's consultative meeting should be published to all young people and should make clear what action has been taken to address identified issues, and action plans produced if required. (3.123)**

Achieved. Minutes of the young people's monthly consultative meetings were displayed on unit notice boards. The minutes reflected issues that had been raised with young people, actions that had been taken to address the issues and the name of the responsible member of staff.

Health services

- 2.95 The noise levels in the healthcare department should be addressed urgently to prevent noise transmission between the inpatient and the outpatient areas through the gated doors. (4.45)

Not achieved. No action had been taken to prevent noise transmission between the inpatient and outpatient areas and the problem remained.

- 2.96 The healthcare waiting rooms should be completely refurbished to the standard equivalent to that in the community (4.46)

Not achieved. The healthcare waiting rooms remained in poor condition with no toilet facility and no material changes since the previous inspection.

- 2.97 The treatment room in healthcare should be immediately altered to ensure that patients receiving medication do not enter the room. (4.47)

Achieved. The original treatment room had been divided into two rooms. The smaller treatment room was only used for the administration of controlled drugs and there was no access for other staff at these times. However, the room had a stable-type door which was unsafe for drug administration.

- 2.98 The treatment room on the young people's unit should be completely refurbished so that it can be used to its full potential, including wing-based nursing. (4.48)

Partially achieved. The treatment room on Unit 1 had been refurbished. Nurses visited the unit three times a day to administer medication. We were told that a full wing-based nursing service had not been implemented due to staffing capacity.

- 2.99 There should be a dedicated treatment room in healthcare for nurse triaging, dressings and treatments, with a notice on the door indicating when the room is in use to allow the patient a degree of confidentiality and privacy. (4.49)

Achieved. There was a dedicated treatment room which enabled confidential treatment and consultation with nurses.

- 2.100 There should be at least one cell in healthcare and on the residential wing adapted for young people with disabilities. (4.50)

Not achieved. None of the cells in healthcare had been adapted, although they all had wide doors which enabled wheelchair access. There was a specially adapted shower cubicle. There had been no adaptations to the cells on the residential units.

- 2.101 Reception screening should include information about ethnicity and any disabilities. (4.51)

Achieved. All young people were asked about their ethnicity and disabilities, but it was not clear how this information was communicated to unit staff and other areas of the establishment.

- 2.102 **A professional interpreting service should be used to complete any medical questionnaires or consultations and other young people should not be used to interpret clinical interviews. (4.52)**

Achieved. Nurses were aware of the Big Word interpretation service which was used regularly. We were told that, if necessary, professional interpreters were used for face-to-face consultations.

- 2.103 **A secondary health screen should be completed for all young people regardless of their status. (4.53)**

Achieved. All young people had a secondary health screen within 24 hours of their reception screen.

- 2.104 **The application (care pathway) procedure should be confidential. The young people should put their applications into a locked healthcare box that is opened daily by the wing nurse. (4.54)**

Not achieved. The care pathway applications were still received by wing officers or nurses or pushed under treatment room doors. We were told that locked boxes were on order for the units and that 'medical in confidence' envelopes would be used in the interim.

- 2.105 **There should be dedicated discipline staff attached to the healthcare unit to ensure that young people are on time for their appointments and are taken back without delay and to supervise the healthcare area. (4.55)**

Not achieved. There had been no change to the escorting arrangements since the previous inspection. Patients were escorted to healthcare and back to the residential units by wing staff detailed each day for general escort duties and we were told by healthcare staff that young people were frequently late arriving for their appointments and had to wait for quite long periods to return to the units. These waits meant young people were bored and often noisy (see also paragraph 2.118).

- 2.106 **Nurses should be given protected time to run clinics. (4.56)**

Not achieved. There was only one nurse-led clinic for blood-borne viruses which was sometimes cancelled due to staff resources.

- 2.107 **The range of nurse-led clinics should be extended to include age-relevant specialties such as epilepsy, asthma and acne. (4.57)**

Not achieved.

- 2.108 **There should be nurses specialising in the care of young people with disabilities. (4.58)**

Not achieved. The inpatients and mental health manager was a registered learning disability nurse, but none of the other nurses was trained to care for young people with a disability. No nurses had been trained in the care of children and adolescents, but we observed positive interaction between staff and young people.

- 2.109 **Information about healthcare and health promotion should be available in a range of relevant languages. (4.59)**

Not achieved. All healthcare and health promotion information was only available in English, although we were told that information in other languages could be obtained if there was a need.

2.110 An IT system should be introduced for health services. (4.60)

Achieved. The SystmOne electronic clinical records system had been implemented.

2.111 The optician should provide regular sessions so that all young people on the waiting list have the opportunity to be seen before they are released. (4.61)

Achieved. A new optician service had been introduced and the optician attended the establishment every six weeks.

2.112 Bags used to transport medication should be secure and kept locked while not in use. (4.62)

Not achieved. Two soft bags were used to transport medication and only one was lockable. We were told that nurses taking medication to the units only used the external walkways, where young people were accompanied by officers.

2.113 Supplies of non-prescription remedies such as paracetamol should be recorded for all patients and there should be an auditable record particularly for those patients who do not have a current prescription and administration record chart. (4.63)

Achieved. All prescribed medications and those administered via the special sick policy or patient group directions were recorded appropriately on prescription charts, which were easily auditable.

2.114 The responsible pharmacist should have professional control of the stock supplied. Agreed levels of stock should be adhered to and stock levels kept to a minimum. (4.64)

Partially achieved. Agreed stock levels were in place and were reviewed. Although stock supplied out of hours was recorded on the HR013 prescription and administration charts, there was no evidence that the supplies were audited by the pharmacist or pharmacy technician.

2.115 The pharmacist should be supported to develop pharmacy-led clinics and medicine use reviews for the population. (4.65)

Not achieved.

2.116 A dental hygienist or therapist should be employed. (4.66)

Not achieved. A dental nurse had provided some one-to-one oral health promotion and had facilitated some groups, but a dental hygienist or therapist had not been employed.

2.117 Admission to healthcare should be solely on clinical need and the decision to admit made only by the clinical team. (4.67)

Not achieved. There were no written criteria in place. We were told by healthcare staff that there was occasionally pressure to admit young people with no clinical need, but that establishment staff always accepted a final decision by healthcare staff. During the inspection, we came across young people in the inpatient unit who were there for non-clinical reasons.

2.118 The inpatients unit should be supported by a dedicated discipline officer during the full core day. (4.68)

Not achieved. There was dedicated discipline officer time to cover inpatients and outpatients for 3.5 hours a day, but the provision was insufficient to provide an adequate regime for all inpatients which included young people and young adults who were kept apart. Unlock time for young people who were inpatients was poor in comparison with their peers on the residential units and there was limited structured activity, apart from individual sessions with the education tutor. There were also limited exercise sessions and access to fresh air. We were told that, if discipline officer support was requested outside that time, it was provided. However, we saw young people who had been locked up for long periods, with nursing staff having to make decisions about whether to unlock them without the assistance of discipline staff (see also paragraph 2.105).

2.119 Primary mental health should include provision for young people who have been victims of sexual and physical abuse. (4.69)

Not achieved. We were told that there was recognition by the primary mental health team of the needs of young people with a history of sexual or physical abuse and a registered mental health nurse on the inpatient unit had been appropriately trained. However, the team had decided that it was not viable to offer any therapeutic intervention, due to the capacity of the primary mental health team and the short time some young people were at the establishment. Neither was any consideration given to planning with outside agencies to meet the recognised needs of these young people on release.

2.120 There should be more primary mental health provision so that all young people referred are seen as they arrive. (4.70)

Not achieved. There had been a reduction in primary mental health provision and there was a waiting list of two weeks at the time of our inspection. We were told that this was a temporary situation due to staffing issues. In our survey, 68% of young people reported that they did not get any help with emotional or mental health problems, which was significantly worse than the comparator of 38%.

2.121 Mental health awareness training should be provided for discipline and other staff such as education and gym. (4.71)

Not achieved. We were told that 13 members of staff, including one from ITSU, had completed mental health awareness training and further training had been commissioned from Shropshire and South Staffordshire Mental Health Trust. Staff told us that the mental health in-reach team did ad hoc work with some groups and individual young people. No nurses had been trained in the care of children and adolescents, but we observed positive interaction between staff and young people.

2.122 Healthcare staff should consistently attend safeguarding and other relevant meetings. (4.72)

Not achieved. Healthcare staff did not consistently attend safeguarding and other meetings. The mental health in-reach team regularly attended wider establishment meetings and ACCT reviews.

2.123 Timed appointments should be introduced to reduce waiting times at clinics. (4.73)

Not achieved. Patients were given individual primary care appointments, but were brought to healthcare in groups and had to wait until the whole group had been seen to return to the unit. Some young people waited long periods in locked waiting rooms with nothing to do. In our survey, responses to all questions about access to the full range of healthcare staff were significantly worse than the comparators and only 35% of young people said that they thought the quality of healthcare was good or very good, which was significantly worse than the comparator of 61%.

Activities

Learning and skills and work activities

- 2.124 **There should be enough appropriately qualified staff to identify young people with learning disabilities to ensure that their individual needs are met. (5.14)**

Achieved. An initial assessment of levels of literacy and numeracy was carried out appropriately soon after young people arrived and additional learning needs were identified. The recently appointed special educational needs coordinator (SENCO) had developed a special educational needs register containing valuable information, which was passed to teachers to help them develop appropriate strategies for teaching and learning. Learning support assistants (LSAs) had carried out innovative work in adapting written materials to improve young people's understanding of the content of lessons and the requirements of practical tasks.

- 2.125 **All young people should be allocated without delay to courses that meet their assessed needs. (5.15)**

Partially achieved. Most young people were allocated to education courses within a reasonable period of arrival. This had been achieved partly as a result of the reduced 15-hour curriculum now available to young people and partly because young people did not have to wait until a module had finished to join courses. However, the curriculum was too narrow and the timetable too inflexible to meet the needs of all young people. Several young people told us that they had repeated courses and one young person had taken the same art course three times. The same lessons were timetabled each day and some lessons were too long for this age group. The curriculum was enhanced by a range of external partners, such as dance and theatre groups. The fire cadets' programme was particularly effective in helping young people to develop team-working skills and they enjoyed the physical and intellectual challenges provided by the programme.

- 2.126 **Accredited work-based learning should be introduced as part of the development of the Rowan Centre. (5.16)**

Not achieved. Young people had not been able to use this excellent facility, despite the plans outlined at the previous inspection, apart from a short plastering course for a very small number of young people. There were still too few opportunities for accredited work in the establishment.

- 2.127 **There should be adequate provision to meet the needs of young people under school-leaving age. (5.17)**

Not achieved. The curriculum for young people under school-leaving age did not meet their needs or prepare them for a possible return to mainstream education. With the exception of

literacy, numeracy and information and communication technology, there was insufficient provision of national curriculum foundation subjects. The range of vocational subjects was also too narrow.

