

Report on an unannounced inspection of

Keppel Unit

HMYOI Wetherby

by HM Chief Inspector of Prisons

9 – 19 March 2015

Glossary of terms

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Victory House
6th floor
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London
WC2B 6EX
England

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Introduction

The Keppel unit is a facility within the wider Wetherby young offender institution, holding just over 40 boys aged between 15 and 18. Opened seven years ago, the unit is a national resource designed to provide more developed support for some of the most challenging and vulnerable young people currently in custody. In keeping with other young offender facilities, we inspect such institutions at least annually. We have previously found Keppel to be a place that always ensured very good outcomes for young people. When we last visited we described it as model of how a specialist unit should be run. Our findings on this visit were similarly encouraging, with Keppel achieving our highest grading across all four of our healthy prison tests.

Good arrangements were in place to receive and induct new boys, although these were often undermined by long journeys and late arrivals. Risk was properly assessed on reception but first night arrangements needed some management attention. The attentiveness and care of the whole staff group underpinned good safeguarding and child protection arrangements generally. Good information exchange, care planning and staff briefing were evident in the way sentences were managed.

The vulnerability of many of the boys in the Keppel unit meant the risk of self-harm was ever present, but the vigilance of staff combined with sound case management arrangements assured us that the unit was working well to protect those at risk. Staff were similarly alert to the complex problems of bullying and victimisation, and we were assured that violence on the unit was not increasing. Interventions and target setting to promote positive behaviour seemed to be effective and the majority of boys felt they were helped to change their behaviour. Use of restraint techniques had increased recently, although this was probably due to new methods of recording. Very few boys had been segregated and the evidence suggested there was little or no drug abuse.

The general environment and quality of the unit, comprising a series of small spurs in well kept grounds, was excellent. The atmosphere on the unit was relaxed and supportive and staff engagement was consistent and useful. Diverse needs were identified on arrival and there was some particularly good support for boys with learning difficulties from the mental health team and education staff. Arrangements to deal with complaints were responsive and the quality of food was generally good. Boys indicated that they were happy with the health care service they received.

Boys were normally unlocked for about 10 hours a day. Expectations concerning the personal, educational and social development of boys were high. Priority was given to ensuring attendance at education and the range of provision met needs. There was also a range of useful enrichment activities, such as the Duke of Edinburgh scheme and Army cadets, in place. It was striking how prison officers sat with boys in education classes, modelling good behaviours. Boys were able to make progress and develop some outstanding life skills.

Work to support resettlement was properly founded on an analysis of need and boys received some good support from named caseworkers. Training plans were in place but there was some evidence to suggest boys were less than clear about their targets. There were good systems to identify those with 'looked after' status and reintegration planning was well organised. However, more could have been done to promote family relationships, especially as many boys were a long way from their families. A gap in provision for those with a sexual element to their offending had only recently been addressed. Public protection arrangements were well managed.

This is a very good report. Keppel cares for some of the most difficult boys currently held in custody. It does so calmly and humanely, and evidences a culture of respect. The unit has a strong positive ethos and boys are dealt with as individuals. Poor behaviour is challenged and positive behaviour modelled and promoted. An attentive and patient staff group deserve great credit for the work they do.

Nick Hardwick
HM Chief Inspector of Prisons

August 2015

Fact page

Task of the establishment

To hold in custody boys between the ages of 15 to 18 committed by the courts

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

Public

Region/Department

Young people estate

Number held

41

Certified normal accommodation

48

Operational capacity

48

Date of last full inspection

August 2013

Brief history

Keppel unit is an enhanced support unit which opened in October 2008 catering for a select number of young people with complex needs. The unit delivers a range of interventions and support using selected staff from the main establishment with holistic support from internal and community agencies.

Short description of residential units

Four spurs, each accommodating up to 12 young people, designated blue, red, green and yellow

Name of governor/director

Marcella Goligher: governor of HMYOI Wetherby
Warren Wilman: acting head of Keppel unit

Escort contractor

GeoAmey

Health service commissioner and providers

Leeds Community Healthcare NHS Trust
South West Yorkshire Partnership Foundation Trust
Lifeline

Learning and skills providers

The Manchester College

Independent Monitoring Board chair

Mary Augustine

About this inspection and report

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

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

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

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

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

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

Our assessments might result in one of the following:

- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
- **housekeeping points:** achievable within a matter of days, or at most weeks, through the issue of instructions or changing routines
- **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for children and young people.

Five key sources of evidence are used by inspectors: observation; children and young people surveys; discussions with children and young people; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.

Since April 2013, the majority of our inspections have been full follow-ups of previous inspections, with most unannounced. Previously, inspections were either full (a new inspection of the establishment), full follow-ups (a new inspection of the establishment with an assessment of whether recommendations at the previous inspection had been achieved and investigation of any areas of serious concern previously identified) or short follow-ups (where there were comparatively fewer concerns and establishments were assessed as making either sufficient or insufficient progress against the previous recommendations).

This report

This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of children and young people and conditions in prisons*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.

Details of the inspection team and the establishment population profile can be found in Appendices I and III respectively.

Findings from the survey of children and young people and a detailed description of the survey methodology can be found in Appendix IV of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.¹

¹ The significance level is set at 0.05, which means that there is only a 5% chance that the difference in results is due to chance.

Summary

Safety

- S1** *Too many boys arrived at Keppel late at night. Support during early days in custody was very good. Safeguarding and child protection procedures were effective. Care planning meetings were regular and reasonably effective. Many boys displayed self-harming behaviour and staff cared for them well. Many boys said they had been victimised by other boys and staff provided good support to them and challenged bullies. New behaviour management procedures addressed poor behaviour effectively. Security was proportionate. Staff worked to de-escalate incidents, but the recording and monitoring of managing and minimising physical restraint ²(MMPR) were poor. Adjudications were conducted well. Substance misuse services were reasonably good. **Outcomes for children and young people were good against this healthy prison test.***
- S2** *At the last inspection in August 2013, we found that outcomes for children and young people in Keppel were good against this healthy prison test. We made eight recommendations about safety. At this follow-up inspection we found that three of the recommendations had been achieved, two had been partially achieved, two had not been achieved and one was no longer relevant.*
- S3** Many boys had long journeys to the establishment and we met some who were not given refreshments during journeys of over three hours. Too many boys admitted from court and other establishments in the previous six months had arrived after 7.30pm, affecting their ability to settle in to the unit.
- S4** Reception processes were good and we were pleased to see that boys were no longer routinely strip-searched on arrival. Private first night interviews fully explored issues of vulnerability and the potential for self-harm, but first night support was not always effective in addressing immediate needs or concerns. Induction was thorough and covered all essential information at an appropriate pace.
- S5** The effective safeguarding of boys on the unit was driven by the attentiveness and care of the whole staff group. Links with the local safeguarding children board remained good, and there was a jointly developed, comprehensive safeguarding strategy. Care planning meetings were held regularly and were reasonably effective in overseeing care of the boys. However, they were often not multidisciplinary, with potential for issues to be missed. Daily staff briefings, observation books and electronic records enabled up-to-date information about boys to be shared effectively.
- S6** Child protection arrangements were sound and all allegations were sent immediately to the local authority designated officer for scrutiny. All cases were properly assessed. It was reassuring that staff had on occasion reported concerning behaviour by colleagues to the establishment safeguarding team. Child protection documentation was well ordered, contained detailed reports on the nature of the allegation which prompted the child protection referral and reasons for the actions taken. Key people, including parents and carers, were informed when an allegation had been made.

² A new restraint system - provides staff with the ability to recognise young people's behaviour, and to use de-escalation and diversion strategies to minimise the requirement for restraint through the use of behaviour management techniques.

- S7 The unit held some of the most vulnerable children in the country and there was a high level of self-harm, some of it serious. All staff were extremely vigilant in identifying self-harming behaviour and confident in responding to immediate needs. Assessment, care in custody and teamwork (ACCT)³ processes were robust and actions to ensure the immediate safety of boys were properly considered. Anti-ligature clothing had only been used in the most extreme circumstances and in the cases we examined we were satisfied that it was the best option to keep the child safe.
- S8 In our survey, more than half the boys said they had been victimised by other boys. The situation was complex as we found that some boys were both victims and perpetrators. Staff were alert to bullying and intimidation and actions were taken to prevent recurrence.
- S9 Levels of fights and assaults had not increased since the previous inspection. Shouting out of windows during the night remained a problem, although staff took appropriate action as soon as it was observed. Boys who were persistent bullies were managed well. Documentation was comprehensive and targets set were appropriately short term and realistically achievable.
- S10 The PACT (positive attitudes created together) process was an effective way of addressing poor behaviour and staff supplemented it with management plans specific to the unit. The rewards process was well publicised and staff and boys had a good understanding of the scheme. In our survey, nearly two-thirds of boys, more than the comparator, said the scheme helped to change their behaviour. Target setting was effective and individually tailored.
- S11 The physical environment and staffing levels allowed for good levels of supervision. Dynamic security was excellent, with a high level of staff engagement and knowledge. Information sharing through team briefings, wing observation books and a flow of information reports was very good. About a fifth of boys in our survey said it was easy to obtain drugs, but this was not reflected in search finds or in the zero mandatory drug testing rate. The security committee considered a wide range of relevant data, and appropriate actions were taken.
- S12 MMPR techniques had been used 53 times during the previous six months. This represented an increase since the last inspection, but we were confident that it was due to more stringent recording procedures. Management monitoring and oversight of MMPR for the unit was very limited and we were unable to identify any analysis of trends. Many dossiers were incomplete and only a very few included injury to person reports. This concern had been identified by the safeguarding committee but had yet to be resolved. Records demonstrated reasonable efforts at de-escalation.
- S13 Very few boys from the unit had been located in the care and separation unit over the previous six months. Staff had daily contact with separated boys and care planning was maintained. Cells in the separation unit were reasonably clean, but the regime was poor and the exercise yard was austere.
- S14 There had been nearly 300 adjudications in the previous six months, over twice the number at the previous inspection. Monitoring was not specific to the unit and the reason for the increase was unclear. Adjudication hearings demonstrated a good level of enquiry and were conducted sensitively. Records were completed well and showed a good level of participation by the boys. Quality control processes were good.

³ Case management for children at risk of suicide or self-harm

- S15 Although the substance misuse team was not yet up to full strength, outcomes for boys with substance use problems were reasonably good. The unit was focused on supply reduction, with good intelligence gathering, analysis and dissemination.

Respect

S16 *Residential units were clean and provided a decent environment. Outdoor areas were therapeutic and well maintained. Relationships between boys and staff were excellent. The diverse needs of boys were identified and met. Faith provision was good. Complaints were well managed. Health services met the needs of boys well. The quality of food was good. **Outcomes for children and young people were good against this healthy prison test.***

S17 At the last inspection in August 2013, we found that outcomes for children and young people in Keppel were good against this healthy prison test. We made seven recommendations about respect.⁴ At this follow-up inspection we found that four of the recommendations had been achieved, one had been partially achieved and two had not been achieved.

- S18 The unit spurs were clean and bright, with a good range of association equipment and helpful information on display. Outdoor areas provided an exceptional resource for association and environmental activities. Cells were comfortable and well maintained. Only boys on the highest level of the rewards scheme could wear their own clothes.
- S19 We observed very relaxed, supportive interactions between staff and boys, modelling respectful and constructive behaviour. Boys had regular contact with personal officers, but the involvement of personal officers in casework planning and delivery was underdeveloped. Entries on NOMIS electronic case notes were of high quality and helped to build a picture of boys' concerns, attitudes and behaviour. Monthly consultation meetings led to remedial action and useful information sharing.
- S20 Diverse needs were identified on reception. The large number of boys with learning disabilities received good support from the mental health team and education department. Foreign national boys received support with immigration concerns from caseworkers and the advocacy service, but access to legal advice was problematic. Support for gay and transgender boys was well developed. There was no monitoring specific to the Keppel population. Very few minority ethnic boys had been on the unit. The reasons for this were unclear and required investigation.
- S21 The chaplaincy offered effective support and boys had good access to faith meetings on the main site and to services and meetings on the unit.
- S22 Boys were given information during induction about how to make a complaint. Complaint forms were readily available and they could be submitted in confidence. Responses were polite and helpful. Legal rights were explained by caseworkers and boys who were on remand were helped to make bail applications if desired. Arrangements for contact with solicitors had improved.