2.128 Better use should be made of individual learning plans to plan and support learning. (5.18)

Not achieved. Individual learning plans (ILPs) were not used effectively to plan and support young people's learning. They did not provide an overview of educational need, targets or records of progress. We examined 10 ILPs which were not individually tailored and had generic targets, for example, 'adhere to learning agreements'. Literacy and numeracy levels were noted, but no targets were set and no evidence of progress was recorded. One ILP identified the future career goals of a young person as bricklaying, but the vocational choices were art, cooking and woodwork. Most files did not contain information gathered by Connexions, which was held separately.

2.129 Attendance at education should be improved. (5.19)

Achieved. The establishment had been close to the target attendance of 90% for the previous year. The monitoring of attendance had improved since the previous inspection. Reasons for unauthorised non-attendance were usually followed up promptly. Any young people who refused to attend education were visited by the SENCO to identify the reason. Young people requiring additional support benefitted from the excellent provision offered in the Foundation Room, which included support for literacy, numeracy and a wide range of ESOL (English for speakers of other languages) provision. Vulnerable young people also used the Foundation Room for support with the main education programme. Young people with behavioural difficulties were catered for well and there was a good success rate in supporting young people to return to education. Young people's behaviour in lessons was satisfactory and relationships with teachers and LSAs were good. Young people were generally focused on their work. It was unclear how many young people were returned to wings for poor behaviour.

2.130 Young people should be taken to their lessons and collected at times that ensure lessons start and finish in accordance with the published timetable. (5.20)

Partially achieved. Punctuality had improved since the previous inspection, but there was still some slippage and a small number of young people occasionally arrived at lessons unacceptably late.

2.131 Access to the library should be improved and should include access in the evenings and at weekends. (5.21)

Partially achieved. Access to the library had improved significantly, but there was no access to the library at weekends and limited evening access. Visits by young people and the lending of library books had increased more than three-fold since September 2009, when a dedicated officer had been appointed to escort young people to and from the library. Magazines were now available, but daily newspapers were not.

Physical education and health promotion

2.132 Opportunities for accreditation in PE courses should be increased. (5.29)

Achieved. There was a balanced and well-structured PE programme. Although the focus of provision was on recreation and enjoyment rather than formal accreditation, progress had

been made in improving opportunities for accreditation. Young people achieved internal accreditation in a range of sports and health-related activities, as well as general qualifications, for example manual handling and first aid. The use of release on temporary licence for PE activities was developing well.

2.133 Young people should be consulted about why so many refuse to attend PE and the results used to resolve problems and improve attendance. (5.30)

Achieved. Attendance at PE had improved significantly and, in our survey, 17% of young people said that they were able to go to the gym more than five times each week, which was significantly better than the comparator of 8%. PE was no longer part of the core curriculum since the reduction in teaching hours and the establishment's own monitoring indicated that only 70% of young people attended PE. PE-specific focus groups allowed young people to voice their concerns and to make suggestions for improvement. Feedback on the outcomes of these groups was provided to young people. PE staff also attended residential wing forums to elicit young people's views. There was a good focus generally on inclusion within the PE department. This was demonstrated by a 'special olympics' event held in August 2009 and a disability awareness week held in September 2009.

2.134 Showers in the gym should be placed in cubicles and properly supervised by staff. (5.31)

Achieved. The quality and quantity of the showers in the main sports hall had improved significantly since the previous inspection. They were placed in individual cubicles and supervision was much easier for staff. Young people were also able to use the new changing facilities in the Rowan Centre to change and shower.

Faith and religious activity

2.135 Members of the chaplaincy team should receive appropriate training about the establishment to enable them properly to fulfil their role. (5.39)

Achieved. All new members of the chaplaincy team received a standard induction. Working relationships between the chaplaincy and establishment staff were good and they understood each other's role.

2.136 Members of the chaplaincy team should be allowed to escort young people to and from the chaplaincy. (5.40)

Not achieved. Chaplains were still not permitted to escort young people and this resulted in constraints in the work which they needed to carry out, particularly crisis work and other non-faith-based activities.

2.137 The chaplaincy team should be better integrated into the wider work of the prison and enabled to develop constructive interventions with young people and attend important planning meetings relating to their care. (5.41)

Partially achieved. Members of the team whom we spoke to believed that they were well integrated into the work of the prison. They referred to the coordinating chaplain's close link with the senior management team and spoke positively about the attendance of a prison manager at their chaplaincy team meeting. Young people we spoke to said that the chaplains were friendly and helpful, but there were no chaplaincy-led activities in addition to faith services and chaplains still seldom attended meetings relating to the care of individual young

people or ACCT reviews. However, in our survey, 60% of young people said that they had access to a chaplain or religious leader within their first 24 hours, which was significantly better than the comparator of 44%, and 62% of young people said that their religious beliefs were respected, which was significantly better than the comparator of 47%.

2.138 Soundproofing in the multi-faith room should be improved. (5.42)

Achieved. The previous problems of excessive noise had been resolved.

Time out of cell

2.139 Young people should be out of their cell for at least 10 hours every day. (5.54)

Not achieved. We estimated that most young people were out of their cell for between eight and nine hours each day. The changes to the delivery of education provision following recent changes to the contract had been mitigated by increased time on association and the introduction of daily exercise and dining out. The reduced target of eight hours unlock which had been agreed with the Youth Justice Board was being met (see also paragraph 2.6).

2.140 Association and exercise should be cancelled only in exceptional circumstances and a full explanation given to young people. (5.55)

Achieved. Association usually took place as scheduled.

2.141 All young people should have at least one hour of association and one hour in the open air every day. (5.56)

Not achieved. The majority of young people had association on alternate days. Exercise was scheduled every day, but only lasted for about 30 minutes. In our survey, 17% of young people said that they had association every day, which was significantly worse than the comparator of 57%.

2.142 Association rooms should be appropriately decorated and contain undamaged association equipment. (5.57)

Partially achieved. Some of the association areas remained dirty and untidy. Most of the recreational equipment was serviceable.

2.143 Association and exercise should be properly supervised by staff. (5.58)

Partially achieved. We saw some evidence of staff engaging with young people during association and exercise, but on other occasions young people were not closely supervised and were left too much to their own devices.

2.144 All young people should have warm weatherproof clothing and shoes to go out in all weather conditions. (5.59)

Not achieved. We were told that some outdoor clothing was available, but this was not always used and we observed young people taking exercise wearing T-shirts without a jacket in very cold weather.

Good order

Security and rules

- 2.145 Residential managers should ensure that security information reports are submitted in relation to entries in the wing observation book where appropriate and particularly in relation to bullying incidents. (6.9)

Achieved. The gathering of intelligence-related information from the wings had improved with the introduction of a new database. This information was discussed at weekly incident report meetings and analysed at a more strategic monthly forum to ensure that the information was used effectively.

- 2.146 The searching policy should be reviewed. Young people should not be routinely strip-searched and such searches should be carried out only on the authorisation of the duty governor following a rigorous risk assessment. (6.10)

Not achieved. Routine strip-searching was not always carried out on visits and before cell searches, but young people continued to be routinely strip-searched on admission and discharge.

- 2.147 Information and displays on the rules should be presented in a more user-friendly format. (6.11)

Partially achieved. Information about the rules on general display had not been adapted to make it more age appropriate. However, more accessible information on rules had been produced for young people entering the IAU.

Discipline

- 2.148 The adjudication standardisation meeting should monitor information related to adjudication hearings and awards to inform tariff reviews and to identify and address any emerging patterns or issues. (6.34)

Partially achieved. The standardisation meeting was used to inform tariffs, but most of the punishments issued were at the higher end of the scale. The individual cases examined were not scrutinised in sufficient detail. Limited monitoring and analysis were carried out and there was no identification of patterns or trends. Three hundred and eighty-six adjudications had taken place over the previous six-month period, which was an increase of approximately 60 adjudications over an equivalent period at the previous inspection.

- 2.149 Adjudication hearings on young people should be conducted in a more age-appropriate setting. (6.35)

Achieved. Most adjudication hearings took place on the wing in one of the managers' offices with less formality than traditional adjudication settings. The room used for adjudications in the IAU had been modified and provided a relatively informal environment.

- 2.150 All young people subject to adjudication should be seen before the hearing to ascertain whether they are fit to defend themselves. (6.36)

Not achieved. Governors used their judgement and discretion at the beginning of the adjudication to determine if young people were fit to defend themselves. No pre-check was carried out.

- 2.151 **Young people should always be given the opportunity to ask questions of the reporting officer and this should be recorded in adjudication documentation. (6.37)**

Achieved. Records of adjudications showed that young people were involved in discussions throughout the adjudication process.

- 2.152 **Further evaluation of the restorative justice scheme should be conducted to assess its success in reducing incidents of violence. (6.38)**

Not achieved. Staff and young people understood the concept and practice of restorative justice and staff considered it to be a useful process which was frequently used to resolve conflicts. However, no proper analysis had been carried out to determine the impact of restorative justice on levels of violence.

Use of force

- 2.153 **All use of force documentation should be appropriately certified by a staff member who did not authorise the use of force. (6.39)**

Not achieved. We found a further instance of inappropriate certification in a small sample carried out during the inspection. The manager responsible accepted that the practice still took place and took immediate steps to remedy the procedure.

- 2.154 **There should be a time-out facility for young people who temporarily lose self control and present a risk of harm to themselves or others. (6.40)**

Not achieved. There was a time-out facility in education, but no such facility on the wings.

- 2.155 **The use of the special cell should be monitored by the safeguarding committee. (6.41)**

Achieved. There was a procedure in place for the safeguarding committee to monitor use of the special cell, but no young people had been placed in the special cell over the previous 12-month period.

- 2.156 **Staff should thoroughly record all interactions with young people in the special cell. (6.42)**

No longer applicable.

- 2.157 **The use of force and safeguarding committees should clearly state what follow-up action is taken in response to identified trends in the use of force. (6.43)**

Achieved. Representatives of the security and safeguarding departments met weekly to discuss individual cases. This information was fed into discussions at a monthly forum where patterns and trends were examined and necessary action agreed.

- 2.158 **All planned interventions should be video recorded. (6.44)**

Not achieved. Some, but not all, of the planned interventions had been video recorded.

- 2.159 Young people should be thoroughly debriefed and given an opportunity to talk about a use of force incident with an appropriate member of staff as soon as possible afterwards. Records of this should be retained. (6.45)

Achieved. Young people who had been subject to the use of force were seen by a member of the residential staff. Forms had been introduced to record this information.

Separation

- 2.160 Records of the use of the intervention and assessment unit, including the number of young people located there, the reasons and the length of stay, should be collated, monitored and analysed by the senior management team. (6.46)

Not achieved. Detailed individual records were kept of all the circumstances of a young person's stay in the IAU, but this information was not collated and analysed to enable good management oversight and the identification of patterns or trends.

- 2.161 The role and function of the intervention and assessment unit should be clarified. It should not be used as a location for vulnerable young people. (6.47)

Achieved. Staff working in the unit that we spoke to were quite clear about the function of the IAU. Young people admitted to the unit were given a document explaining the role and function of the unit. We found no evidence that young people had been located there because they were vulnerable.

- 2.162 The register of strip-searches should include all new admissions to the unit and evidence as to why a strip-search was authorised. (6.48)

Achieved. A register had been maintained since November 2008 of all strip-searches in the IAU. The register showed that strip-searches had been carried out three times since April 2009 because the young people were thought to be carrying a weapon or contraband.

- 2.163 Young people located in the intervention and assessment unit should be visited daily by their personal officer or wing staff and these visits should be recorded in their unit file. (6.49)

Not achieved. Visits by wing staff were infrequent and irregular.

- 2.164 All young people located in the intervention and assessment unit should have individual care plans. (6.50)

Partially achieved. Staff were required to draw up a care plan for all young people located in the IAU. There was only one young person under the age of 18 resident in the IAU at the time of the inspection. His plan lacked detail and there was no evidence that it was based on an assessment of his individual needs. The plan placed too much emphasis on what the young person was required to do for himself, with little detail about staff input and support services. In our survey, 79% of young people said that they were treated well in the IAU, which was significantly better than the comparator of 38%.

- 2.165 Young people should usually be able to attend normal education classes and church services unless a thorough risk assessment has deemed this inappropriate. (6.51)

Not achieved. Teachers and chaplains visited the IAU each day to offer young people support, but young people were not permitted to attend classes or the chapel.

2.166 Young people located in the intervention and assessment unit should have access to gym facilities. (6.52)

Achieved. Young people were given the opportunity to attend the gym once a week for a session allocated to the IAU.

Rewards and sanctions

2.167 Published notices about the rewards and sanctions scheme should be available in a range of languages. (6.61)

Not achieved. The only notices about the rewards and sanctions scheme that were displayed on wings were in English.

2.168 Young people should routinely be told by their personal officer or wing staff how they have gained or lost points each week. (6.62)

Not achieved. There was no evidence on wing files that personal officers were routinely discussing the gain or loss of points each week with all young people. The recent introduction of bilateral meetings between personal officers and young people provided the potential for more meaningful conversations about behaviour in general and the application of the rewards and sanctions scheme in particular.

2.169 The draft behaviour management policy should be published and its effectiveness monitored by the senior management team. (6.63)

Partially achieved. The behaviour management policy had recently been agreed, but it was too soon to monitor its effectiveness.

2.170 Entries in a young person's points sheet should be signed. (6.64)

Achieved. All entries in young people's weekly points sheets that we examined had been initialled by the member of staff who had made the entry.

2.171 A quality assurance system should be introduced to ensure that rewards and sanctions documentation is fully completed in accordance with the published policy. (6.65)

Achieved. Wing senior officers checked individual documentation as part of their consideration of incentive and earned privilege scheme levels. One senior officer we spoke to said that he did not support recommendations for demotion if it was not clearly demonstrated in the appropriate documentation. If more points had been deducted than the scheme allowed, this was rectified. Wing managers checked the records for consistency and quality. The appeals process enabled young people to make representations if they thought that anything had been overlooked in the decision-making process.

2.172 Managers should ensure that there is a transparent system to afford equal access to privileges available to young people on level one. (6.66)

Not achieved. It was not clear how young people were allocated to the four enhanced cells available to young people on the highest level (level one) or whether there was a process to

determine the waiting list for these cells. We received complaints from young people during the inspection that not all young people on level one were given equal opportunity to come out of their cells for additional cleaning or to work in the servery.

Additional information

- 2.173 Young people appeared to have a good understanding of the rewards and sanctions scheme and told us that they were motivated to progress from level two to level one. Many valued the additional opportunity to be out of their cells working on the wing. However, they complained that it was difficult to get to level one if officers did not allow them out of their cells to undertake additional wing work. Their perception was that young people on level one were given priority so that they could retain their status. In our survey, 42% of young people said they felt they had been treated fairly in their experience of the scheme, which was significantly worse than the comparator of 56%. The biggest deterrent to being on the lowest level (level three) appeared to be having to wear prison-issue shoes. Young people who were demoted were encouraged to use the appeals procedure and, while we did not see many successful appeals, it did allow them to put forward information they thought was relevant to the decision and to discuss how the decision had been reached.

Services

Catering

- 2.174 **Meal choices should be planned in consultation with a nutritionist. (7.7)**

Achieved. Advice had been sought from the nutritionist based at Featherstone, who had commented on all the menus and made suggestions to improve the nutritional value of the food. Portions of fruit and salad had increased and young people we spoke to during meal times said that fruit was available each day. The establishment had conducted a food survey in May 2009. When asked about the provision of healthy options, 27% said that they were not happy, 61% said they were happy and 12% said they were very happy.

- 2.175 **Breakfast should be served on the morning it is eaten. (7.8)**

Achieved. Breakfast was now served in the mornings.

- 2.176 **Lunch should be served no earlier than noon and the evening meal not before 5pm. (7.9)**

Achieved. Lunch and evening meals were now served at the appropriate times.

- 2.177 **Non-halal meat should be available. (7.10)**

Achieved. The head of catering confirmed that non-halal meat was readily available. Menus clearly indicated non-halal options.

- 2.178 **Staff supervising the serving of meals should ensure that this is done effectively and fairly. (7.11)**

Achieved. Meals we observed were well supervised by staff. Young people formed an orderly queue and were given the meals they had ordered. The poor supervision of meals had been

raised in the establishment's food survey and catering staff regularly observed the serving of food at meal times to ensure fairness of distribution.

2.179 Young people should be able to eat out for every meal. (7.12)

Not achieved. Young people were only able to eat every other meal out of their cell. The dining room had space for one unit at a time and the two units used it alternately.

Canteen/shop

2.180 The shop list should be expanded, taking into account healthy food options and the needs of black and minority ethnic young people. (7.18)

Achieved. The shop list had been expanded and now contained over 300 items. Fruit and vegetables were available and there were more foods of substance. Young people we spoke to, including black and minority ethnic young people, said that the shop list was adequate and contained a good choice of items.

2.181 New arrivals should be able to buy items from the shop within a day of arrival. (7.19)

Not achieved. New arrivals still had to wait before they could order items from the shop and some young people said that it took nearly two weeks from reception to items arriving, which had implications for bullying (see also paragraph 2.58). Young people could buy a £5 grocery pack when they first arrived, but some complained to us that it was not what they wanted and was a waste of money.

Resettlement

Resettlement strategy

2.182 Young people convicted of a sexual offence and who have been assessed as requiring treatment should have their treatment needs met without delay. (8.11)

Not achieved. Young people convicted of a sexual offence were assessed to determine the level of risk which they presented, but their personal treatment needs were not addressed.

2.183 A pre-release course should be developed based on assessed need. (8.12)

Not achieved. There was no pre-release course.

Additional information

2.184 There was a reasonably comprehensive resettlement policy, but the resettlement committee no longer met, making it difficult to maintain overall strategic management. Officers working with the increasing number of young people held on remand appeared to lack the confidence to manage the unfamiliar additional work they were expected to carry out.

2.185 Staffing in the psychology department had reduced and there were no longer any offending behaviour programmes. The quality of planning documentation remained mixed. Some of our survey findings relating to preparation for release, particularly in relation to support with accommodation and finance, were significantly worse than the comparators. In our survey,

46% of young people said that there were still problems that they thought they would need help with when they were released. However, young people spoke positively in our discussion group about the support they had received in preparing them for release. Connexions provided a service three days a week, which complemented the information, advice and guidance service and the SENCO. In our survey, 80% of young people said that they were going to school or college on release which was significantly better than the comparator of 54%.

Training planning and remand management

- 2.186 **The training planning and initial planning procedures should be combined to produce an integrated planning arrangement. (8.23)**

Not achieved. The arrangements which separated initial planning and designated training planning procedures remained unchanged and continued to create a lack of coordination and unnecessary duplication.

- 2.187 **Efforts should be made to increase attendance of family members at planning reviews. (8.24)**

Not achieved. No steps had been taken to increase attendance by family members.

- 2.188 **Targets set at planning reviews should address individual assessed need. (8.25)**

Partially achieved. Some targets addressed individual need effectively, but others were too general.

- 2.189 **Planning reviews should be conducted in private. (8.26)**

Partially achieved. Some planning reviews took place in closed rooms in the legal visits area or the chapel, but others were conducted in the open visits area, where there was a lack of privacy.

- 2.190 **Young people who do not have a GP should be given help to register with one before release. (8.27)**

Not achieved. In our survey, 15% of young people said that they had received help with continuing health services in preparation for their release, which was considerably worse than the comparator of 30%. Healthcare staff did not see young people routinely before their transfer or release and were not routinely invited to discharge planning meetings or notified of transfers or releases. We were told that a discharge checklist was being developed. Young people who required medication were given their daily dose or medication to take home, as appropriate. Young people who needed it were given their daily methadone dose or equivalent and a referral to their local drugs service or GP, as appropriate.

Substance use

- 2.191 **The establishment should implement the substance misuse training programme for operational staff. (8.44)**

Achieved. Following a training needs analysis, a drug awareness package had been developed which was delivered jointly each month by the CARAT team (counselling,

assessment, referral, advice and throughcare) and the young people's substance misuse service (YPSMS). The YPSMS also contributed to the induction of newly appointed staff.

2.192 Health services should improve first night treatment of young people dependent on alcohol. (8.45)

Not achieved. Young people requiring clinical treatment for alcohol dependency received first night symptom relief, but the detoxification regime did not start until young people had been fully assessed by the substance misuse nurse on the following weekday. During the previous year, five young people had undertaken alcohol detoxification. While this had been carried out safely, there was room for improvement.

2.193 Clinical substance misuse services should be extended to provide weekend cover and increased input on the residential wings. (8.46)

Not achieved. The team consisted of an acting band 6 nurse and two part-time healthcare assistants. A band 5 post was vacant. Funding for an additional interim nurse post was available under the integrated drug treatment system. Two GPs provided weekday cover. Primary health nurses and an out-of-hours GP service covered weekends.

2.194 GPs should undertake training in the management of substance misuse. (8.47)

Achieved. One GP had completed part 1, and another parts 1 and 2 of the Royal College of General Practitioners training in the management of substance misuse.

2.195 Specialist clinical advice should be available to doctors treating substance dependent children and young people. (8.48)

Achieved. GPs could consult a local specialist in cases of complex need and the national clinical adviser was also available. Demand was low and only three young people had required treatment for opiate dependency during the previous year. Treatment regimes were flexible and based on individual need.

2.196 The establishment should ensure that young people are supervised while waiting to be seen in the out-patient department. (8.49)

No longer applicable. Young people requiring treatment for alcohol/drug dependency were accompanied to the out-patient department by a wing officer and seen immediately.