⁴ This included recommendations about the incentives and earned privileges scheme which, in our updated Expectations (Version 4, 2012), now appear under the healthy prison area of safety.

- S23 Health care services were good and boys we spoke to were satisfied with the quality of health care. Partnership working and clinical governance were good, but there was no separate confidential complaints system. Reception and subsequent health screening were comprehensive and there was useful access to a brain injury link worker service. There was an appropriate range of primary care services and age-appropriate screening programmes. Access to a GP and nurse-led clinics was good, but waiting times to see the optician and dentist were too long. The primary mental health team was still developing but the secondary health team provided a very good multidisciplinary service. Access had sometimes been compromised by unplanned cancellations resulting from staff shortages.
- S24 The quality of food was good and meal queues were well supervised. The kitchen and servery were clean and well managed. The range of items on the canteen list was reasonably good but boys could be on the unit for 10 days before receiving their first canteen order.

Purposeful activity

S25 *Time out of cell was good. Management of activities was effective. The range of provision was adequate, although better for boys staying for shorter periods. Teaching, learning and assessment were of good quality. Boys were able to develop excellent life skills through some innovative projects. The library was adequate. The gym provided good facilities. **Outcomes for children and young people were good against this healthy prison test.***

S26 *At the last inspection in August 2013, we found that outcomes for children and young people in Keppel were good against this healthy prison test. We made six recommendations in the area of purposeful activity. At this follow-up inspection we found that two of the recommendations had been achieved, two had been partially achieved and two had not been achieved.*

- S27 Time out of cell was good at about 10 hours during the week and seven at weekends. At the time of our roll checks, no boys were locked up. Association periods were regular and there was a good range of well-used activity equipment. Most boys had daily association but time outside had been curtailed as a result of staff shortages.
- S28 Managers and staff had high expectations of the development of each boy's social, educational and personal skills, and there was an effective education and training strategy. The provision was of high quality but self-assessment procedures in the establishment were underdeveloped. Priority was not given to attendance at education in the coordination and ordering of activities. Analysis and use of data did not identify trends in performance sufficiently.
- S29 The range of provision met the needs of boys, but it was not as good for those serving longer sentences. The range of enrichment activities was particularly good, including the Duke of Edinburgh award, Army cadets and popular authors coming in to meet the boys. Induction to education was effective and allocations to activities were swift and fair.
- S30 Discipline staff sat with boys in lessons led by education staff. They modelled appropriate behaviour and provided help as necessary. Teaching, learning and assessment were of consistently good quality, and additional one-to-one support was very good. All boys made at least appropriate progress, but individual learning plans had few specific, measurable goals and acquired skills were not always recorded. Appropriate learning resources were available in the lessons, but information and learning technology was not always used effectively to

enliven teaching. The virtual campus⁵ was not used at all. There was inadequate promotion of equality and diversity in the learning environment.

- S31 Boys were able to develop some outstanding life skills. The caring for animals project was particularly effective and helped boys to improve communication and develop skills such as responsibility for others. Skill development was good in many other areas, although not always well recorded. Boys had little access to higher level qualifications.
- S32 The library continued to provide a reasonable service and use of the library was high. Not all boys received an induction to the library. There was good participation in reading competitions.
- S33 The gym provided good fitness facilities, although maintenance issues such as inadequate access to drinking water and poor ventilation needed attention. A good range of team games was offered and boys had access to qualifications in health awareness and fitness. Links with health care and substance misuse departments were good and effective community partnerships encouraged boys to take up sports.

Resettlement

S34 *The reducing reoffending strategy was good. Public protection work was managed well. Boys had easy access to caseworkers and sentence planning work was good. Looked-after children received effective support. Reintegration planning and pre-release work were good. Provision on most pathways was reasonable, but not enough was done to help boys keep in touch with their families and there had been a gap in services for boys with sexual offending needs. There was no systematic post-release follow up. **Outcomes for children and young people were good against this healthy prison test.***

S35 *At the last inspection in August 2013, we found that outcomes for children and young people in Keppel were good against this healthy prison test. We made four recommendations in the area of resettlement. At this follow-up inspection we found that two of the recommendations had been partially achieved and two had not been achieved.*

- S36 The reducing reoffending strategy for the unit was based on a regular needs analysis. Few boys achieved release on temporary licence and some were being encouraged to apply when they had little realistic expectation of success. Public protection work was managed well, with proper identification and oversight of cases, including boys subject to MAPP (multi-agency public protection arrangements). The risk management committee met regularly to discuss any boy identified to be a risk. There was no systematic post-release follow up of boys.
- S37 Boys had regular access to their named caseworkers and reported a high level of support in preparing for release. All boys had an appropriate training, sentence or remand management plan, but fewer than at other establishments said they understood their targets. Training planning and remand management meetings were timely, but were often not sufficiently multidisciplinary. Boys were encouraged to take part in the meetings and the involvement of some parents in reviews was positive. Planning for boys who needed to move to the adult estate or to the main Wetherby site started early and was based on individual need.

⁵ Enables prisoners to have internet access to community education, training and employment opportunities

- S38 There were efficient systems to identify boys with looked-after status and they received good support from on-site social workers. Progress had been made in ensuring that boys received regular reviews from their local authorities, but not all received financial support.
- S39 Reintegration planning was organised well and practical release arrangements were efficient. A local mentoring scheme was making a positive contribution to supporting boys as they returned to the community.
- S40 Boys' accommodation needs were identified and discussed at an early stage at planning meetings. Despite this, suitable addresses were sometimes provided unacceptably close to release dates, and sometimes only after a great deal of work from caseworkers, social workers and advocates.
- S41 Boys were able to open a bank account and there were effective arrangements through Job Centre Plus to arrange benefits appointments. Information, advice and guidance were inadequate. Staff who were responsible for delivering careers advice had been absent in the last six months, affecting the level of service.
- S42 Pre-release and transfer arrangements for boys with health care and substance misuse needs were very good. There was effective liaison with community services to ensure that boys with serious and enduring mental health problems continued to be managed appropriately on release. Boys were given medication appropriately and care was coordinated with community agencies as required.
- S43 Visiting facilities and arrangements were reasonably good. Just over a quarter of boys in our survey reported having a weekly visit. Many were very long distances from home and some had told us how difficult it was for their families to visit them. Technology, such as Skype, was still not used to mitigate this problem. Family days were appreciated by boys and their families and they were taking place regularly after a gap of some months. The 'Family Talk' work undertaken by the psychology department provided valuable support to boys and their families in rebuilding broken relationships.
- S44 There had been a gap in provision for boys with a sexual element to their offending. Although the new service was in place at the time of the inspection, not all boys had been assessed or had started relevant offending behaviour treatment. Other useful interventions work was undertaken by the psychology department in response to identified need, including juvenile enhanced thinking skills and one-to-one work.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

I.1 *Escort vans were adequate but boys often had long journeys and too many arrived late.*

I.2 During the six months before the inspection, there had been 22 new admissions to the unit of whom six had transferred from the main site. The unit was a national resource and boys coming from courts often had long waits in court detention waiting for transport, and long journeys. In our survey, 15% of boys said their journey was longer than four hours against the comparator of 6%.

I.3 Cellular vans were in decent condition, but some boys told us that they were not provided with food on long journeys. In our survey, 76% of boys against the comparator of 53% said that they were treated well by escort staff. Boys transferring to or from other establishments travelled in cars provided by the prison or taxis and were handcuffed.

I.4 Too many boys continued to arrive late at the establishment and were usually transported with adult prisoners. During the six months before the inspection, seven of the 17 boys coming from outside the establishment had arrived after 7.30pm. These boys did not always have an interview with the unit first night officer or an opportunity to associate with other residents before settling in for the night.

Recommendation

I.5 **Boys should not be transported with adults and should arrive at the establishment before 7pm.**

Housekeeping point

I.6 All boys having journeys of four hours or more should be provided with refreshments.

Early days in custody

Expected outcomes:

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

1.7 *Reception procedures were good and included a thorough first night interview. First night accommodation was not always prepared adequately and the enhanced observations of new arrivals did not meet all their needs. Induction was well structured and skilfully delivered.*

- 1.8** In our survey, 88% of boys said they were treated well or very well in reception. Reception procedures were efficient and it was a welcoming environment staffed by officers who were skilled at building up relaxed relationships with new arrivals. Boys were offered food and drink and all procedures were explained to them. At the time of the inspection, no reception canteen packs were available and some boys had to wait for long periods before they could purchase goods (see section on purchases).
- 1.9** There was no longer routine strip-searching of boys. New arrivals had a rub-down search and a BOSS chair (body orifice security scanner) was used. Each new arrival was offered a free telephone call in reception.
- 1.10** A good range of information accompanied new arrivals, including pre-sentence reports and the referral form from the youth offending team with clear indications of risk factors and vulnerability.
- 1.11** Safety and vulnerability issues were carefully checked in reception. The receiving officers asked basic questions about feelings of safety and a first night interview was held in private. The interview that we observed was extremely thorough and fully explored any concerns the boy might have, how he would manage them and the potential for self-harm. This was reflected in our survey in which 45% of boys said that staff asked if they needed support with feeling scared and 60% that staff asked if they felt worried and needed someone to talk to, against respective comparators of 28% and 35%.
- 1.12** Boys went directly to their own cells, which were usually prepared adequately for new arrivals. However, this was not always the case and we found that one boy did not have a pillow or kettle and another was not provided with adequate bedding on his first night.
- 1.13** It was emphasised to boys in reception and on the unit that if they had concerns they should speak to staff or use their cell call bell. Enhanced observations were recorded for new arrivals until they had settled in, which was good in principle. However, we were not confident of its effectiveness; during the inspection, one new arrival was subjected to harassment from other boys on his first night, which was not stopped, and another's request for bedding was not dealt with.
- 1.14** Induction was comprehensive and conducted with each new arrival, often by their personal officer. The officer we observed conducting an induction interview was skilled at explaining procedures while continually checking the boy's understanding. Induction took place over three days and was well paced and sequenced.

Recommendation

- I.15** The enhanced observation of new arrivals should meet all the needs of boys new to the unit.

Housekeeping points

- I.16** Reception packs should be available for all new arrivals.
- I.17** First night accommodation should be adequately equipped.

Care and protection of children and young people

Safeguarding

Expected outcomes:

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

I.18 *The effective safeguarding of boys on the unit was driven by the attentiveness and care of the whole staff group. Information sharing was effective, although care planning meetings were no longer multidisciplinary. Links with community agencies and families were good.*

- I.19** The duty of unit staff to safeguard children and promote their welfare was embedded in their practice and part of the culture that had developed over recent years. We observed attentiveness, care and understanding of boys which enabled staff to respond to their needs as they arose. It was evident from our survey that significant numbers of boys came to the unit with significant concerns and vulnerabilities. Unit staff responded to the needs of these vulnerable boys and allowed them time to explain their concerns. Many of the boys we spoke to said that they felt supported by staff.
- I.20** Information sharing was effective. The whole staff group met twice a day to discuss individual concerns. The electronic wing files were up to date and informative and the daily observation book was completed in detail. Staff regularly submitted information reports, enabling the security department to oversee issues with the potential to put boys at risk.
- I.21** Community agencies and families were contacted if there were concerns about a boy and there was evidence of engagement with families who reported their concerns about their children.
- I.22** We were reassured to find that there were occasions when unit staff reported to the safeguarding team what they considered to be inappropriate behaviour towards boys by their colleagues; this usually meant the inappropriate use of language or insensitive remarks. These issues were addressed with staff.
- I.23** The care planning process, which enabled boys to meet staff fortnightly to discuss their care, was still in place. However, many meetings were no longer multidisciplinary and the care plans we scrutinised showed that most meetings were only attended by the caseworker and the boy. Caseworkers confirmed that this had become the norm and that they did not have

to hand all the relevant information about the boys. This weakness in care planning had not undermined the good level of care given to the boys, but there was potential for their needs not to be properly assessed and reviewed, and for services not to be suitably targeted.