2.197 Escorting arrangements to and from the YPSMS unit should be improved. (8.50)

Achieved. All YPSMS staff had received security and radio training and were permitted to escort young people.

2.198 The adult oriented procedures of mandatory drug testing (MDT) are not appropriate for children and young people and should not be applied. (8.51)

Not achieved. MDT was conducted by intervention and assessment unit officers and the procedure involved strip-searching all young people without prior risk assessments. During the previous six months, no young person had tested positive.

Additional information

- 2.199 The YPSMS team consisted of a team manager, three civilian officers and an officer. They continued to be a well-performing unit providing a good range of interventions to young people. All young people received substance misuse awareness information during their induction and could also attend both a smoking and a steroid workshop, which YPSMS staff ran jointly with PE instructors. Recent initiatives included improved links with families. The team was actively engaging with 71 young people and they were beginning to engage in the preparation of individual transfer plans where applicable.

Appendix I: Inspection team

Fay Deadman	Team leader
Angela Johnson	Inspector
Ian Macfadyen	Inspector
Ian Thomson	Inspector
Martyn Rhowbotham	Ofsted inspector
Nicola Rabjohns	Healthcare inspector
Sigrid Engelen	Substance use inspector

Appendix II: Population profile (young people)

Population breakdown by:

(i) Status	Number of juveniles	%
Sentenced	54	58
Convicted but unsentenced	4	4
Remand	15	16
Detainees (single power status)	20	22
Detainees (dual power status)		
Total	93	100

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

Sentence	4 mths	6 mths	8 mths	10 mths	12 mths	18 mths	24 mths	Total
Age								
15 years	3	0	1	1	2	1	0	8
16 years	1	1	3	0	3	3	0	11
17 years	4	5	2	2	5	3	2	23
18 years	4	2	0	0	2	2	1	11
Total	12	8	6	3	12	9	3	53

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

Sentence	Under 2 yrs	2-3 yrs	3-4 yrs	4-5 yrs	5 yrs +	Total
Age						
15 years						
16 years						
17 years		2	6	1	2	11
18 years					1	1
Total		2	6	1	3	

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

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

(iv) Number OF INDETERMINATE SENTENCES by age

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

(v) LENGTH OF STAY for UNSENTENCED by age

Length of stay	<1 mth	1-3 mths	3-6 mths	6-12 mths	1-2 yrs	2 yrs +	Total
Age							
15 years	1						1
16 years	1	1	1	1			4
17 years	5	5	5	2			17
18 years		1					1
Total	7	7	6	3			23

(vii) Main offence	Number of juveniles	%
Violence against the person	20	22
Sexual offences	2	2
Burglary	10	11
Robbery	45	47
Theft & handling	5	5
Fraud and forgery	0	0
Drugs offences	3	4
Driving offences	8	9
Other offences		
Breach of community part of DTO		
Civil offences	/	
Offence not recorded/ Holding warrant	/	
Total	93	100

(viii) Age	Number of juveniles	%
15 years	12	13
16 years	18	19
17 years	53	57
18 years	10	11
Total	93	

(ix) Home address	Number of juveniles	%
Within 50 miles of the prison	67	72
Between 50 and 100 miles of the prison	16	17
Over 100 miles from the prison	2	2
Overseas	0	0
NFA	8	9
Total	93	

NOTE – 65 of Brinsford juveniles live in The West Midlands and most of these are from Birmingham.

(x) Nationality	Number of juveniles	%
British	84	90
Foreign nationals	9	10
Total	93	100

(xi) Ethnicity	Number of juveniles	%
<i>White</i>		
British	42	46%
Irish	1	1%
Other White	0	
<i>Mixed</i>		
White and Black Caribbean	12	13%
White and Black African	2	2%
White and Asian	2	2%
Other Mixed	0	
<i>Asian or Asian British</i>		
Indian	4	4%
Pakistani	10	11%
Bangladeshi	1	1%
Other Asian	2	2%
<i>Black or Black British</i>		
Caribbean	11	12%
African	2	2%
Other Black	1	1%
<i>Chinese or other ethnic group</i>		
Chinese	2	2%
Other ethnic group	1	1%
Total	93	

(xii) Religion	Number of juveniles	%
Baptist	1	1
Church of England	10	11
Roman Catholic	10	11
Other Christian denominations	16	17
Muslim	19	21
Sikh	1	1
Hindu	0	0
Buddhist	2	2
Jewish	0	0
Other	1	1
No religion	33	35
Total	93	100

Appendix III: Summary of questionnaires and interviews

Survey methodology

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

Choosing the sample size

At the time of the survey on 19th October 2009, the population of young people at HMYOI Brinsford was 101. Questionnaires were offered to 82 young people.

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

Interviews were carried out with any respondents with literacy difficulties. In total two respondents were interviewed.

Methodology

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

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

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

Respondents were not asked to put their names on their questionnaire, although their responses could be identified back to them in line with child protection requirements.

Response rates

In total, 72 respondents completed and returned their questionnaires. This represented 71% of children and young people in the establishment at the time. The response rate from the sample was 88%.

Five respondents refused to complete a questionnaire, one questionnaire was not returned and four were returned blank.

Comparisons

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

Presented alongside the results from this survey are the comparator figures for all children and young people surveyed in young offender institutions. This comparator is based on all responses from surveys carried out in all 15 male establishments since 2008.

An additional document shows; significant differences between the responses of young people from black and minority ethnic backgrounds, and young people from white backgrounds; significant differences between foreign nationals and British nationals; and significant differences between young Muslims and non-Muslims.

Also included are statistically significant differences between the responses of young people surveyed at HMYOI Brinsford in 2008 and the responses of this 2009 survey. It should be noted that, in order for statistical comparisons to be made between the most recent survey data and that of the previous survey, both sets of data have been coded in the same way. This may result in percentages from previous surveys looking higher or lower as some of our survey questions have changed. However, both percentages are true of the populations they were taken from, and the statistical significance is correct.

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

Summary

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

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

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

Section One: About you

Q1	How old are you?	
	15.....	15%
	16.....	19%
	17.....	56%
	18.....	10%
Q2	Are you a British citizen?	
	Yes.....	86%
	No.....	14%
Q3	Is English your first language?	
	Yes.....	79%
	No.....	21%
Q4	What is your ethnic origin?	
	<i>White - British</i>	34%
	<i>White - Irish</i>	4%
	<i>White - other</i>	3%
	<i>Black or black British - Caribbean</i>	7%
	<i>Black or black British - African</i>	4%
	<i>Black or black British - other</i>	0%
	<i>Asian or Asian British - Indian</i>	3%
	<i>Asian or Asian British - Pakistani</i>	15%
	<i>Asian or Asian British - Bangladeshi</i>	1%
	<i>Asian or Asian British - other</i>	4%
	<i>Mixed race - white and black Caribbean</i>	14%
	<i>Mixed race - white and black African</i>	0%
	<i>Mixed race - white and Asian</i>	3%
	<i>Mixed race - other</i>	6%
	<i>Chinese</i>	0%
	<i>Other ethnic group</i>	1%
Q5	Do you consider yourself to be Gypsy/Romany/Traveller?	
	Yes.....	6%
	No.....	94%
Q6	What is your religion?	
	<i>None</i>	27%
	<i>Church of England</i>	10%
	<i>Catholic</i>	23%
	<i>Protestant</i>	0%
	<i>Other Christian denomination</i>	10%
	<i>Buddhist</i>	1%
	<i>Hindu</i>	0%
	<i>Jewish</i>	0%
	<i>Muslim</i>	27%
	<i>Sikh</i>	3%

Q7	Do you have any children?	
	Yes.....	14%
	No.....	86%

Section Two: About your sentence

Q1 **What wing or houseblock are you currently living on?**
See front cover sheet

Q2	Are you sentenced?	
	Yes.....	67%
	No - unsentenced/on remand.....	33%

Q3	What is the length of your sentence?	
	<i>Not sentenced</i>	32%
	<i>Four months</i>	10%
	<i>Six months</i>	6%
	<i>Eight months</i>	7%
	<i>12 months</i>	13%
	<i>18 months</i>	11%
	<i>Two years</i>	4%
	<i>Two to four years</i>	8%
	<i>Four years or more</i>	7%
	<i>Indeterminate sentence for public protection (ISSP/DPP)</i>	1%

Q4	Approximately, how long do you have left to serve? (If you are serving life, please use the date of your next parole board.)	
	<i>Not sentenced</i>	34%
	<i>Less than two months</i>	28%
	<i>Two to six months</i>	19%
	<i>Six months to one year</i>	6%
	<i>One year or more</i>	13%

Q5	How long have you been in this establishment?	
	<i>Less than one month</i>	26%
	<i>One to six months</i>	47%
	<i>Six to 12 months</i>	22%
	<i>One to two years</i>	4%
	<i>Two years or more</i>	0%

Q6	How many times have you been in a YOI, secure children's home or secure training centre before?	
	<i>None</i>	45%
	<i>Once</i>	25%
	<i>Two to five</i>	28%
	<i>More than five</i>	1%

Q7	Have you been to any other YOI during this sentence?	
	<i>None</i>	76%
	<i>One</i>	17%
	<i>Two</i>	1%
	<i>Three</i>	6%
	<i>More than three</i>	0%

Section Three: Courts, transfers and escorts

Q1	On your most recent journey, was the van clean?	
	<i>Yes</i>	34%
	<i>No</i>	50%
	<i>Don't remember</i>	14%
	<i>Not applicable</i>	1%
Q2	On your most recent journey, was the van comfortable?	
	<i>Yes</i>	10%
	<i>No</i>	90%
	<i>Don't remember</i>	0%
	<i>Not applicable</i>	0%
Q3	Did you feel safe on your most recent journey?	
	<i>Yes</i>	67%
	<i>No</i>	30%
	<i>Don't remember</i>	3%
Q4	On your most recent journey, were there any adults (over 18), or any young people of a different gender, travelling with you?	
	<i>Yes</i>	31%
	<i>No</i>	54%
	<i>Don't remember</i>	14%
Q5	On your most recent journey, how long did you spend in the van?	
	<i>Less than one hour</i>	46%
	<i>One to two hours</i>	37%
	<i>Two to four hours</i>	7%
	<i>More than four hours</i>	4%
	<i>Don't remember</i>	6%
Q6	On your most recent journey, were you offered a toilet break if you needed it?	
	<i>My journey was less than two hours</i>	84%
	<i>Yes</i>	3%
	<i>No</i>	7%
	<i>Don't remember</i>	6%
Q7	On your most recent journey, were you offered anything to eat or drink?	
	<i>My journey was less than two hours</i>	85%
	<i>Yes</i>	4%
	<i>No</i>	9%
	<i>Don't remember</i>	1%

Q8	On your most recent journey, how did you feel you were treated by the escort staff?	
	<i>Very well</i>	11%
	<i>Well</i>	52%
	<i>Neither</i>	25%
	<i>Badly</i>	7%
	<i>Very badly</i>	3%
	<i>Don't remember</i>	1%

Q9	When you left court or were transferred from another establishment, were you told that you would be coming to this establishment? (Please tick all that apply to you.)	
	<i>Yes, someone told me</i>	75%
	<i>Yes, I received written information</i>	4%
	<i>No, I was not told anything</i>	25%
	<i>Don't remember</i>	9%

Section Four: Your first few days here

Q1	How long were you in reception?	
	<i>Less than two hours</i>	78%
	<i>Two hours or longer</i>	7%
	<i>Don't remember</i>	14%

Q2	Were you seen by a member of healthcare staff in reception?	
	<i>Yes</i>	86%
	<i>No</i>	10%
	<i>Don't remember</i>	4%

Q3	When you were searched, was this carried out in an understanding way?	
	<i>Yes</i>	80%
	<i>No</i>	14%
	<i>Don't remember</i>	6%

Q4	Overall, how well did you feel you were treated in reception?	
	<i>Very well</i>	11%
	<i>Well</i>	56%
	<i>Neither</i>	24%
	<i>Badly</i>	1%
	<i>Very badly</i>	6%
	<i>Don't remember</i>	1%

Q5	When you first arrived here, did staff ask if you needed help or support with any of the following things? (Please tick all that apply to you.)	
	<i>Not being able to smoke</i>	52%
	<i>Loss of property</i>	17%
	<i>Housing problems</i>	19%
	<i>Needing protection from other young people</i>	25%
	<i>Letting family know where you are</i>	54%
	<i>Money worries</i>	14%
	<i>Feeling low/upset/needling someone to talk to</i>	51%
	<i>Health problems</i>	59%
	<i>Getting phone numbers</i>	40%
	Staff did not ask me about any of these	14%

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

<i>Not being able to smoke</i>	57%	<i>Money worries</i>	17%
<i>Loss of property</i>	7%	<i>Feeling low/upset/needing someone to talk to</i>	18%
<i>Housing problems</i>	7%	<i>Health problems</i>	10%
<i>Needing protection from other young people</i>	8%	<i>Getting phone numbers</i>	17%
<i>Letting family know where you are</i>	17%	<i>I did not have any problems</i>	27%

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

<i>A reception pack</i>	71%
<i>The opportunity to have a shower</i>	33%
<i>Something to eat</i>	82%
<i>A free phone call to friends/family</i>	61%
<i>Information about the PIN telephone system</i>	71%
<i>Information about feeling low/upset</i>	44%
<i>Don't remember</i>	9%
<i>I was not given any of these</i>	6%

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

<i>Chaplain or religious leader</i>	60%
<i>Someone from healthcare</i>	68%
<i>Peer support/peer mentor/Listener/Samaritans</i>	16%
<i>The prison shop/canteen</i>	17%
<i>Don't remember</i>	5%
<i>I did not have access to any of these</i>	10%

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

<i>Yes</i>	80%
<i>No</i>	16%
<i>Don't remember</i>	4%

Q10 How soon after your arrival did you go on an induction course?

<i>I have not been on an induction course</i>	20%
<i>Within the first week</i>	47%
<i>More than a week</i>	14%
<i>Don't remember</i>	19%

Q11 Did the induction course cover everything you needed to know about the establishment?

<i>I have not been on an induction course</i>	21%
<i>Yes</i>	48%
<i>No</i>	9%
<i>Don't remember</i>	22%

Section Five: Daily life and respect

Q1	Can you normally have a shower every day if you want to?			
	Yes			41%
	No			54%
	Don't know.....			4%
Q2	Is your cell call bell normally answered within five minutes?			
	Yes			34%
	No.....			51%
	Don't know.....			15%
Q3	What is the food like here?			
	Very good.....			0%
	Good			19%
	Neither			33%
	Bad.....			28%
	Very bad			20%
Q4	Does the shop/canteen sell a wide enough variety of products?			
	<i>I have not bought anything yet</i>			4%
	Yes			43%
	No.....			44%
	Don't know.....			9%
Q5	How easy is it for you to attend religious services?			
	<i>I don't want to attend religious services</i>			9%
	Very easy			31%
	Easy			27%
	Neither			13%
	Difficult.....			4%
	Very difficult			0%
	Don't know.....			15%
Q6	Please answer the following questions about religion:			
		Yes	No	<i>Don't know/not applicable</i>
	Do you feel your religious beliefs are respected?	62%	11%	27%
	Can you speak to a religious leader in private if you want to?	54%	11%	34%
Q7	Please answer the following about staff here:			
		Yes		No
	Is there a member of staff you feel you can turn to for help if you have a problem?	64%		36%
	Do most staff treat you with respect?	58%		42%

Section Six: Healthcare

Q1	What do you think of the overall quality of the healthcare?			
	<i>I have not been to healthcare</i>			24%
	<i>Very good</i>			6%
	<i>Good</i>			29%
	<i>Neither</i>			19%
	<i>Bad</i>			11%
	<i>Very bad</i>			11%
Q2	Is it easy to see the following people if you need to?			
		<i>Yes</i>	<i>No</i>	<i>Don't know</i>
	The doctor	30%	34%	36%
	The nurse	47%	27%	27%
	The dentist	10%	47%	43%
	The optician	10%	35%	55%
	The pharmacist....	7%	31%	62%
Q3	Have you had any problems getting your medication?			
	<i>I am not taking any medication</i>			67%
	<i>Yes</i>			25%
	<i>No</i>			8%
Q4	Please answer the following about alcohol:			
		<i>Yes</i>	<i>No</i>	
	Did you have problems with alcohol when you first arrived here?	12%	88%	
	Do you have problems with alcohol now?	2%	98%	
	Have you received any help with alcohol problems in this prison?	6%	94%	
Q5	Please answer the following about drugs:			
		<i>Yes</i>	<i>No</i>	
	Did you have problems with drugs when you first arrived here?	26%	74%	
	Do you have problems with drugs now?	10%	90%	
	Have you received any help with drugs problems in this prison?	23%	77%	
Q6	How easy is it to get illegal drugs here?			
	<i>Very easy</i>			14%
	<i>Easy</i>			6%
	<i>Neither</i>			3%
	<i>Difficult</i>			5%
	<i>Very difficult</i>			13%
	<i>Don't know</i>			59%
Q7	Do you feel you have any emotional or mental health problems?			
	<i>Yes</i>			27%
	<i>No</i>			73%

Q8	If you have emotional or mental health problems, are you being helped by any of the following people?	
	<i>I do not have any /I am not getting any help</i>	91%
	<i>Doctor</i>	2%
	<i>Nurse</i>	0%
	<i>Psychiatrist/psychologist</i>	3%
	<i>Counsellor</i>	0%
	<i>Other</i>	5%

Section Seven: Applications and complaints

Q1	Do you know how to make an application?	
	<i>Yes</i>	88%
	<i>No</i>	12%

Q2	Is it easy to make an application?	
	<i>Yes</i>	73%
	<i>No</i>	9%
	<i>Don't know</i>	18%

Q3	Please answer the following about applications:			
		<i>I have not made an application</i>	Yes	No
	Do you feel applications are sorted out fairly?	27%	37%	36%
	Do you feel applications are sorted out promptly? (Within seven days)	27%	30%	42%

Q4	Do you know how to make a complaint?	
	<i>Yes</i>	82%
	<i>No</i>	18%

Q5	Is it easy to make a complaint?	
	<i>Yes</i>	66%
	<i>No</i>	5%
	<i>Don't know</i>	29%

Q6	Please answer the following about complaints:			
		<i>I have not made a complaint</i>	Yes	No
	Do you feel complaints are sorted out fairly?	52%	11%	38%
	Do you feel complaints are sorted out promptly? (Within seven days)	52%	14%	34%
	Have you ever been encouraged to withdraw a complaint?	52%	11%	37%

Q7	Can you speak to the following people when you need to?	Yes	No	Don't know
		A peer mentor / peer support / listener	25%	22%
A member of the IMB (Independent Monitoring Board)	28%	17%	55%	
An advocate (an outside person to help you)	38%	11%	51%	

Section Eight: Rewards and sanctions, and discipline

Q1	What level of the rewards and sanctions scheme are you on?			
	<i>Don't know what the rewards and sanctions scheme is</i>			7%
	<i>Enhanced (top)</i>			18%
	<i>Standard (middle)</i>			66%
	<i>Basic (bottom)</i>			4%
	<i>Don't know</i>			4%
Q2	Do you feel you have been treated fairly in your experience of the rewards and sanctions scheme?			
	<i>Don't know what the rewards and sanctions scheme is</i>			8%
	Yes			42%
	No.....			38%
	<i>Don't know</i>			12%
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>			8%
	Yes			58%
	No.....			20%
	<i>Don't know</i>			14%
Q4	Have you had a 'nicking' (adjudication) since you have been in this establishment?			
	Yes			47%
	No.....			48%
	<i>Don't know</i>			5%
Q5	If you have had a 'nicking' (adjudication), was the process explained clearly to you?			
	<i>I have not had an adjudication</i>			51%
	Yes			41%
	No.....			8%
Q6	If you have been physically restrained (C and R), how many times has this happened since you have been in this establishment?			
	<i>I have not been restrained</i>			76%
	Once.....			14%
	Twice.....			8%
	Three times.....			0%
	<i>More than three times</i>			3%

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

<i>I have not been to the segregation unit</i>	79%
<i>Very well</i>	12%
<i>Well</i>	5%
<i>Neither</i>	0%
<i>Badly</i>	0%
<i>Very badly</i>	5%

Section Nine: Safety

Q1 Have you ever felt unsafe in this establishment?

Yes.....	31%
No.....	69%

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

<i>Never felt unsafe</i>	70%	<i>At meal times</i>	7%
<i>Everywhere</i>	12%	<i>At healthcare</i>	4%
<i>Segregation unit</i>	1%	<i>Visit's area</i>	6%
<i>Association areas</i>	10%	<i>In wing showers</i>	9%
<i>Reception area</i>	3%	<i>In gym showers</i>	9%
<i>At the gym</i>	12%	<i>In corridors/stairwells</i>	7%
<i>In an exercise yard</i>	7%	<i>On your landing/wing</i>	4%
<i>At work</i>	4%	<i>In your cell</i>	7%
<i>At education</i>	10%		

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

Yes.....	33%
No.....	67%

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

<i>Insulting remarks (about you, your family or friends)</i>	14%	<i>Because of drugs</i>	2%
<i>Physical abuse (being hit, kicked or assaulted)</i>	17%	<i>Having your canteen/property taken</i>	9%
<i>Sexual abuse</i>	2%	<i>Because you were new here</i>	9%
<i>Because of your race or ethnic origin</i>	5%	<i>Because you are from a different part of the country</i>	5%
<i>Because of your religious beliefs</i>	0%	<i>Because of gang related issues</i>	5%
<i>Because you have a disability</i>	2%	<i>Because of my offence / crime</i>	2%

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

Yes.....	23%
No.....	77%

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

<i>Insulting remarks (about you, your family or friends).....</i>	11%	<i>Because of drugs</i>	0%
<i>Physical abuse (being hit, kicked or assaulted).....</i>	5%	<i>Having your canteen/property taken.....</i>	2%
<i>Sexual abuse.....</i>	0%	<i>Because you were new here</i>	5%
<i>Because of your race or ethnic origin</i>	7%	<i>Because you are from a different part of the country</i>	2%
<i>Because of your religious beliefs .</i>	0%	<i>Because of gang related issues.....</i>	3%
<i>Because you have a disability</i>	0%	<i>Because of my offence/crime.....</i>	2%

Q9 If you were being victimised who would you tell?