- I.24** A comprehensive safeguarding policy had been completed with the local safeguarding children board and underpinned the work of the staff. Links with the Board remained strong. The policy described the responsibility to safeguard children and promote their welfare and gave clear guidance on how to respond to child protection concerns, including referral procedures and arrangements for investigation.
- I.25** The unit produced a report for Wetherby's monthly safeguarding meeting, which showed patterns and trends. However, there was no evidence in the minutes that the reports were discussed in any detail.

Recommendation

- I.26** **The care planning process should ensure that there is ongoing assessment and review of boys' needs and that these needs are addressed by targeted services. Care plans should be readily understood by boys and staff.**

Housekeeping point

- I.27** The monthly safeguarding meeting should discuss the Keppel unit report.

Child protection

Expected outcomes:

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

- I.28** *Child protection remained sound and all allegations were sent promptly to the local authority designated officer for scrutiny. Child protection documentation was clear and community agencies and parents or carers were informed when an allegation had been made.*

- I.29** The links between the establishment and the local authority remained constructive and the local authority designated officer (LADO) continued to attend quarterly safeguarding meetings. The LADO had made significant input to the establishment policies and procedures.
- I.30** During the six months before the inspection, 20 child protection referrals had been sent to the local authority, similar to the 2013 inspection. Referrals related to disclosures of historical abuse, complaints about excessive use of force during restraint and inappropriate behaviour by unit staff (see section on safeguarding). The independent social work team in the establishment was responsible for managing the historical abuse cases and supporting the boys. The establishment safeguarding team managed all other allegations. Unit staff and members of the safeguarding team who conducted the initial interviews with boys had not been trained to handle disclosure of abuse, which increased the chance of errors and possible corruption of further investigations. Child protection documentation was well ordered, with detailed reports on the nature of the allegation and reasons for the actions taken.

- I.31** We were satisfied that all child protection allegations were sent to the LADO for external scrutiny. No strategy meetings or internal investigations of staff had been requested by the LADO since our last inspection. The LADO had raised concerns about one member of staff who had been involved in a high number of restraints and further enquiry had concluded that all restraint interventions had been necessary.
- I.32** Boys were made aware of how to report an allegation of abuse and those we spoke to said that they felt the allegation would be taken seriously. The safeguarding team notified all relevant community agencies and the boy's family that an allegation had been made and kept them informed of the outcome of investigations.
- I.33** Members of the social work and safeguarding team continued to examine all child protection referrals at a weekly meeting chaired by the governor. The governor did not sign off cases until she was satisfied that investigations had been completed.

Recommendation

- I.34** **Key staff should be trained to handle a disclosure of abuse made to them by a child.**

Victims of bullying and intimidation

Expected outcomes:

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

- I.35** *A significant number of boys said that they felt victimised by others, but the whole staff group was quick to identify boys who faced bullying and intimidation, and actions were taken to support them. Boys were confident to tell staff if they or someone else was being victimised and felt that staff would take the allegation seriously.*

- I.36** Boys told us that bullying and intimidation occurred regularly on the unit and our survey results reflected this, with 54% saying that they had at some point been victimised by other boys on the unit, similar to the figure at the last inspection but higher than the comparator of 25%. The most common form of intimidation was insulting remarks about family and friends and we came across one boy who had been extremely distressed about such remarks, made during his first night in custody. Another boy severely self-harmed after he suffered abuse about his mother. Other boys said that bullies guessed the nature of their offence and used that against them even if they were wrong. Some boys said that they were encouraged to self-harm by others. There continued to be an assumption by some boys on the main site that 'Keppel boys' were sex offenders and some boys received abuse if they went on to the main site.
- I.37** Many victims of abuse reported their concerns to members of staff and some boys alerted staff when they saw another boy being intimidated. Care planning meetings provided a safe opportunity for boys to disclose that they were being victimised and we saw action plans to support the victim. In our survey, 44% of boys said that they would tell staff if they were victimised and 56% that they were confident staff would take their disclosure seriously, against respective comparators of 25% and 28%.

- I.38** The staff group was quick to identify boys who faced intimidation to give support and prevent it recurring. Boys who were particularly affected were referred to the mental health team, and members of the chaplaincy and caseworkers provided additional support. One young person, who had often felt intimidated, said that he had received excellent ongoing support from his personal officer. A significant number of incident reports referred to bullying and staff were advised of boys who required close observation through the unit observation book, wing files and daily briefings.

Suicide and self-harm prevention

Expected outcomes:

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

- I.39** *The unit held some of the most vulnerable children in the country and there was a high level of self-harm, some of it serious. All staff were extremely vigilant in identifying self-harming behaviour and responded to immediate needs well. The ACCT case management procedures were robust. Specialist supervision was no longer routinely provided, but was available on request.*

- I.40** The unit held some very vulnerable boys. The number of self-harm incidents was high and had remained so for the past few years. Unit staff were extremely vigilant in identifying self-harming behaviour and confident in responding to immediate needs. During the six months before the inspection, there had been 191 incidents of self-harm, involving 93 boys and 42 ACCT documents had been opened. There had been one reported 'near miss' since our last inspection, when a boy had passed out after using a ligature. An investigation had been carried out by the safeguarding team, which concluded that actions by staff had been effective and there were no specific lessons to be learned from the incident. The boy's parents had been informed.
- I.41** At least two boys had needed wounds to be stitched. In the most extreme circumstances, attendance at hospital was required. Staff described how a very few boys had used every available garment or soft material to create a ligature.
- I.42** Since February 2014, six boys had required a constant watch either in their own cell or in the one gated cell on the unit. For a short period, three boys had been on a constant watch at the same time. The gated cell had been introduced since our last inspection. The cell was kept clean and ready for use, and staff made sure it was comfortable. However, a specially designed care suite would have been a more appropriate facility for the observation and care of a distressed child. Boys on constant watch were subject to enhanced case reviews. They were given every opportunity to engage with the regime.
- I.43** Over the same period, a further eight boys had been placed in anti-ligature clothing, a three-quarter length shirt of material that could not be made into a ligature, and were given an anti-ligature blanket. We were confident that anti-ligature clothing had not been used as an alternative to constant observation and engagement with staff. We were assured by staff that anti-ligature clothing was only used at night and for the shortest time possible. Staff described anti-ligature clothing as undignified and distressing for all concerned and ensured that boys wearing it were not seen by others.

- I.44** Not all the documentation relating to constant watches and the use of anti-ligature clothing was available for scrutiny and the establishment did not record the number of times the gated cell had been used. Although constant watches and the use of anti-ligature clothing had to be authorised by a senior member of staff, the safeguarding committee did not scrutinise the care of these boys, which was a weakness.
- I.45** The quality of ACCT documents remained good. Initial assessments were conducted promptly and most were of a high standard, though not all assessors had engaged well enough with the boy to identify why he had self-harmed or was at risk of doing so. In a few documents there was no indication of how the boy felt he would be best supported. Initial action plans were comprehensive and showed that staff gave proper consideration to protecting boys at risk. The unit custodial managers chaired the reviews, which were timely, and the reviews we observed were conducted with sensitivity and insight. The cases we scrutinised indicated attendance by the chaplaincy, irrespective of whether they knew the boy, but mental health practitioners only attended reviews of boys they were working with.
- I.46** Care maps were updated after ACCT reviews with actions to meet the boy's needs. It was not clear how these reflected actions from care planning meetings. Parents or carers were informed when a boy self-harmed, but they rarely participated in an ACCT review. Observations took place at the required frequency, and records of many observations showed that staff had talked to the boy. Night observations were in some cases too predictable; in some cases management checks had commented on this and practice had been changed.
- I.47** Staff did an excellent job of identifying and responding to the needs of boys who self-harmed, and in some cases keeping them safe required significant effort and skill. Not all staff had received appropriate training, although they had access to specialist supervision on request.

Recommendations

- I.48** **The gated cell should be replaced by a care suite suitable for vulnerable boys.**
- I.49** **The safeguarding committee should scrutinise the use of anti-ligature clothing and constant observations, particularly in the gated cell.**
- I.50** **All unit staff should be trained in managing self-harm incidents.**

Behaviour management

Expected outcomes:

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

- I.51** *The newly introduced PACT (positive attitudes created together) scheme was being used well to manage behaviour. This approach included a range of interventions and provided clear expectations of behaviour and guidelines for staff and boys.*

- I.52** The PACT scheme had been recently introduced. It offered a broad approach to behaviour management which included a range of interventions from informal support and guidance to sanctions under the formal disciplinary procedure and use of the separation and care unit. Individual management plans were drawn up on the unit to manage and address the immediate behavioural needs of some very challenging boys.
- I.53** There were clear guidelines for staff and the integration of PACT with the rewards and sanctions scheme worked well. Unit rules were clearly displayed on each landing and formed an integral part of the comprehensive induction provided to all boys.
- I.54** Following incidents of violent behaviour, boys were returned to their landings and kept separate while they were afforded the chance to cool down. Staff remained engaged and we observed good use of the open and informal communal space to keep boys engaged rather than lock them up. Depending on the severity of the incident, the unit manager, landing staff and caseworker determined a course of action.
- I.55** Mediation continued to be a useful option and staff demonstrated a good understanding of potential issues. However, no staff were formally trained in mediation, which was a weakness considering the extent of victimisation on the unit.

Housekeeping point

- I.56** Staff undertaking mediation should be trained in its use. Use of mediation should be monitored.

Rewards and sanctions

Expected outcomes:

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

- I.57** *There were real incentives to achieve the highest level of the rewards and sanctions scheme. Boys on lower levels were helped to improve their behaviour so that they could achieve the higher levels. Target setting was very good and tailored to individual need.*

- I.58** The rewards and sanctions scheme was well publicised and understood by staff and boys on the unit. Staff exercised an appropriate level of discretion when recording comments and took a broad view of the boy's behaviour.
- I.59** Boys we spoke to appreciated the differential in the levels and, in our survey, two-thirds of boys said the levels had motivated them to change their behaviour.
- I.60** Boys transferring from other establishments maintained their status if on the highest gold level or started on the middle silver level. After four weeks, a review confirmed their status or changed it to reflect the information in the regularly completed and thorough computerised staff notes. Every boy was also interviewed at this stage.
- I.61** Boys could apply to be considered for promotion to the gold level or could be recommended by any member of staff. Effective individual targets were set for the few boys on basic level which helped them to address poor behaviour. These were considered at

reviews held after three, seven and 14 days. Depending on progress, boys could have privileges restored up to the silver level before being reviewed and returned to that level. One sanction was removal from dining in association, which was not an appropriate sanction for this age group.

Housekeeping point

- I.62** Removal from dining in association should not be used as a general sanction under the rewards scheme.

Security and disciplinary procedures

Expected outcomes:

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

I.63 *Excellent relationships between staff and boys and the open environment in the unit provided a platform for a high level of dynamic security. Information sharing was excellent and contributed to a safer and more secure environment. The number of adjudications had increased dramatically since the last inspection. Processes were reasonable and boys were appropriately engaged.*

- I.64** Dynamic security was a real strength and relationships on the unit were excellent. All staff we spoke to demonstrated a good level of knowledge of boys in their care. Boys were comfortable and confident in their dealings with staff and there were few of the barriers to communication that we often see.
- I.65** Information sharing was excellent and included the regular use of wing observation books, electronic case notes and regular briefings to all staff. The regular use of formal information reports was effective; over 400 had been submitted in the six months before the inspection which helped to provide a picture of actual and emerging issues on the unit. These reports were routinely analysed by the effective security department and findings were disseminated to unit managers.
- I.66** The physical environment of the unit coupled with the high levels of staff engagement provided excellent levels of active supervision and access to activities was not unnecessarily restricted.
- I.67** In our survey, 21% of boys said it was easy or very easy to get drugs. This was not borne out in search finds or in the mandatory drug testing rate of 0%.
- I.68** The number of adjudications had risen from 135 at the last inspection to nearly 300 in the six months before this inspection. There was no specific monitoring for the unit and no evident reason for the increase. Most adjudications were for threatening or abusive language or behaviour, violence and destroying or damaging property. The most serious cases were referred to the independent adjudicator or to the police. Minor reports conducted by custodial managers continued to be used for less serious breaches.