<i>No one</i>	32%	<i>Teacher/education staff.....</i>	5%
<i>Personal officer</i>	34%	<i>Gym staff</i>	0%
<i>Wing officer.....</i>	27%	<i>Listener/Samaritan/Buddy.....</i>	9%
<i>Chaplain</i>	13%	<i>Another young person here</i>	11%
<i>Healthcare staff</i>	7%	<i>Family/friends.....</i>	41%
<i>Other please specify</i>			100%

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

<i>Yes</i>	39%
<i>No.....</i>	30%
<i>Don't know.....</i>	31%

Q11 Is shouting through the windows a problem here?

<i>Yes</i>	52%
<i>No.....</i>	43%
<i>Don't know.....</i>	5%

Q12 Have staff checked on you personally in the last week to see how you are getting on?

<i>Yes</i>	41%
<i>No.....</i>	59%

Section Ten: Activities

Q1 How old were you when you were last at school?

<i>14 or under.....</i>	31%
<i>15 or over.....</i>	69%

Q2 Please answer the following questions about school:

	Yes	No	Not applicable
Have you ever been excluded from school?	85%	15%	0%
Did you used to truant from school?	64%	34%	2%

**Q3 Do you currently take part in any of the following activities?
(Please tick all that apply to you.)**

Education	79%
A job in this establishment.....	16%
Vocational or skills training.....	14%
Offending behaviour programmes.....	14%
I am not currently involved in any of these	14%

Q4 If you have been involved in any of the following activities in this establishment, do you think they will help you when you leave prison?

	Not been involved	Yes	No	Don't know
Education	10%	63%	18%	8%
A job in this establishment	30%	30%	18%	21%
Vocational or skills training	30%	32%	14%	24%
Offending behaviour programmes	31%	33%	11%	25%

Q5 Do you usually have association every day?

Yes	18%
No.....	74%
Don't know.....	8%

Q6 How many times do you usually go to the gym each week?

Don't want to go	13%
None.....	10%
One to two times	16%
Three to five times	38%
More than five times	17%
Don't know.....	6%

Q7 Can you usually go outside for exercise everyday?

Don't want to go	5%
Yes	35%
No.....	48%
Don't know.....	11%

Section Eleven: Keeping in touch with family and friends

Q1 Are you able to use the telephone everyday, if you want to?

Yes	38%
No.....	55%
Don't know.....	6%

Q2 Have you had any problems with sending or receiving mail (letters or parcels)?

Yes	56%
No.....	40%
Don't know.....	5%

Q3	How easy is it for your family and friends to visit you here?	
	<i>Very easy</i>	13%
	<i>Easy</i>	43%
	<i>Neither</i>	16%
	<i>Difficult</i>	11%
	<i>Very difficult</i>	13%
	<i>Don't know</i>	5%
Q4	How many visits have you had, from family or friends in the last month?	
	<i>I don't get visits</i>	5%
	<i>None</i>	17%
	<i>One</i>	23%
	<i>Two</i>	26%
	<i>Three</i>	8%
	<i>More than three</i>	14%
	<i>Don't know</i>	8%
Q5	Do your visits usually start on time?	
	<i>I don't get visits</i>	5%
	<i>Yes</i>	53%
	<i>No</i>	25%
	<i>Don't know</i>	17%
Q6	How are you and your family/friends usually treated by visits staff?	
	<i>I don't get visits</i>	5%
	<i>Very well</i>	18%
	<i>Well</i>	40%
	<i>Neither</i>	12%
	<i>Badly</i>	2%
	<i>Very badly</i>	2%
	<i>Don't know</i>	22%

Section Twelve: Preparation for release

Q1	When did you first meet your personal officer?	
	<i>I still have not met him/her</i>	25%
	<i>In your first week</i>	38%
	<i>After your first week</i>	27%
	<i>Don't remember</i>	11%
Q2	How often do you see your personal officer?	
	<i>I still have not met him/her</i>	25%
	<i>At least once a week</i>	39%
	<i>Less than once a week</i>	36%
Q3	Do you feel your personal officer has helped you?	
	<i>I still have not met him/her</i>	26%
	<i>Yes</i>	48%
	<i>No</i>	26%

Q4	Do you have a training plan?			
	<i>Not sentenced</i>			35%
	Yes.....			38%
	No.....			18%
	<i>Don't know</i>			8%

Q5	Please answer the following about training plans:				
		<i>I don't have a training plan</i>	Yes	No	<i>Don't know</i>
	Were you involved in development your training plan?	51%	28%	7%	15%
	Do you understand the targets that have been set in your training plan?	51%	34%	5%	10%
	Can you see your training plan when you want to?	53%	17%	5%	25%

Q6	Has your YOT worker been in touch since you arrived at this establishment?			
	Yes.....			81%
	No.....			19%

Q7	Do you know how to get in touch with your YOT worker?			
	Yes.....			57%
	No.....			43%

Q8	Please answer the following about your release:			
		Yes	No	<i>Don't know</i>
	Have you had a say in what will happen to you when you are released?	50%	27%	23%
	Are you planning on going to school or college after release?	80%	5%	15%
	Do you have a job to go to on release?	27%	51%	22%

Q9	Do you know who to contact to get help with any of the following for when you leave? (Please tick all that apply to you.)			
	<i>Finding accommodation</i>			27%
	<i>Getting into school or college</i>			53%
	<i>Getting a job</i>			50%
	<i>Help with money/finances</i>			27%
	<i>Help with claiming benefits</i>			21%
	<i>Continuing health services</i>			15%
	<i>Opening a bank account</i>			21%
	<i>Avoiding bad relationships</i>			21%
	<i>I don't know who to contact</i>			31%

- Q10 Do you think you will have a problem with any of the following when you leave?
(Please tick all that apply to you.)**
- | | |
|---|------------|
| <i>Finding accommodation.....</i> | 22% |
| <i>Getting into school or college.....</i> | 34% |
| <i>Getting a job</i> | 37% |
| <i>Money/finances</i> | 27% |
| <i>Claiming benefits</i> | 22% |
| <i>Continuing health services</i> | 8% |
| <i>Opening a bank account.....</i> | 15% |
| <i>Avoiding bad relationships</i> | 14% |
| <i>I won't have any problems</i> | 41% |
- Q11 Is there anything you would still like help with before you are released?**
- | | |
|-----------------|-----|
| Yes | 46% |
| No..... | 39% |
| Don't know..... | 15% |
- Q12 What is most likely to stop you offending in the future?
(Please tick all that apply to you.)**
- | | | | |
|---|------------|---|-----|
| <i>Not sentenced.....</i> | 38% | <i>Having a mentor (someone you can ask for advice).....</i> | 13% |
| <i>Nothing it is up to me.....</i> | 10% | <i>Having a YOT worker or social worker that I get on with.....</i> | 23% |
| <i>Making new friends outside.....</i> | 16% | <i>Having children.....</i> | 18% |
| <i>Going back to live with my family..</i> | 23% | <i>Having something to do that isn't crime.....</i> | 25% |
| <i>Getting a place of my own.....</i> | 13% | <i>This sentence.....</i> | 21% |
| <i>Getting a job</i> | 34% | <i>Getting into school/college.....</i> | 31% |
| <i>Having a partner (girlfriend or boyfriend)</i> | 23% | <i>Talking about my offending behaviour with staff</i> | 8% |
| <i>Staying off alcohol/drugs</i> | 21% | <i>Anything else.....</i> | 2% |
- Q13 Do you want to stop offending?**
- | | |
|----------------------------------|------------|
| <i>Not sentenced.....</i> | 38% |
| Yes | 59% |
| No..... | 2% |
| Don't know..... | 2% |
- Q14 Have you done anything, or has anything happened to you in this establishment, that you think will make you less likely to offend in the future?**
- | | |
|----------------------------------|------------|
| <i>Not sentenced.....</i> | 38% |
| Yes | 35% |
| No..... | 27% |



Survey responses from children and young people: HMYOI Brinsford 2009

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

Key to tables

	Any percent highlighted in green is significantly better than the comparator.				
	Any percent highlighted in blue is significantly worse than the comparator.				
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	Number of completed questionnaires returned	72	1049	72	69
SECTION 1: ABOUT YOU					
1.1	Are you 18 years of age?	10%	9%	10%	10%
1.2	Are you a foreign national?	14%	2%	14%	
1.3	Is English your first language?	79%	93%	79%	85%
1.4	Are you from a minority ethnic group (including all those who did not tick White British, White Irish or White other category)?	59%	32%	59%	51%
1.5	Do you consider yourself to be Gypsy/Romany/Traveller?	6%	7%	6%	
1.6	Are you Muslim?	27%	8%	27%	
1.7	Do you have any children?	14%	12%	14%	6%
SECTION 2: ABOUT YOUR SENTENCE					
2.2	Are you sentenced?	67%	77%	67%	75%
2.3	Is your sentence 12 months or less?	35%	38%	35%	45%
2.4	Do you have less than six months to serve?	47%	51%	47%	50%
2.5	Have you been in this prison less than a month?	26%	23%	26%	24%
2.6	Is this the first time that you have been in a YOI, secure children's home or secure training centre before?	45%	43%	45%	51%
2.7	Have you been to any other YOI during this sentence?	24%	26%	24%	24%
SECTION 3: COURTS, TRANSFERS AND ESCORTS					
For your most recent journey, either to or from court, or between prisons, we want to know:					
3.1	Was the van clean?	35%	47%	35%	36%
3.2	Was the van comfortable?	10%	11%	10%	7%
3.3	Did you feel safe?	67%	76%	67%	69%
3.4	Did you travel with any adults (over 18) or anyone of a different gender?	32%	33%	32%	
3.5	Did you spend more than four hours in the van?	4%	5%	4%	6%
For those who spent two or more hours in the escort van:					
3.6	Were you offered a toilet break if you needed it?	19%	17%	19%	
3.7	Were you offered anything to eat or drink?	29%	39%	29%	
3.8	Were you treated well/very well by the escort staff?	64%	60%	64%	63%
3.9	Did someone tell you where you were going when you left court?	75%	80%	75%	
3.10	Did you receive written information about where you were going when you left court?	4%	4%	4%	
SECTION 4: YOUR FIRST FEW DAYS HERE					
4.1	Were you in reception for less than 2 hours?	78%	77%	78%	70%
4.2	Were you seen by a member of healthcare staff in reception?	86%	87%	86%	80%
4.3	When you were searched was this carried out in an understanding way?	79%	82%	79%	70%
4.4	Were you treated well/very well in reception?	68%	70%	68%	53%