- I.69** Adjudication procedures were reasonable and documentation was issued and explained where necessary the day before the hearing. An advocacy service was available to all boys and could be requested at any time. Adjudications that we observed were conducted sensitively and sought throughout to engage the boy, with regular checks on his understanding. Documentation that we examined was fully completed and demonstrated a good level of enquiry.
- I.70** A locally published tariff provided guidelines for adjudicators and was consistently applied. We were pleased to see that removal from unit was no longer applied.
- I.71** Adjudication standardisation and review meetings were chaired quarterly by the deputy governor. Adjudication documents were quality checked by the deputy governor and issues were raised at the meeting and with adjudicating governors.
- I.72** Oversight of minor reports on the unit had lapsed and we were unable to identify any quality assurance.

Recommendation

- I.73** **Quality assurance of minor reports should be regularly undertaken and recorded.**

Bullying and violence reduction

Expected outcomes:

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

- I.74** *There were few fights and assaults and these centred on a small group of disruptive boys. Staff intervened quickly to break up fights and worked hard to identify relationships with the potential for bullying or violence.*

- I.75** During the previous six months, there had been 25 assaults, five on staff, and 24 fights between boys. None had been considered serious enough to be recorded as a significant incident. Fights and assaults usually centred on a small group of individuals. Since the previous inspection, the only serious assault in July 2014 had resulted in one boy going to hospital for stitches to a wound. Although fights and assaults did not generally result in physical harm to a boy, they had a disturbing impact on the victims or others who had observed the violence. This was reflected in our survey in which 68% of boys said that they had felt unsafe on the unit, against the comparator of 31% and 41% at the previous inspection. Twenty-three per cent of boys said they felt unsafe at the time of completing the survey, similar to the comparator and the last inspection.
- I.76** Boys we spoke to said they did not feel there was a general threat of violence on the unit, but that there were sometimes issues between individuals, which might result in a fight or assault. This was confirmed by staff who were extremely vigilant in looking out for relationships between individuals which had the potential to escalate into violence. Communication between staff about potential violence or bullying was excellent (see section on victims of bullying and intimidation).

- I.77** Boys said that staff intervened quickly if there was a fight and other boys tended to move away from the incident rather than get involved. There was no indication of group assaults.
- I.78** Shouting out of windows at night remained a problem and in our survey 69% of boys said that it was a problem, similar to the last inspection but against the comparator of 35%. Staff were vigilant, although they had been unable to stop it, and a separate policy had been issued. We heard no shouting on our night visit, but it was recognised that some of the most recent persistent perpetrators had left.
- I.79** During the six months before the inspection, eight bullying incidents had been recorded. As we found at our previous inspection, a few boys were both victims and perpetrators of intimidation. Boys who were assessed to be persistent bullies were managed well through PACT. We scrutinised the three PACT documents which had all been completed to a good standard. Boys were set short-term targets which they had a realistic chance of achieving.

The use of force

Expected outcomes:

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

I.80 *Recorded use of force involving pain compliance had reduced slightly since the last inspection. Force was still used on a few occasions to gain compliance. The quality of written records was reasonable but too many were incomplete.*

- I.81** MMPR (minimising and managing physical restraint) had been implemented since the last inspection. Recorded use of MMPR was higher than the previous control and restraint but we were satisfied that many incidents recorded were very low level and would not have featured under the previous system.
- I.82** Most use of force remained spontaneous and necessary to split up fights. Despite a drive to reduce pain-induced compliance, there were 28 documented incidents involving such techniques. There was clear evidence of attempts to de-escalate incidents and we saw good interventions by staff who defused potentially violent incidents well without the need to use force. In these cases, the boys involved were returned to their landings and given the opportunity to cool off before resuming activities.
- I.83** Documentation that we reviewed was reasonably well completed on the whole. However, important documents such as officer and supervisor reports of their involvement in the incident were often missing and there were few F213 injury to prisoner forms. Video recordings from static CCTV on the unit were not routinely retained for training and evidence purposes. The safeguarding and restraint minimisation committee discussed all aspects of use of force and the long-term monitoring of statistics across the prison, but no specific analysis was conducted by unit managers. Use of force was also discussed at individual safeguarding meetings.
- I.84** Child protection issues arising from use of force were dealt with quickly and thoroughly by the safeguarding team. Individual debriefs with boys involved in incidents took place promptly and were well documented. The boy's parent or carer and youth offending team worker were informed by letter of any use of force incident and were invited to contact the safeguarding team if they wished to discuss any issues.

Recommendations

- I.85 Pain compliance techniques should not be used.**
- I.86 All use of force dossiers should be completed.**

Housekeeping point

- I.87** Video recordings of incidents should be retained with use of force documentation and reviewed for training and evidence purposes.

Separation/removal from normal location

Expected outcomes:

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

I.88 *Few boys had been located on the separation and care unit (SCU) where the environment and regime remained poor. Contact with wing staff for boys who had been held there was good.*

I.89 Only four boys from the unit had been held in the SCU during the six months before the inspection. Three of them had been deemed unsuitable for the unit and moved to other units or transferred out of the establishment. Unit staff maintained daily contact with boys segregated and care planning was continued during their stay.

I.90 The unit was much cleaner than previously and there was now minimal graffiti in cells, but it remained a poor environment for boys. The regime was very limited with regular exercise in the bare, austere yard but access to showers and telephones was provided only every other day. There was no segregation monitoring and review group meeting.

Recommendation

- I.91 Boys in the separation and care unit should be able to have a shower and make a telephone call every day.**

Substance misuse

Expected outcomes:

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

I.92 *Outcomes for boys with substance use problems were reasonably good considering that the drug and alcohol team was not yet up to full strength following the recommissioning of the service. The establishment was focused on supply reduction issues.*

- I.93** The young people's drug and alcohol support service (YPDASS) was provided by Lifeline. Clinical drug treatment was provided by the primary health care provider, Leeds Community Healthcare NHS Trust. Outcomes for boys with substance use problems were reasonably good, and work was prioritised according to assessed need.
- I.94** YPDASS was in a state of transition following recommissioning, and staff recruitment and appointment were still progressing at the time of the inspection. The previously dedicated Keppel YPDASS worker had been required to cover casework on the main Wetherby site during the transition period. As a consequence, YPDASS was not always represented at unit ACCT reviews and other key meetings where boys on the YPDASS caseload were discussed. This was not appropriate in the longer term given that 83% of the Keppel boys were on the YPDASS caseload. In our survey, 25% of boys against the comparator of 6% arrived at the unit with alcohol problems and 63% against the comparator of 34% arrived with drug problems.
- I.95** Clinical treatment was rarely needed but all appropriate protocols were in place. Although no specialist nursing staff worked on site, there was appropriate access to specialist advice from GPs and substance use nurses at nearby HMP Leeds.
- I.96** Some boys told us that drugs were occasionally available on the unit, although tobacco was the more sought-after substance. Nevertheless, the establishment was focused on supply reduction issues with good intelligence gathering, analysis and dissemination.
- I.97** The random positive mandatory drug testing (MDT) rate for the six months to the end of February 2015 was 0%. There had been no suspicion test positives over the same period.

Recommendation

- I.98** **The YPDASS should continue to provide a dedicated worker on the Keppel unit to ensure an adequate level of care for boys who are in most need.**

Section 2. Respect

Residential units

Expected outcomes:

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

2.1 *The quality and cleanliness of accommodation and communal areas were good and the external environment was excellent. Not all boys could wear their own clothes. Telephone and mail facilities were adequate. Boys could make applications easily but were not always provided with a copy.*

2.2 Accommodation was modern and well designed, arranged in four spurs, each holding up to 12 boys in single cells. Communal areas were spacious and bright, with adequate seating, association equipment and tables for eating together. Helpful information and advice on behaviour was displayed around communal areas. High standards of cleanliness and hygiene were maintained.

2.3 Individual cells were well maintained and had curtains at the windows and quilts on beds. Each cell had a television but there was a shortage of kettles across the unit. Boys were required to keep their cells clean and tidy which gave an impression of order and care in the unit. Cells had integral toilets and showers and boys were provided with toiletries to maintain personal hygiene.

2.4 Outdoor areas were impressive. The landscaped grounds were used for association and environmental activities, and were kept in good order. There was no litter around the building.

2.5 Most boys could only wear prison clothes, comprising grey tracksuits. There was an adequate supply of tracksuits in appropriate sizes, and they were exchanged weekly. Boys could wear their own shoes, socks and underwear, but only those on the gold level of the rewards and sanctions scheme could wear their own clothes during association and only if the colours could not be mistaken for staff clothes.

2.6 Access to telephones was good. They were sited in quiet areas of the spurs and had privacy hoods. Arrangements for sending and receiving mail were reasonable and there were no delays in accessing stored property.

2.7 Application forms were available from spur offices and they were logged so that responses could be tracked. Although triplicate forms were available, we were told that they were not always used so boys did not always get a copy of their application. In practice most concerns were dealt with informally by staff.

Recommendation

2.8 All boys should be allowed to wear their own clothes subject to security considerations.

Housekeeping points

- 2.9 Sufficient kettles should be provided so that boys can make hot drinks when locked up.
- 2.10 Boys should be able to retain a copy of any application they have made.

Relationships between staff and children and young people

Expected outcomes:

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

2.11 *Relationships between staff and boys were excellent. Personal officers were effective and there was a good consultation process.*

- 2.12 Relationships between staff and boys were a real strength on the unit. We observed relaxed interactions at all times, modelling respectful and constructive behaviour, with staff habitually referring to boys by their first name. At meal times staff sat with the boys and during association mixed freely with them. In our survey, 83% of boys reported that staff treated them with respect.
- 2.13 While some staff had shirts with their names embroidered, others did not and were not wearing name badges.
- 2.14 Each boy had a personal officer who knew him well. In our survey, 76% against the comparator of 50% said that they saw their personal officer once a week and 86% against 61% said they felt their personal officer tried to help them. Personal officers regularly recorded interactions with boys in NOMIS electronic case notes and these reflected good knowledge of boys in their care.
- 2.15 Although personal officers had access to information from casework meetings and care planning, they did not routinely attend meetings, which was a missed opportunity to enhance the processes.
- 2.16 Each spur had a boy who represented them at the monthly consultation meeting. This was well structured with a standard agenda which addressed all areas of concern. Minutes of the meetings showed that they elicited the views of the boys and communicated information from staff, but actions taken in response to boys' concerns were not recorded. Spur representatives told us the meetings were useful and that staff listened to them.

Housekeeping points

- 2.17 The names of staff should be displayed on their person.
- 2.18 Minutes of consultation meetings should record actions to be taken in response to boys' concerns and the outcomes.

Equality and diversity

Expected outcomes:

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

2.19 *The strategic management of diversity was undertaken for the whole site and there was no specific monitoring of the population on the unit. Management and investigation of discrimination incidents was good. Minority ethnic and Muslim boys were underrepresented on the unit. Arrangements to support and care for boys with learning disabilities were well developed. Foreign national boys were supported as far as possible but they did not have sufficient access to legal advice. Sexual orientation and transgender issues were well managed.*

Strategic management

- 2.20** Diversity and equality issues were managed through the Wetherby equality policy and procedures. There was an updated equality policy which set out strategic aims and how to achieve them.
- 2.21** The unit was represented at the quarterly equality action group meeting for the establishment by a senior manager from the unit and their young person equality representative. Attendance was appropriately representative of establishment departments. Data from the establishment hub on protected characteristics groups were scrutinised and action taken when disadvantage was identified. However, there was no disaggregation of data for the Keppel unit, which limited the usefulness of monitoring information.
- 2.22** Discrimination incident report forms (DIRFs) were readily available and 13 had been submitted during the six months before the inspection. This was more than three times the number at the previous inspection. Most were not complaints by boys of being treated unfairly but were reports by staff of racist behaviour or boys complaining about the behaviour of others.
- 2.23** Investigations were thorough and incidents of discriminatory behaviour were challenged robustly. A good quality control system involved sharing DIRFs with other local prisons and an independent scrutineer at a quarterly meeting. The establishment equality representatives attended when the meeting was hosted at Wetherby and were able to comment on redacted reports.

Recommendation

- 2.24** **In order to help prevent discrimination towards boys from all backgrounds, diversity monitoring specific to the unit should be developed.** (Repeated recommendation 2.23)

Diverse needs

- 2.25** The establishment equality officer interviewed all new arrivals to identify protected characteristics, and assessments carried out by health care and education identified physical and learning disabilities.
- 2.26** At the time of the inspection there was only one boy who identified himself as from a minority ethnic group and only one identified as a Muslim against respective comparators for juvenile establishments of 45% and 23%. It was not clear why the Keppel population was so overwhelmingly white and non Muslim. There was little promotion of ethnic and religious diversity through displays around the unit.
- 2.27** There was one foreign national boy on the unit who spoke good English. Telephone interpreting services were available and staff knew how to access them but had not used them for over a year. There was no longer a dedicated foreign national coordinator in the establishment.
- 2.28** The foreign national boy was under threat of deportation and was being supported in responding to Home Office immigration procedures by the Barnardo's Advocacy Service and his caseworker. However, they were not qualified in immigration law and he did not have specialist legal advice.
- 2.29** In our survey, 68% of boys considered themselves to have a disability which was much higher than the juvenile comparator of 15%. None had identified himself as having physical disabilities, instead identifying learning disabilities or conditions such as attention deficit disorders. There was good support and care planning for boys with disabilities through education and a dedicated learning disability service in health care. No evacuation plans were required.
- 2.30** One boy on the unit was openly gay but four (10%) in our survey reported that they were victimised because of their sexuality. The culture on the unit was tolerant of all sexual orientations. Support was provided to boys who were gay through a local group known as MESMAC (Men Who Have Sex With Men, Action In The Community) which had visited the unit to give a presentation.
- 2.31** At the time of the inspection, there were no transgender boys, but there were procedures to meet their needs, which had been used recently.

Recommendations

- 2.32** **The reasons for the underrepresentation on the unit of boys from minority ethnic and Muslim backgrounds should be investigated.**
- 2.33** **Foreign national boys under threat of deportation should have access to specialist legal advice.**

Housekeeping point

- 2.34** Displays around the unit should reflect religious and ethnic diversity.

Faith and religious activity

Expected outcomes:

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

2.35 *Boys had good access to faith meetings and groups and the chaplaincy offered good support to vulnerable boys.*

2.36 All boys were seen by a member of the chaplaincy within 24 hours of their arrival and asked if they wished to attend any of the faith services available, or have contact with a chaplain of their faith.

2.37 Boys had good access to Christian services and could attend the chapel on a Sunday or Saturday morning or a specific service for the unit on Thursday evening. Muslim boys could only attend Muslim worship in the chapel on Fridays, which we were advised was facilitated by staff if boys wished to attend. Ministers of all recognised faiths were available to boys on request.

2.38 Boys on the unit had access to the same groups as those on the main site, which included the Alpha course, Islamic studies, a course for young fathers and a baptism course for those who were new to the Christian faith. A Christian and personal development group, Challenge plus, was available to boys on the unit. The session we observed was attended by six boys and provided a safe and comfortable environment for discussion and positive engagement.

2.39 The chaplaincy offered good support to vulnerable boys. They regularly attended the daily briefing meetings and were involved in ACCT (assessment, care in custody and teamwork) case management reviews. Boys were very positive about their contact with the chaplaincy and said they were easy to contact.

Complaints

Expected outcomes:

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

2.40 *Boys were told how to make complaints and could do so easily. Responses were helpful and polite but not always timely. The nature of complaints was monitored and reported to the safeguarding meeting. Quality assurance checks were carried out.*

2.41 In our survey, the proportion of boys reporting that it was easy to make a complaint had improved significantly from 24% at the previous inspection to 59%. The full range of complaint forms was freely available in the central hub and there were locked boxes for confidential submission.

- 2.42 Boys were told how to make complaints during induction but were repeatedly encouraged to share concerns with staff for direct resolution.
- 2.43 Responses to complaints were polite and helpful. They addressed the concerns raised and offered help and advice in seeking a resolution. In most cases the complaint had been discussed with the complainant and the response confirmed an agreed resolution. Information about how to pursue a complaint if not satisfied was included with the response but information about contacting the Prisons and Probation Ombudsman was out of date.
- 2.44 Some responses to complaints were not provided in the required timescale and at the time of the inspection one response to a complaint was a week overdue.
- 2.45 Complaints were monitored to identify trends which were reported to the monthly safeguarding meeting. The quality of responses was checked by the equality officer and the governor.

Housekeeping points

- 2.46 Information about contacting the Prisons and Probation Ombudsman should be up to date.
- 2.47 Responses to complaints should be made in the required time frame.

Legal rights

Expected outcomes:

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

- 2.48 *Caseworkers made sure that boys understood their legal rights and status. Arrangements for boys to contact legal advisers were clearer than at the previous inspection. Decisions on early release were taken appropriately.*
- 2.49 Caseworkers explained boys' legal rights and custodial status to them. There were few remanded boys on the unit. Caseworkers checked at their initial meeting if boys wanted to make a bail application, and liaised with community youth offending teams to ensure boys were able to do this.
 - 2.50 The procedure for boys to contact their legal advisers had been clarified in a policy since the previous inspection. Calls were free and confidential and boys could write free letters to their legal advisers. Legal visits arrangements were appropriate.
 - 2.51 Early or late release arrangements for boys serving a detention and training order were explained to them and early release had been used appropriately. There had been no circumstances requiring use of the late release provisions.

Health services

Expected outcomes:

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

2.52 *Health care services were good and the boys we spoke to were satisfied with the quality of health care. Partnership working and clinical governance were good, but there was no separate confidential complaints system. Reception and subsequent health screening were comprehensive and there was useful access to the brain injury link worker service. There was an appropriate range of primary care services and age-appropriate screening programmes. Access to a GP and nurse-led clinics was good, but waiting times to see the optician and dentist were too long. The primary mental health team was still developing but the secondary service provided a very good multidisciplinary service. Access to the child and adolescent mental health services (CAMHS) day unit had sometimes been compromised by unplanned cancellations as a result of custody staff shortages.*

Governance arrangements

- 2.53** Health services were commissioned by NHS England and provided by Leeds Community Healthcare NHS Trust, South West Yorkshire Partnership Foundation Trust, and Lifeline. The health needs assessment was out of date. Partnership working and clinical governance were good and commissioners planned to re-tender health services during 2015.
- 2.54** In our survey, 69% of boys who had used the health services said that the quality was good against the comparator of 49%. This was reflected by those we spoke to. Health care services were provided 24 hours a day with a minimum of a trained nurse and health care assistant on duty at night. The service had experienced staff shortages, which had been managed by using regular agency and bank staff.
- 2.55** Clinical supervision had not been fully implemented and varied, although it was good in mental health. Mandatory training was well managed.
- 2.56** There was a good range of policies and procedures, including access to multi-agency safeguarding procedures and links with the looked-after children team in Leeds. Staff were aware of the systems for the prevention of communicable diseases and the necessary action to take in the event of an outbreak.
- 2.57** The treatment room on the unit was clean and bright, although the floor needed to be sealed to meet infection control standards fully. The emergency equipment, including an automated external defibrillator (AED), in the treatment room was in good order and checked regularly. Health care staff were called and attended all emergencies and an ambulance was called promptly. Most custody staff had received first aid training, including use of an AED. There was a defibrillator in the main office on the unit in a locked box with a key in a break glass container. Some custody staff were unaware of this and who maintained this equipment.
- 2.58** Few complaints had been received. All health care complaints went through the establishment system, which lacked confidentiality and was inappropriate.

- 2.59** Health promotion material was available in the main health centre but limited information was available on the unit.
- 2.60** Boys had access to age-appropriate disease prevention and screening programmes, immunisations and vaccinations. Barrier protection was not available.

Recommendations

- 2.61** There should be a full health needs assessment to ensure that the services commissioned meet the needs of the population.
- 2.62** All staff should have regular recorded clinical and managerial supervision to enable them to work effectively.
- 2.63** The floor in the treatment room should be sealed to meet infection control standards.
- 2.64** Boys should be able to complain about health services through a well publicised confidential system.

Housekeeping points

- 2.65** Relevant, up-to date health promotion information should be available on the unit.
- 2.66** The automated external defibrillator in the main unit office should be easy to access and a robust checking process should ensure the equipment is fit for purpose.
- 2.67** Barrier protection should be available, supported by a policy which specifically considers the needs of boys.

Delivery of care (physical health)

- 2.68** All boys had an initial screening in reception by a mental health nurse to assess any immediate health risks, including mental health and substance misuse. Confidentiality, consent and information sharing were explained and any safeguarding concerns highlighted. A comprehensive secondary physical health screen was usually completed the following day, including an appointment with the GP, and involvement with other agencies before arrival at the unit was identified.
- 2.69** There was good access to a GP and a nurse on the unit, but boys waited too long to see the optician and the dentist.
- 2.70** An appropriate range of nurse-led clinics included a specialist weekly clinic for boys with long-term physical conditions. There were two looked-after children specialist nurses who completed more detailed assessments and liaised with community services. There was a named nurse for the unit.
- 2.71** Four in-patient cells in the main health care centre were used if there was a clinical need and patients had access to a therapeutic regime.
- 2.72** External hospital appointments were well managed, although a few appointments had been cancelled because no custody staff were available.

- 2.73** Clinical records and appointments were maintained electronically using SystmOne and records that we observed were of a good standard.

Recommendation

- 2.74** Boys should have timely access to an optician and dentist.

Pharmacy

- 2.75** Medicines were supplied and dispensed by the pharmacy at HMP Wealstun. A pharmacy technician managed stock and completed some medicine administration. An additional pharmacy technician and a weekly session from a pharmacist had recently started and provided additional capacity for medicine administration and support to the technicians.
- 2.76** Most medicines were supplied as patient named items and were appropriately labelled. An adequate range of emergency stock and a good range of patient group directions⁶ were available. Most medicines were supplied as not in possession and completed risk assessments were kept with the boy's prescription and recorded on SystmOne. Pharmacy issues were discussed at the monthly Leeds prisons integrated governance meeting. There was an in-possession policy, standard operating procedures and an agreed prescribing formulary. Medications for treating minor ailments without a prescription were recorded on SystmOne.
- 2.77** Recording of the refrigerator temperature in the treatment room was robust. Most medicines were stored securely, although the controlled drugs cabinet did not lock properly and required immediate attention. A new cabinet had been ordered.
- 2.78** Date checking was carried out but not documented. Medication returned for disposal and drug alerts were appropriately managed. Controlled drugs registers were compliant with regulations and running balances were audited daily.
- 2.79** Medicine administration took place three times a day from the treatment room at appropriate times and was recorded accurately on prescription charts. Boys refusing on three consecutive occasions were referred to the prescriber for review. We observed controlled drugs being administered by only one member of staff, which did not meet best practice standards. There was good provision for medication on discharge and court appearances.

Recommendations

- 2.80** Pharmacy-led clinics, clinical audit and medication reviews should be provided.
- 2.81** Controlled drugs should be stored in a secure, legally compliant cabinet.

Housekeeping points

- 2.82** Date checks for all medication should be documented.

⁶ Enable the supply and administration of prescription-only medicine by persons other than a doctor or pharmacist, usually a nurse

- 2.83** There should be two staff present during the administration of a controlled drug in line with best practice.

Dentistry

- 2.84** The contract for dental services had transferred to Leeds Community Health NHS Trust at the beginning of March 2015 and sessions had not yet started. There were eight boys on the dental waiting list and the longest wait of six weeks five days was too long (see recommendation 2.74).
- 2.85** The large dental suite in the main health care building was adequately furnished. A separate decontamination room and new flooring had been installed since our last inspection. Contracts for equipment were held by the establishment and NHS England.