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SECTION 4: YOUR FIRST FEW DAYS HERE cont.					
When you first arrived, did staff ask if you needed help or support with any of the following:					
4.5a	Not being able to smoke?	52%	62%	52%	
4.5b	Loss of property?	17%	22%	17%	
4.5c	Housing problems?	19%	20%	19%	
4.5d	Needing protection from other young people?	25%	22%	25%	
4.5e	Letting family know where you are?	54%	62%	54%	
4.5f	Money worries?	15%	18%	15%	
4.5g	Feeling low/upset/needing someone to talk to?	51%	43%	51%	
4.5h	Health problems?	59%	55%	59%	
4.5i	Getting phone numbers?	40%	43%	40%	
4.6	Did you have any problems when you first arrived?	74%	75%	74%	70%
When you first arrived, did you have problems with any of the following:					
4.6a	Not being able to smoke?	57%	48%	57%	40%
4.6b	Loss of property?	7%	11%	7%	8%
4.6c	Housing problems?	7%	12%	7%	13%
4.6d	Needing protection from other young people?	8%	5%	8%	8%
4.6e	Letting family know where you are?	17%	21%	17%	24%
4.6f	Money worries?	17%	15%	17%	20%
4.6g	Feeling low/upset/needing someone to talk to?	18%	19%	18%	24%
4.6h	Health problems?	10%	11%	10%	14%
4.6i	Getting phone numbers?	17%	25%	17%	
When you first arrived, were you given any of the following:					
4.7a	A reception pack?	71%	75%	71%	
4.7b	The opportunity to have a shower?	33%	36%	33%	
4.7c	Something to eat?	82%	84%	82%	
4.7d	A free phone call to friends/family?	61%	84%	61%	51%
4.7e	Information about the PIN telephone system?	71%	65%	71%	
4.7f	Information about feeling low/upset?	44%	39%	44%	
Within your first 24 hours, did you have access to the following people or services:					
4.8a	The chaplain or religious leader?	60%	44%	60%	31%
4.8b	Someone from healthcare?	68%	60%	68%	54%
4.8c	A Peer Mentor, Listener or The Samaritans?	16%	19%	16%	12%
4.8d	Did you have access to the prison shop/canteen?	17%	17%	17%	6%
4.9	Did you feel safe on your first night here?	79%	82%	79%	81%
For those who had an induction:					
4.10	Did you go on an induction course within your first week?	59%	77%	59%	65%
4.11	Did the induction course cover everything you needed to know about the establishment?	61%	68%	61%	50%

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SECTION 5: DAILY LIFE HERE					
5.1	Can you normally have a shower everyday if you want to?	42%	60%	42%	47%
5.2	Is your cell call bell normally answered within five minutes?	34%	30%	34%	44%
5.3	Do you find the food here good/very good?	19%	21%	19%	13%
5.4	Does the shop/canteen sell a wide enough variety of products?	43%	40%	43%	41%
5.5	Is it easy/very easy for you to attend religious services?	59%	56%	59%	49%
5.6a	Do you feel your religious beliefs are respected?	62%	47%	62%	
5.6b	Can you speak to a religious leader in private if you want to?	54%	64%	54%	
5.7a	Is there a member of staff you can turn to with a problem?	63%	74%	63%	
5.7b	Do most staff treat you with respect?	58%	70%	58%	78%
SECTION 6: HEALTHCARE					
6.1	Do you think the overall quality of the healthcare is good/very good?	35%	61%	35%	47%
6.2a	Is it easy for you to see the doctor?	30%	52%	30%	32%
6.2b	Is it easy for you to see the nurse?	47%	71%	47%	58%
6.2c	Is it easy for you to see the dentist?	10%	31%	10%	19%
6.2d	Is it easy for you to see the optician?	10%	25%	10%	14%
6.2e	Is it easy for you to see the pharmacist?	7%	32%	7%	
6.3	For those on medication: Have you had any problems getting your medication?	76%	33%	76%	50%
6.4a	Did you have any problems with alcohol when you first arrived?	12%	16%	12%	13%
6.4b	Do you have any problems with alcohol now?	1%	4%	1%	
6.4c	Have you received any help with any alcohol problems here?	7%	16%	7%	19%
6.5a	Did you have any problems with drugs when you first arrived?	26%	29%	26%	17%
6.5b	Do you have any problems with drugs now?	9%	8%	9%	
6.5c	Have you received any help with any drug problems here?	23%	29%	23%	36%
6.6	Is it easy/very easy to get illegal drugs here?	20%	22%	20%	
6.7	Do you feel you have any emotional or mental health problems?	27%	25%	27%	
If you feel you have emotional or mental health problems, are you being helped by any of the following:					
6.8a	Not getting any help	68%	38%	68%	
6.8b	Doctor?	4%	21%	4%	
6.8c	Nurse?	0%	24%	0%	
6.8d	Psychiatrist/psychologist?	12%	31%	12%	
6.8e	Counsellor?	0%	18%	0%	
SECTION 7: APPLICATIONS AND COMPLAINTS					
7.1	Do you know how to make an application?	88%	91%	88%	
7.2	Is it easy to make an application?	73%	84%	73%	
For those who have made an application:					
7.3a	Do you feel applications are sorted out fairly?	51%	71%	51%	
7.3b	Do you feel applications are sorted out promptly? (Within 7 days)	42%	62%	42%	
7.4	Do you know how to make a complaint?	81%	81%	81%	75%
7.5	Is it easy to make a complaint?	66%	70%	66%	

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SECTION 7: APPLICATIONS AND COMPLAINTS cont.					
For those who have made a complaint:					
7.6a	Do you feel complaints are sorted out fairly?	23%	38%	23%	29%
7.6b	Do you feel complaints are sorted out promptly? (Within 7 days)	30%	50%	30%	
7.6c	Have you ever been encouraged to withdraw a complaint?	24%	27%	24%	17%
Can you speak to the following people when you need to:					
7.7a	A peer mentor or listener?	25%	38%	25%	
7.7b	A member of the IMB (Independent Monitoring Board)	27%	34%	27%	
7.7c	An advocate (an outside person to help you)	38%	41%	38%	34%
SECTION 8: REWARDS AND SANCTIONS, AND DISCIPLINE					
8.1	Are you on the enhanced (top) level of the reward scheme?	18%	26%	18%	30%
8.2	Do you feel you have been treated fairly in your experience of the reward scheme?	42%	56%	42%	52%
8.3	Do the different levels make you change your behaviour?	58%	60%	58%	57%
8.4	Have you had a 'nicking' (adjudication) since you have been here?	47%	56%	47%	35%
8.5	Was the 'nicking' (adjudication) process explained clearly to you?	84%	89%	84%	
8.6	Have you been physically restrained (C and R) since you have been here?	24%	29%	24%	28%
For those who had spent a night in the segregation/CSU:					
8.7	Did the staff treat you well/very well?	79%	38%	79%	54%
SECTION 9: SAFETY					
9.1	Have you ever felt unsafe in this prison?	31%	30%	31%	38%
9.3	Has another young person or group of young people victimised (insulted or assaulted) you here?	33%	24%	33%	35%
If you have felt victimised by another young person/group of young people, did the incident involve:					
9.4a	Insulting remarks?	14%	13%	14%	18%
9.4b	Physical abuse?	17%	10%	17%	21%
9.4c	Sexual abuse?	1%	1%	1%	3%
9.4d	Racial or ethnic abuse?	5%	3%	5%	9%
9.4e	Your religious beliefs?	0%	2%	0%	
9.4f	Your disability?	1%	1%	1%	
9.4g	Drugs?	1%	2%	1%	6%
9.4h	Having your canteen/property taken?	9%	4%	9%	10%
9.4i	Because you were new here?	9%	9%	9%	10%
9.4j	Being from a different part of the country than others?	5%	5%	5%	7%
9.4k	Gang related issues?	5%	6%	5%	
9.4l	Your offence/crime?	1%	3%	1%	
9.6	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	23%	21%	23%	25%
If you have felt victimised by a member of staff/group of staff members, did the incident involve:					
9.5a	Insulting remarks?	12%	12%	12%	14%
9.5b	Physical abuse?	5%	3%	5%	12%
9.5c	Sexual abuse?	0%	1%	0%	3%
9.5d	Racial or ethnic abuse?	7%	3%	7%	9%

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SECTION 9: SAFETY cont.					
9.5e	Your religious beliefs?	0%	1%	0%	
9.5f	Your disability?	0%	1%	0%	
9.5g	Drugs?	0%	1%	0%	3%
9.5h	Having your canteen/property taken?	1%	2%	1%	7%
9.5i	Because you were new here?	5%	3%	5%	9%
9.5j	Being from a different part of the country than others?	1%	2%	1%	6%
9.5k	Gang related issues?	4%	2%	4%	
9.5l	Your offence/crime?	1%	3%	1%	
9.9	If you were being victimised by another young person or a member of staff would you be able to tell anyone about it?	68%	63%	68%	63%
9.10	If you did tell a member of staff that you were being victimised do you think it would be taken seriously?	40%	39%	40%	25%
9.11	Is shouting through the windows a problem here?	52%	43%	52%	
9.12	Have staff checked on you personally in the last week to see how you are getting on?	41%	37%	41%	33%
SECTION 10: ACTIVITIES					
10.1	Were you 14 or younger when you were last at school?	31%	39%	31%	42%
10.2a	Have you ever been excluded from school?	85%	89%	85%	84%
10.2b	Have you ever truanted from school?	64%	71%	64%	61%
Do you currently take part in any of the following:					
10.3a	Education?	80%	75%	80%	74%
10.3b	A job in this establishment?	16%	29%	16%	4%
10.3c	Vocational or skills training?	15%	35%	15%	42%
10.3d	Offending behaviour programmes?	15%	22%	15%	
For those who have taken part in the following activities, whilst in this prison: Do you think that they will help you when you leave prison					
10.4a	Education?	71%	72%	71%	
10.4b	A job in this establishment?	44%	64%	44%	
10.4c	Vocational or skills training?	46%	65%	46%	
10.4d	Offending behaviour programmes?	49%	57%	49%	
10.5	Do you usually have association every day?	17%	57%	17%	
10.6	Do you go to the gym more than five times each week?	17%	8%	17%	1%
10.7	Can you usually go outside for exercise every day?	36%	28%	36%	15%
SECTION 11: KEEPING IN TOUCH WITH FAMILY AND FRIENDS					
11.1	Are you able to use the telephone every day?	39%	54%	39%	28%
11.2	Have you had any problems with sending or receiving letters or parcels?	56%	36%	56%	28%
11.3	Is it easy/very easy for your family and friends to visit you here?	56%	43%	56%	55%
11.4	Have you had two or more visits in the last month?	47%	47%	47%	45%
11.5	Do your visits start on time?	54%	51%	54%	
11.6	Are you and your visitors treated well/very well by visits staff?	58%	53%	58%	53%
SECTION 12: PREPARATION FOR RELEASE					
For those who have met their personal officer:					
12.1	Did you meet your personal officer within the first week?	50%	46%	50%	31%
12.2	Do you see your personal officer at least once a week?	52%	67%	52%	