Delivery of care (mental health)

- 2.86** The integrated mental health service had recently divided into a primary mental health team, which was a developing service, and a secondary care team provided by a multidisciplinary child and adolescent mental health service (CAMHS) team.
- 2.87** Both mental health teams provided input to the assessment, care in custody and teamwork (ACCT) case management procedure. Primary mental health team nurses completed reception screening and provided support or referred to CAMHS where a greater level of input was required, or the boy was known to a community CAMHS team.
- 2.88** The CAMHS team included a consultant psychiatrist, clinical psychologist, occupational therapist, creative therapist, mental health nurses, a learning disability nurse and a speech and language therapist. Care was delivered from the CAMHS day unit and an assertive outreach model was offered. Care and interventions included further mental health assessment, one-to-one psychological therapies, psychiatrist clinics, early interventions for first episode psychosis, drama therapy and an impressive range of group work, including independent living skills and a cognitive assessment group. Since October 2014, an average of one session a week had been cancelled at short notice because custody staff were not available. This had a negative impact on service delivery to a vulnerable client group.
- 2.89** Joint working with the brain injury link worker service provided by the Disabilities Trust Foundation was effective. The full-time worker used SystemOne to record her interventions with boys, demonstrating a proactive joint approach with health services. Important issues were addressed, including sleep, memory, anger and the behaviours that may have led to criminal activity. Engagement with existing rehabilitation programmes within the prison such as education and training was encouraged.
- 2.90** No boy with serious and enduring mental health problems had been transferred under the Mental Health Act to a specialist secondary or tertiary care unit during the previous six months.
- 2.91** Custody staff received mental health awareness training during induction. The CAMHS team planned to provide future sessions.

Recommendations

- 2.92** Boys should have regular planned interventions without disruption or cancellation because of custody staff levels.
- 2.93** Regular mental health awareness training for custody staff should be established.

Good practice

- 2.94** *The CAMHS provision was impressive. It offered a range of individual and group sessions, including access to speech and language therapy, a learning disability nurse and joint working with the brain injury link worker service.*

Catering

Expected outcomes:

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

2.95 *Food was varied and nutritious. Boys ate their meals together and staff joined them. Boys could not work in the kitchen, which denied them access to training in catering.*

- 2.96** In our survey, 30% of boys said that the food was good or very good against the comparator of 16%. Food that we tasted during the inspection was appetising and served at the correct temperature. Boys we spoke to at mealtimes told us that they liked the food.
- 2.97** Boys were consulted about food at the wing representatives meeting and in the twice-yearly food survey. They were encouraged to use the food comments books on the servery to make their views known to catering staff.
- 2.98** Cereal and toast were served for breakfast, lunch was a sandwich or salad and there was a hot evening meal. The menu was on a four-week cycle with a choice of four items at lunch and five in the evening. The menu was marked with symbols to help boys with reading difficulties choose suitable food. Vegetarian and religious diets were catered for.
- 2.99** All meals were taken at tables on the spur and staff ate with the boys, which facilitated communication and understanding, and encouraged social skills.
- 2.100** There was one servery for the unit which was clean and well supervised during the serving of meals. Servery workers had received food hygiene training and wore appropriate clothes.
- 2.101** Food was cooked in the establishment kitchen, which was well organised and had passed the required hygiene inspections. However, the building was showing signs of wear with some peeling paint and a damaged floor, which were potential hygiene risks.
- 2.102** Boys working in the kitchen could achieve catering qualifications but no boys from the unit were employed, which deprived them of a training opportunity.

Recommendations

- 2.103** The fabric of the kitchen building should be improved to remove potential hygiene hazards such as the paintwork and damaged floor.
- 2.104** Keppel unit boys should be given the opportunity to work and train in the kitchen.

Purchases

Expected outcomes:

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

2.105 *Arrangements for buying personal items were efficient, but some boys still had to wait too long to receive their first order.*

- 2.106** On arrival, boys were usually given a pack containing biscuits, snacks and fruit drink free of charge, and £4 free pin phone credit. However, the establishment had run out of these packs at the time of the inspection and boys only received toiletries to see them through the first few days and phone credit (see section on early days in custody). A full canteen order could only be placed once a week and some boys waited up to 10 days to receive their first full order. Goods were delivered on Fridays in sealed bags and handed individually to boys.
- 2.107** The range of items on the canteen list was good and boys could suggest changes to the choice available at unit consultation meetings. Boys were able to order newspapers and magazines and could make larger purchases from catalogues. One boy described how he had learnt to manage his money during his time on the unit, and help with doing this was available from staff.

Recommendation

- 2.108** Boys should be able to place an order with the prison shop within 24 hours of their arrival. (Repeated recommendation 2.72)

Section 3. Purposeful activity

Time out of cell

Expected outcomes:

Children and young people spend most of their time out of their cell, engaged in activities such as education, leisure and cultural pursuits, seven days a week.⁷

3.1 *Time out of cell was good. There was daily access to exercise and association and there were enough activities to occupy boys during free time.*

3.2 Time out of cell was good at about 10 hours during the week and seven hours at weekends. The core day started at 8am and finished at 7.30pm during the week with an earlier lock up at 5.30pm at weekends. There was a real drive to ensure boys were up and ready for the daily regime, which usually kept them fully occupied. We observed very little slippage in regime times and boys told us that staff were 'on top' when it came to getting them out for the day.

3.3 Association and exercise periods were scheduled each day and, where weather conditions prevented access to outside exercise, additional association was allowed. In our survey, 58% of boys said that they could go outside every day compared with 84% at the previous inspection. This reflected cancellation of exercise periods because staff were redeployed from the unit to the main establishment in the evenings.

3.4 The boys who undertook outside activities such as environmental studies and care of the birds of prey were very enthusiastic about their activities and valued the opportunities they were given.

3.5 Association was timetabled on weekday evenings and during the day at weekends. In our survey, 97% of boys said they had association each day against the comparator of 65%. There was a good range of activities on all the wing spurs, which were maintained to a high standard and were well used during association.

3.6 During our roll checks no boys were locked up. There were occasions during the week when individuals were locked up but this was usually for very short periods during a short-term requirement for the landing to be cleared.

Recommendation

3.7 All boys should be afforded the opportunity to exercise in the open air daily.

⁷ Time out of cell, in addition to formal 'purposeful activity', includes any time children and young people are out of their cells to associate or use communal facilities to take showers or make telephone calls.

Education, learning and skills

Inspection of the provision of education and educational standards, as well as vocational training in YOIs for young people, is undertaken by the Office for Standards in Education (Ofsted⁸) working under the general direction of HM Inspectorate of Prisons. For information on how Ofsted inspects education and training see the Ofsted framework and handbook for inspection.

Expected outcomes:

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

3.8 *The overall assessment of learning, skills and work was good. There were sufficient education, vocational training and activities to occupy all boys for most of the core day. The range of learning, skills and work activities was adequate to meet the needs of most boys. However, there were not enough progression opportunities to higher levels for boys serving longer sentences. The quality of the management of learning, skills and work and the achievements of boys were also good. Lessons were planned well to meet the needs of all learners and allowed them, including the more able, to make at least the progress expected of them. The library provided a satisfactory service and was well used by most boys.*

3.9 *Ofsted made the following assessments about the learning and skills and work provision:*

Overall effectiveness of learning and skills and work: Good

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

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

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

Management of education and learning and skills

3.10 The management of learning, skills and work was good. The education provision by The Manchester College was good. A particularly effective strategy for the management and development of the service ensured that all boys received high-quality education and training. Enthusiastic managers and staff displayed very high expectations for the development of each

⁸ Ofsted is the Office for Standards in Education, Children's Services and Skills. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.

boy's educational, personal and social skills by providing good care and support, which motivated learners and helped them to succeed.

- 3.11 Comprehensive plans were in place for the delivery of a new curriculum from August 2015, as well as further extending the range and number of education and training opportunities.
- 3.12 The coordination and ordering of all activities required improvement to prioritise attendance at education and training. Frequent interruptions to lessons were caused by the late arrival and early departure of many learners to attend a range of appointments throughout the core day.
- 3.13 Quality improvement processes were good and had supported some improvements while helping to maintain previously high rates of achievement and good quality teaching. The Manchester College had well-established and robust arrangements to observe lessons and collect the views of boys. However, the Wetherby self-assessment report did not focus sufficiently on the experiences of boys in the Keppel unit. Managers' analysis and use of data were inadequate to identify trends in achievement and areas of underperformance.

Recommendations

- 3.14 **A robust prison self-assessment process should identify areas for improvement in the unit.**
- 3.15 **Analysis and use of data should allow for improved identification and investigation of trends and for effective evaluation of provision.**

Housekeeping point

- 3.16 The coordination and ordering of all activities should give priority to attendance in education and training.

Provision of activities

- 3.17 There were sufficient education, training and activity places to occupy all boys for the core working day. Boys were allocated to a range of education and training for half the day and prison activities for the remainder.
- 3.18 The range of activities met the needs of most boys and was good for those serving short sentences. There was a focus on advancing learners from entry level to level one qualifications in information communication technology (ICT), art, English and mathematics and personal and social development (PSD). There were few progression routes for boys with longer sentences. Accredited vocational courses included level one qualifications in hospitality and catering (see paragraph 2.102), using hand tools and bird care. Very few boys attended the education department in the main establishment or worked towards GCSE qualifications.
- 3.19 A particularly good range of enrichment activities was provided, including the Duke of Edinburgh award scheme, Army cadets and angling skills, which boys found motivating. Allocation to activities was swift and fair. Induction to education was effective.

Recommendation

- 3.20** Boys, especially those serving longer sentences, should have more opportunities to progress to qualifications above level one, including a wide range of GCSEs.

Quality of provision

- 3.21** The quality of teaching, learning and assessment was good. Very productive relationships had been developed between officers and teaching staff in classrooms. The mature interactions they demonstrated and their respectful conversations provided good examples for boys to follow.
- 3.22** Teachers consistently planned lessons very well to deliver the necessary support to meet the wide range of abilities in each classroom. In a particularly effective English lesson, boys compared a television news report with newspaper articles to demonstrate their understanding of different styles of writing. Extension activities were used well, particularly in English and mathematics lessons, to ensure that all learners, including the more able, were consistently engaged and made at least appropriate progress. In a PSD lesson, boys used their arithmetic skills to calculate the alcohol content in a range of drinks and discussed the health implications of alcohol misuse. Boys caring for a range of birds, including large birds of prey, were given very clear instruction and close supervision. They rapidly became absorbed in understanding the care needs of the birds and demonstrated safe working practices.
- 3.23** Additional individual learning support for boys with low-level literacy and numeracy skills was of high quality, providing the right balance of support and challenge. Boys clearly enjoyed their learning and felt more confident about taking external examinations as a result.
- 3.24** Individual learning plans (ILPs) focused on the qualification objective and contained few specific, measurable goals for the development of personal, social and vocational skills. The wide range of skills acquired by boys through their education and training were not always recorded.
- 3.25** An appropriate range and number of learning resources were available in classrooms. However, information learning technology was not always used enough to enliven teaching or encourage learners to demonstrate their learning. The virtual campus⁹ was not yet fully established or used by learners.
- 3.26** The promotion of equality and diversity in lessons was inadequate. There were few relevant wall displays in the education department or discussion topics in lessons. Some displays were out of date and displays celebrating learners' own achievements were limited.

Recommendation

- 3.27** There should be effective use of information learning technology, including the virtual campus, to help teachers deliver more interactive learning.

Housekeeping points

- 3.28** Individual learning plans should set precise learning goals and targets which measure the progress boys make and accurately record the skills they develop.

⁹ Enables prisoners to have internet access to community education, training and employment opportunities

- 3.29** Equality and diversity should be promoted in lessons and around the education department.

Education and vocational achievements

- 3.30** Achievement rates in ICT, art, English for speakers of other languages (ESOL), English and mathematics courses were high during 2013 to 2014. No learners had yet achieved full qualifications on the environmental and catering vocational training courses.
- 3.31** Boys developed outstanding life skills such as working with others, self-esteem and communication skills through the innovative range of environmental courses and projects. They clearly understood how taking care of birds of prey and small animals helped them to think about their personal relationships. Many were able to express how these insights and skills could be used to improve their social and family relationships after release.
- 3.32** Boys on English courses developed their reading skills significantly and those on art and catering courses produced work of a good standard. However, there was little recording of the skills demonstrated. Boys had little access to qualifications above level one (see paragraph 3.18 and recommendation 3.20).
- 3.33** Punctuality was poor in a number of classes and attendance required improvement. Lessons were frequently interrupted by learners arriving late or leaving early (see paragraph 3.12 and housekeeping point 3.16).

Library

- 3.34** The library, provided by Leeds library and information services, offered a reasonable service. It was staffed by a library manager, a library assistant and one orderly. The library was open for Keppel unit boys on Saturday mornings. Use of the library was high despite the fact that about one-third of arrivals had not completed an induction to the library services.
- 3.35** The range and quality of materials in the small library was sufficient for the population of the unit. Resources included fictional and non-fictional books with a range of materials for boys with low literacy skills and speakers of other languages. Current Prison Service Orders and up-to-date legal texts were available on request from the library staff.
- 3.36** The library had two computers but, with no access to the internet or a virtual campus, these were rarely used by the boys.
- 3.37** Reading competitions such as the six-book challenge were popular, as were visits from popular authors to promote reading. Library staff worked well with education staff to promote enrichment activities and produced visual displays and reading materials relevant to them.
- 3.38** Insufficient data were collected and analysed to monitor the use of library services by all groups of boys (see recommendation 3.15).

Housekeeping point

- 3.39** All boys should complete an induction to the library services.

Physical education and healthy living

Expected outcomes:

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

3.40 *The range of physical education (PE) facilities was good, although a number of maintenance issues required attention. PE staff were well qualified. An appropriate range of activity sessions was planned for all boys, with a good range of team games offered. The department was used well by most boys. Promotion of healthy living was good. There was effective working with health care and substance misuse staff and a range of relevant PE courses was offered.*

3.41 PE provision was good and all boys had access to regular recreational PE sessions. PE staff were well qualified and staff levels were adequate. A good range of team games and activities, including hockey, basketball and volleyball, were offered and the appropriate amount of activity was planned for all boys.

3.42 Before using the PE facilities in the department and the residential block, each boy received a detailed induction, which included a suitable health and fitness assessment.

3.43 The promotion of healthy living and lifestyles was good. A good range of relevant, successful courses was offered in health and safety, diet and nutrition and first aid. PE staff worked well with health care and substance misuse staff to provide boys with specific specialist support.

3.44 There were good partnerships with community agencies to encourage boys to take up sport. Staff from Leeds United visited regularly to provide training in football skills. Candidates for the Duke of Edinburgh award scheme and Army cadets received very good guidance and support to achieve their required performance standards.

3.45 A number of maintenance issues required attention, including repairs to the floodlights for the outdoor pitch and the roof of the temporary education building. Boys had no access to drinking water in the gym.

Recommendation

3.46 **All necessary repairs should be carried out to ensure the PE facilities are well maintained and drinking water should be made available in the gym.**

Section 4. Resettlement

Pre-release and resettlement

Expected outcomes:

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

- 4.1** *The reducing re-offending strategy for the unit was reviewed each year and based on an annual needs analysis. The strategy now included boys who had sexually abused others. Caseworkers provided good support to the boys and their frequently complex resettlement needs continued to be identified and addressed early. Boys were being encouraged to apply for release on temporary license (ROTL) with little realistic chance of achieving it.*
- 4.2** A resettlement needs analysis was carried out annually for Keppel unit and used to inform the reducing re-offending strategy, which was specific to the unit. The strategy now appropriately included boys who had sexually abused others. Coverage of boys serving indeterminate sentences was appropriate. Work on transition arrangements for boys who moved to a main site unit or an adult prison was improving, although the strategy needed to be complemented by a clear policy for staff to use. The establishment reducing reoffending strategy meeting oversaw implementation of the strategy. Attendance was good, including by unit managers, but no specific discussion about the unit was recorded in the minutes.
- 4.3** There were no data to facilitate the follow up of resettlement and reoffending outcomes for boys after they left the unit. In common with the main site, attempts to secure data from partner agencies had not been successful, and staff constraints had limited the ability of the casework team to attend initial reviews in the community after release. Managers were establishing good links with relevant resettlement consortia which could aid the follow up of boys after release.
- 4.4** The delivery of reducing re-offending services continued to be coordinated well by the dedicated unit caseworkers. One of the team had been temporarily moved to a casework role on the main site in response to recent staff shortages. The Keppel population was shared between the three remaining caseworkers, each having a mixture of sentenced, remanded and long-term sentenced boys. Caseworkers spent a lot of time on the unit and were well known to the boys they worked with.
- 4.5** Boys were allocated to a caseworker quickly after arrival. Risk and resettlement needs were identified quickly and there was an appropriate focus on preventing re-offending. In our survey, all boys said they had a caseworker and 60% against the comparator of 43% said their caseworker had helped to prepare them for release. More boys at Keppel than the comparator said they were anticipating a problem across most resettlement pathways and 74% compared to 50% elsewhere said they had done something at Keppel that they thought would make them less likely to offend in the future. Early release provisions were properly applied for boys serving a detention and training order.
- 4.6** Review meetings and care plan meetings led by caseworkers took place regularly and plans for release were discussed. Some boys had to move to a young adult prison during their

sentence and this was discussed with them from an early stage. Links with receiving establishments were improving and moves were planned so that boys who would benefit from it spent some time on the main Wetherby site before their move. Moves to the main site required approval from the Youth Justice Board following multidisciplinary discussion of needs.

- 4.7** The procedure for assessing boys eligible for ROTL remained very good. The number of boys who achieved ROTL was lower than at the previous inspection – two boys in the preceding six months. We were concerned that expectations were being unrealistically raised for some boys who had very little chance of being approved for ROTL but nonetheless were encouraged to apply. ROTL was linked to sentence plan targets and placements included community reparation work, appointments to view possible accommodation in the community, and family contact.

Recommendations

- 4.8 Resettlement and reoffending outcomes for boys who leave the unit should be systematically collected.** (Repeated recommendation 4.8)
- 4.9 A transitions policy should be developed for the unit.**

Housekeeping point

- 4.10** Boys should be given realistic information about their likelihood of securing ROTL.

Training planning and remand management

Expected outcomes:

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

- 4.11** *Training and remand management planning arrangements were good, but review meetings were not sufficiently multidisciplinary. Public protection arrangements were good, as was the management of the small number of boys on indeterminate sentences. Identification of boys who had looked-after status was efficient and they received good support from the prison social workers.*

- 4.12** Caseworkers took the lead on managing boys' training or remand management plans. Each boy was allocated to a caseworker on arrival and timely introductory meetings took place. They acted as first point of contact for family and carers. Initial plans were developed within the appropriate timescale and documentation that we looked at indicated that boys had individual plans relevant to their needs. More boys than at comparator establishments reported knowing that they had a plan (73% against 39%) but a lower proportion said they understood their targets (84% against 95%). Boys were not given a copy of their own plans and targets. Targets were followed up at subsequent reviews. Boys on remand had training plans and access to the same services as sentenced boys. Training and remand planning meeting arrangements were reinforced by regular care planning reviews, although these were no longer sufficiently multidisciplinary (see section on safeguarding).

- 4.13** Training planning and remand management meetings were timely, with good attendance by community youth offending teams (YOTs). Staff who had important roles to play in helping boys to work towards their training or remand plan targets did not routinely attend the meetings. The sharing of information about boys living on the unit was good and was aided by some very good electronic case management notes. Family members were encouraged to attend meetings, with community YOTs often facilitating this. In meetings that we observed, boys were encouraged to participate and their contribution was taken seriously.

Housekeeping points

- 4.14** Boys should be given a copy of the targets they are working towards.
- 4.15** Staff from all relevant departments should be represented at training planning and remand management reviews.

Public protection

- 4.16** The public protection policy was comprehensive and up to date. Boys who might present a risk to the public were identified in reception and records were checked by administrative staff in the casework team. Boys were placed on a database and discussed at the next interdepartmental risk management meeting (IDRM); this meeting took place monthly and was well attended. Minutes showed that boys considered to be a risk were discussed fully, including consideration of possible release arrangements. Statutory agencies were contacted if concerns were raised.
- 4.17** Boys who needed to be considered under multi-agency public protection arrangements (MAPPAs) were identified, and reports submitted to MAPPAs meetings. Caseworkers attended meetings for boys for whom the highest level of concern had been identified.
- 4.18** Proper attention was paid to the need for restrictions on contact that some boys had with people outside the establishment. Decisions on contact were made at the IDRM meeting, and restrictions were imposed on mail, telephone contact and visits when it was deemed necessary. These restrictions were kept under regular review and lifted when it was felt that the risk had reduced.

Indeterminate sentence young people

- 4.19** The number of boys serving indeterminate sentences was low. At the time of the inspection, one boy was serving an indeterminate sentence for public protection. Training planning arrangements for boys serving indeterminate sentences were comprehensive and the processes to manage lifer documentation and parole applications were efficient and thorough.
- 4.20** Most boys serving indeterminate or long-term sentences moved to a young adult establishment at the age of 18. Across the Wetherby site, the management of this transition had progressed since the last inspection. Good links had been made with receiving establishments and care was taken to identify receiving establishments that would meet the boys' needs. In a few cases boys serving longer sentences had been able to remain at Keppel beyond their 18th birthday to maintain continuity of offending behaviour work before release.

Looked-after children

- 4.21** At the time of the inspection, 22 boys were or had been in the care of their local authority. Since the previous inspection, the range of boys with whom the three prison-based social workers worked had been extended to include children in need, as well as looked-after children. Securing suitable release accommodation for boys with looked-after status was often difficult.
- 4.22** The social work team identified relevant cases on admission and contacted the appropriate local authorities to advise them that a boy they were responsible for had been admitted to custody. The team reminded local authorities of their obligation to carry out regular reviews of the boy's care while he was in custody and to provide financial support. The social workers maintained close links with their community colleagues and continued to try to ensure that looked-after children received appropriate reviews by their local authority while in custody. In most cases these arrangements worked well, but not all boys received the regular financial support they were entitled to. This left them with less money to spend on personal items and telephone credit than most other boys, and increased the risk of bullying. A review we observed was very well attended by community professionals and relevant unit workers. All aspects of the boy's care, preparation for his move to a young adult establishment after his 18th birthday and subsequent release were discussed.

Reintegration planning

Expected outcomes:

Children and young people's resettlement needs are addressed prior to release.

An effective multi-agency response is used to meet the specific needs of each individual young person in order to maximise the likelihood of successful reintegration into the community.

4.23 *Reintegration planning remained effective, although obtaining suitable accommodation for some boys remained an issue and careers advice was not available. Health care and drugs and alcohol planning for boys after release was good and some improvements had been made to work on finance, benefit and debt. Improvements to the visits facilities had started and family days had been reintroduced. There was an appropriate range of programmes but, following a change in contractual arrangements, some boys with a sexual element to their offending had been left for several months without the support they required. A new service was in place by the time of the inspection.*

- 4.24** Boys had appropriate release plans prepared by their community YOT worker. These were discussed during training planning meetings so that boys were prepared for their release conditions.
- 4.25** The In2Out mentoring programme provided mentors to boys in custody and after release. In2Out was delivered by a voluntary organisation, and was extending its network of volunteer mentors to reflect the wide range of geographic areas that boys returned to on release.
- 4.26** Practical release arrangements remained good; boys had access to their money, were given a holdall for their belongings and could have new clothes handed in or have their existing clothes washed ready for release. All boys were expected to be met by a responsible person at the gate on the day of their release to take them to their accommodation; this was organised at training planning meetings.

Accommodation

4.27 In our survey, 42% of boys said they thought they would have a problem with finding accommodation when they were released against the comparator of 24%. Accommodation needs were assessed early and updated throughout the boy's custody. Despite this, in too many cases suitable accommodation was only identified very close to release dates. We were told that boys with looked-after status, and those who were not looked after and turned 18 while in custody, had particular problems with accommodation if they were not returning to family. In one case, an 18 year old had his early release delayed because there was no suitable accommodation for him to be released to. The needs of hard-to-place boys were escalated as required with the support of the on-site social workers and advocates, and legal input was obtained when needed.