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SECTION 12: PREPARATION FOR RELEASE cont.					
12.3	Do you feel your personal officer has helped you?	65%	60%	65%	62%
12.4	Do you have a training plan?	39%	48%	39%	
For those with a training plan:					
12.5a	Were you involved in the development of your training plan?	57%	55%	57%	
12.5b	Do you understand the targets set in your training plan?	69%	71%	69%	
12.5c	Can you see your training plan when you want to?	36%	38%	36%	33%
12.6	Has your YOT worker been in touch since you arrived here?	81%	82%	81%	
12.7	Do you know how to get in touch with your YOT worker?	57%	60%	57%	
Please answer the following about your preparation for release:					
12.8a	Have you had a say in what will happen to you when you are released?	50%	42%	50%	36%
12.8b	Are you going to school or college on release?	80%	54%	80%	58%
12.8c	Do you have a job to go to on release?	27%	24%	27%	31%
Do you know who to contact for help with the following, in preparation for your release:					
12.9a	Finding accommodation	28%	44%	28%	
12.9b	Getting into school or college	53%	56%	53%	
12.9c	Getting a job	50%	54%	50%	
12.9d	Help with money/finances	28%	41%	28%	
12.9e	Help with claiming benefits	21%	37%	21%	
12.9f	Continuing health services	15%	30%	15%	
12.9g	Opening a bank account	21%	40%	21%	
12.9h	Avoiding bad relationships	21%	30%	21%	
Do you think you will have a problem with the following, when you are released:					
12.10a	Finding accommodation?	22%	24%	22%	
12.10b	Getting into school or college?	34%	25%	34%	
12.10c	Getting a job?	37%	48%	37%	
12.10d	Help with money/finances?	27%	34%	27%	
12.10e	Help with claiming benefits?	22%	26%	22%	
12.10f	Continuing health services?	8%	11%	8%	
12.10g	Opening a bank account?	16%	13%	16%	
12.10h	Avoiding bad relationships?	13%	19%	13%	
12.11	Is there anything you would still like help with before you are released?	46%	36%	46%	33%
For those who were sentenced:					
12.13	Do you want to stop offending?	94%	91%	94%	91%
12.14	Have you done anything or has anything happened to you here that you think will make you less likely to offend in the future?	57%	50%	57%	52%



Diversity comparator: Ethnicity/nationality/religion HMYOI Brinsford CYP 2009

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

Key to tables

Key to tables		Black and minority ethnic young people	White young people	Foreign nationals	British nationals	Muslim young people	Non-Muslim young people
Any percent highlighted in green is significantly better than the comparator.							
Any percent highlighted in blue is significantly worse than the comparator.							
Any percent highlighted in orange shows a significant difference in demographic details.							
Percentages which are not highlighted show there is no significant difference.							
Number of completed questionnaires returned		42	29	10	61	19	52
SECTION 1: ABOUT YOU							
1.2	Are you a foreign national?	19%	3%			26%	10%
1.3	Is English your first language?	74%	92%	21%	90%	63%	85%
1.4	Are you from a minority ethnic group (including all those who did not tick White British, White Irish or White other category)?			92%	54%	100%	43%
1.5	Do you consider yourself to be Gypsy/Romany/Traveller?	7%	3%	23%	4%	16%	2%
1.6	Are you Muslim?	47%	0%	50%	24%		
SECTION 2: ABOUT YOUR SENTENCE							
2.2	Are you sentenced?	64%	73%	71%	66%	58%	70%
2.6	Is this the first time that you have been in a YOI, secure children's home or secure training centre before?	42%	46%	71%	42%	58%	41%
SECTION 3: COURTS, TRANSFERS AND ESCORTS							
For your most recent journey, either to or from court, or between prisons, we want to know:							
3.4	Did you travel with any adults (over 18) or anyone of a different gender?	34%	28%	46%	29%	37%	30%
3.8	Were you treated well/very well by the escort staff?	66%	56%	57%	63%	58%	65%
3.9	Did someone tell you where you were going when you left court?	75%	74%	73%	76%	78%	75%
SECTION 4: YOUR FIRST FEW DAYS HERE							
4.3	When you were searched was this carried out in an understanding way?	71%	92%	73%	80%	74%	84%
4.4	Were you treated well/very well in reception?	62%	74%	71%	67%	69%	69%
When you first arrived, were you given any of the following:							
4.7a	A reception pack?	64%	82%	40%	74%	63%	77%
4.7b	The opportunity to have a shower?	38%	26%	40%	31%	37%	31%
4.7c	Something to eat?	80%	84%	40%	86%	74%	88%
4.7d	A free phone call to friends/family?	62%	60%	40%	62%	63%	59%
4.9	Did you feel safe on your first night here?	75%	84%	71%	82%	74%	81%
4.11	Did the induction course cover everything you needed to know about the establishment?	60%	61%	57%	59%	52%	62%
SECTION 5: DAILY LIFE HERE							
5.6a	Do you feel your religious beliefs are respected?	75%	42%	100%	59%	88%	50%
5.6b	Can you speak to a religious leader in private if you want to?	55%	54%	60%	54%	56%	53%
5.7a	Is there a member of staff you can turn to with a problem?	60%	66%	67%	63%	60%	66%
5.7b	Do most staff treat you with respect?	56%	60%	64%	57%	46%	61%

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SECTION 6: HEALTHCARE							
6.2a	Is it easy for you to see the doctor?	30%	28%	33%	28%	25%	33%
6.2b	Is it easy for you to see the nurse?	44%	50%	60%	45%	31%	55%
6.2e	Is it easy for you to see the pharmacist?	7%	9%	14%	6%	5%	7%
6.3	Have you had any problems getting your medication?	73%	79%	100%	75%	70%	78%
6.6	Is it easy/very easy to get illegal drugs here?	19%	22%	11%	22%	23%	21%
6.7	Do you feel you have any emotional or mental health problems?	20%	39%	7%	31%	22%	31%
SECTION 7: APPLICATIONS AND COMPLAINTS							
7.2	Is it easy to make an application?	70%	78%	46%	78%	52%	80%
7.3a	Do you feel applications are sorted out fairly?	39%	67%	80%	49%	42%	56%
7.3b	Do you feel applications are sorted out promptly? (Within 7 days)	41%	43%	50%	41%	42%	43%
7.5	Is it easy to make a complaint?	64%	69%	33%	71%	48%	73%
7.6a	Do you feel complaints are sorted out fairly?	17%	30%	0%	24%	36%	19%
7.6b	Do you feel complaints are sorted out promptly? (Within 7 days)	17%	42%	100%	24%	36%	27%
SECTION 8: REWARDS AND SANCTIONS, AND DISCIPLINE							
8.1	Are you on the enhanced (top) level of the reward scheme?	19%	18%	36%	16%	4%	22%
8.2	Do you feel you have been treated fairly in your experience of the reward scheme?	37%	49%	50%	42%	18%	52%
8.3	Do the different levels make you change your behaviour?	59%	55%	50%	59%	46%	61%
8.4	Have you had a 'nicking' (adjudication) since you have been here?	47%	46%	64%	46%	50%	47%
8.5	Was the 'nicking' (adjudication) process explained clearly to you?	84%	83%	86%	84%	77%	87%
8.6	Have you been physically restrained (C and R) since you have been here?	21%	28%	27%	25%	28%	23%
8.7	Did the staff treat you well/very well?	100%	67%	100%	73%	100%	73%
SECTION 9: SAFETY							
9.1	Have you ever felt unsafe in this prison?	31%	33%	46%	30%	50%	25%
If you have felt victimised by another young person/group of young people, did the incident involve:							
9.4b	Physical abuse?	14%	22%	23%	17%	13%	20%
9.4d	Racial or ethnic abuse?	6%	3%	8%	4%	4%	5%
9.4e	Your religious beliefs?	0%	0%	0%	0%	0%	0%
9.4f	Your disability?	0%	3%	0%	1%	0%	2%
9.4k	Gang related issues?	2%	8%	0%	5%	4%	5%
9.6	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	23%	22%	46%	18%	29%	21%

Key to tables

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Number of completed questionnaires returned		42	29	10	61	19	52
If you have felt victimised by a member of staff/group of staff members, did the incident involve:							
9.5b	Physical abuse?	2%	8%	9%	4%	0%	7%
9.5d	Racial or ethnic abuse?	7%	8%	27%	4%	13%	5%
9.5e	Your religious beliefs?	0%	0%	0%	0%	0%	0%
9.5f	Your disability?	0%	0%	0%	0%	0%	0%
9.5k	Gang related issues?	2%	3%	0%	1%	0%	5%
9.9	If you were being victimised by another young person or a member of staff would you be able to tell anyone about it?	81%	51%	100%	65%	81%	64%
SECTION 10: ACTIVITIES							
Do you take part in any of the following:							
10.3a	Education?	78%	84%	64%	82%	83%	78%
10.3b	A job in this establishment?	14%	18%	36%	11%	17%	16%
10.3c	Vocational or skills training?	8%	22%	9%	15%	17%	13%
10.3d	Offending behaviour programmes?	2%	29%	0%	17%	0%	21%
10.5	Do you usually have association every day?	20%	16%	60%	11%	17%	18%
10.6	Do you go to the gym more than five times each week?	14%	19%	27%	17%	13%	21%
10.7	Can you usually go outside for exercise every day?	30%	42%	70%	32%	25%	41%
SECTION 11: KEEPING IN TOUCH WITH FAMILY AND FRIENDS							
11.1	Are you able to use the telephone every day?	33%	47%	50%	36%	42%	38%
11.2	Have you had any problems with sending or receiving letters or parcels?	53%	60%	67%	55%	54%	56%
11.3	Is it easy/very easy for your family and friends to visit you here?	58%	53%	50%	57%	65%	54%
SECTION 12: PREPARATION FOR RELEASE							
12.3	Do you feel helped by your personal officer?	67%	62%	50%	66%	65%	63%
12.4	Do you have a training plan?	29%	53%	27%	39%	23%	45%
12.5b	Do you understand the targets set in your training plan?	64%	79%	0%	72%	60%	75%
12.6	Has your YOT worker been in touch since you arrived here?	84%	78%	100%	78%	84%	79%
12.11	Is there anything you would still like help with before you are released?	37%	58%	20%	46%	35%	51%
12.13	Do you want to stop offending?	96%	96%	100%	94%	100%	92%
12.14	Have you done anything or has anything happened to you here that you think will make you less likely to offend in the future?	37%	77%	75%	56%	29%	69%