Education, training and employment

4.28 The provision of information, advice and guidance by The Manchester College was inadequate. Less than two-thirds of new arrivals were interviewed to establish clear learning objectives while in the unit. Gaps in staffing meant that there had been nobody to deliver careers advice for six months before the inspection, which significantly restricted the level of service provided. Nevertheless, teaching staff provided informal careers advice and guidance to boys who wished to progress on release.

4.29 Learners who attended employment-related courses received some training in money management, but there was no specific pre-release programme to prepare all boys for their release.

Recommendations

4.30 **The College should provide sufficient staff to ensure that boys have appropriate access to information, advice and guidance throughout their custody.**

4.31 **All boys should have access to a pre-release programme to help them develop and focus on plans for release.** (Repeated recommendation 4.34)

Health care

4.32 Pre-release arrangements for boys were good. There was effective liaison with community services to ensure that boys with serious and enduring mental health issues continued to be managed appropriately on release. Boys were given medication appropriately and care was coordinated with community agencies as required.

Drugs and alcohol

4.33 The involvement of the young people's drug and alcohol support service (YPDASS) senior practitioner ensured the timely delivery of release plans and referrals to community services. Harm reduction and other substance use awareness information was given during release planning sessions.

4.34 YPDASS provided a meet-and-greet service at family days on the unit. Family activities were organised, and family members could receive substance misuse information and learn about the work done with boys where appropriate.

Finance, benefit and debt

- 4.35** Boys were able to open a bank account with Leeds City Credit Union, which was an improvement since the previous inspection. Boys who would benefit from having an account were encouraged to consider opening one. Effective arrangements were in place with Job Centre Plus to make benefits appointments for boys who needed one after their release. Some money management advice was available. Social workers helped looked-after children to manage their finances while in custody and other boys received informal advice from caseworkers and residential staff.

Children, families and contact with the outside world

- 4.36** Information on boys' home areas showed that only 14 were within 50 miles of home and two were 200 miles from home. In our survey, 28% of boys said they had at least one visit a week. Boys had daily access to telephones, but there was no other technology, such as Skype, to supplement family contact. A local visitors' scheme operated for boys who did not receive other visits.
- 4.37** Family days had not taken place for four to five months but had been reintroduced in February 2015. Boys were positive about the family visits. A course developed and delivered by a member of the psychology department, 'Family Talk', continued to help boys to work with their families to repair their relationships and to talk to their families in a safe environment about their offending. Two boys were taking part at the time of the inspection.
- 4.38** Domestic visits were held on Wednesday afternoon and evening, Saturday morning and afternoon and Sunday afternoon. The Wednesday evening session had recently been reinstated and lasted 75 minutes. Other visits sessions lasted two hours. Visits could be booked by telephone or email. Visits entitlements were included in the information pack sent to parents or carers, usually within a day of a boy arriving at the unit. Visiting times in the pack were out of date. The visits entitlement for sentenced boys was two weekend visits and one midweek visit a month. Remanded boys were inappropriately limited to one visit a week.
- 4.39** Boys from the unit attended the same visits sessions as boys from the main site, with supervision by unit staff. Specific visits sessions for the unit had been tried since the previous inspection but had not been well attended. The visits hall was being refurbished and was clean and tidy, as were the visitors' toilets. There was a small unsupervised children's play area with some toys. The tea bar did not open for weekday visits when only vending machines were available. The absence of hot food was problematic given the distance many visitors had to travel and the lack of alternative facilities nearby. Regular visitor forums provided useful feedback on how visitors felt family contact arrangements could be improved.
- 4.40** The visits session that we observed was relaxed and started on time, although we were told this was not always the case. Staff observation during visits was not intrusive. Boys wore their prison issue clothes for visits as a means of identification. Boys whose visitors did not arrive within 10 to 15 minutes of the start of visits were asked to confirm contact numbers for their visitors so staff could check if they were on their way.

Recommendations

- 4.41** **Technology such as Skype should be used to help boys maintain contact with their families.**

- 4.42 There should be no limit on the number of visits remanded boys can receive.**
- 4.43 All visitors should have the opportunity to buy hot food.**

Attitudes, thinking and behaviour

- 4.44** Since the previous inspection, the national contract with The Lucy Faithfull Foundation for assessment and treatment of boys who had sexually abused others had been terminated. A gap of six months had ensued before a new provider was identified and there had then been delays in getting necessary clearance for the workers. During this time, some boys on the unit had not received the support they needed to address their offending behaviour, nor had the risk they posed been addressed in their sentence plans. The situation had improved and, at the time of the inspection, boys were being assessed and were working with the new service.
- 4.45** Boys continued to have access to JETS (juvenile estate thinking skills), the nationally accredited programme for young people, and two locally approved programmes, ACCESS and TEAM. ACCESS focused on problem solving, developing communication and assertiveness skills and goal setting, and TEAM was an emotional control programme. Three TEAM and three ACCESS programmes had been run for boys on Keppel during the year before the inspection. Boys from the unit were participating in a JETS programme with boys from the main site at the time of the inspection.
- 4.46** Caseworkers referred boys to these programmes. They were then assessed by the psychology department and, if deemed suitable, were recommended to start a programme. Alternative interventions were available for boys who were not able to take part in a programme, and several undertook one-to-one work with psychologists, social workers and mental health specialists. Reports on boys who had completed a programme were available to caseworkers and community YOT workers.

Recommendation

- 4.47 The Youth Justice Board should ensure that future gaps in the provision of necessary services and interventions should not occur as a result of changes to contractual arrangements.**

Section 5. Recommendations and housekeeping points

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

Recommendation

To the Youth Justice Board

Reintegration planning

- 5.1** The Youth Justice Board should ensure that future gaps in the provision of necessary services and interventions should not occur as a result of changes to contractual arrangements. (4.47)

Recommendation

To the Youth Justice Board and the governor

Equality and diversity

- 5.2** The reasons for the underrepresentation on the unit of boys from minority ethnic and Muslim backgrounds should be investigated. (2.32)

Recommendation

To the escort contractor

Courts, escorts and transfers

- 5.3** Boys should not be transported with adults and should arrive at the establishment before 7pm. (1.5)

Recommendations

To the governor

Early days in custody

- 5.4** The enhanced observation of new arrivals should meet all the needs of boys new to the unit. (1.15)

Care and protection of children and young people

- 5.5** The care planning process should ensure that there is ongoing assessment and review of boys' needs and that these needs are addressed by targeted services. Care plans should be readily understood by boys and staff. (1.26)
- 5.6** Key staff should be trained to handle a disclosure of abuse made to them by a child. (1.34)
- 5.7** The gated cell should be replaced by a care suite suitable for vulnerable boys. (1.48)

5.8 The safeguarding committee should scrutinise the use of anti-ligature clothing and constant observations, particularly in the gated cell. (1.49)

5.9 All unit staff should be trained in managing self-harm incidents. (1.50)

Behaviour management

5.10 Quality assurance of minor reports should be regularly undertaken and recorded. (1.73)

5.11 Pain compliance techniques should not be used. (1.85)

5.12 All use of force dossiers should be completed. (1.86)

5.13 Boys in the separation and care unit should be able to have a shower and make a telephone call every day. (1.91)

Substance misuse

5.14 The YPDASS should continue to provide a dedicated worker on the Keppel unit to ensure an adequate level of care for boys who are in most need. (1.98)

Residential units

5.15 All boys should be allowed to wear their own clothes subject to security considerations. (2.8)

Equality and diversity

5.16 In order to help prevent discrimination towards boys from all backgrounds, diversity monitoring specific to the unit should be developed. (2.24)

5.17 Foreign national boys under threat of deportation should have access to specialist legal advice. (2.33)

Health services

5.18 There should be a full health needs assessment to ensure that the services commissioned meet the needs of the population. (2.61)

5.19 All staff should have regular recorded clinical and managerial supervision to enable them to work effectively. (2.62)

5.20 The floor in the treatment room should be sealed to meet infection control standards. (2.63)

5.21 Boys should be able to complain about health services through a well publicised confidential system. (2.64)

5.22 Boys should have timely access to an optician and dentist. (2.74)

5.23 Pharmacy-led clinics, clinical audit and medication reviews should be provided. (2.80)

5.24 Controlled drugs should be stored in a secure, legally compliant cabinet. (2.81)

- 5.25** Boys should have regular planned interventions without disruption or cancellation because of custody staff levels. (2.92)
- 5.26** Regular mental health awareness training for custody staff should be established. (2.93)

Catering

- 5.27** The fabric of the kitchen building should be improved to remove potential hygiene hazards such as the paintwork and damaged floor. (2.103)
- 5.28** Keppel unit boys should be given the opportunity to work and train in the kitchen. (2.104)

Purchases

- 5.29** Boys should be able to place an order with the prison shop within 24 hours of their arrival. (2.108)

Time out of cell

- 5.30** All boys should be afforded the opportunity to exercise in the open air daily. (3.7)

Education, learning and skills

- 5.31** A robust prison self-assessment process should identify areas for improvement in the unit. (3.14)
- 5.32** Analysis and use of data should allow for improved identification and investigation of trends and for effective evaluation of provision. (3.15)
- 5.33** Boys, especially those serving longer sentences, should have more opportunities to progress to qualifications above level one, including a wide range of GCSEs. (3.20)
- 5.34** There should be effective use of information learning technology, including the virtual campus, to help teachers deliver more interactive learning. (3.27)

Physical education and healthy living

- 5.35** All necessary repairs should be carried out to ensure the PE facilities are well maintained and drinking water should be made available in the gym. (3.46)

Pre-release and resettlement

- 5.36** Resettlement and reoffending outcomes for boys who leave the unit should be systematically collected. (4.8)
- 5.37** A transitions policy should be developed for the unit. (4.9)

Reintegration planning

- 5.38** The College should provide sufficient staff to ensure that boys have appropriate access to information, advice and guidance throughout their custody. (4.30)

- 5.39** All boys should have access to a pre-release programme to help them develop and focus on plans for release. (4.31)
- 5.40** Technology such as Skype should be used to help boys maintain contact with their families. (4.41)
- 5.41** There should be no limit on the number of visits remanded boys can receive. (4.42)
- 5.42** All visitors should have the opportunity to buy hot food. (4.43)

Housekeeping point

To the escort contractor

Courts, escort and transfers

- 5.43** All boys having journeys of four hours or more should be provided with refreshments. (1.6)

Housekeeping points

To the governor

Early days in custody

- 5.44** Reception packs should be available for all new arrivals. (1.16)
- 5.45** First night accommodation should be adequately equipped. (1.17)

Care and protection of children and young people

- 5.46** The monthly safeguarding meeting should discuss the Keppel unit report. (1.27)

Behaviour management

- 5.47** Staff undertaking mediation should be trained in its use. Use of mediation should be monitored. (1.56)
- 5.48** Removal from dining in association should not be used as a general sanction under the rewards scheme. (1.62)
- 5.49** Video recordings of incidents should be retained with use of force documentation and reviewed for training and evidence purposes. (1.87)

Residential units

- 5.50** Sufficient kettles should be provided so that boys can make hot drinks when locked up. (2.9)
- 5.51** Boys should be able to retain a copy of any application they have made. (2.10)

Relationships between staff and children and young people

- 5.52** The names of staff should be displayed on their person. (2.17)

- 5.53** Minutes of consultation meetings should record actions to be taken in response to boys' concerns and the outcomes. (2.18)

Equality and diversity

- 5.54** Displays around the unit should reflect religious and ethnic diversity. (2.34)

Complaints

- 5.55** Information about contacting the Prisons and Probation Ombudsman should be up to date. (2.46)
- 5.56** Responses to complaints should be made in the required time frame. (2.47)

Health services

- 5.57** Relevant, up-to date health promotion information should be available on the unit. (2.65)
- 5.58** The automated external defibrillator in the main unit office should be easy to access and a robust checking process should ensure the equipment is fit for purpose. (2.66)
- 5.59** Barrier protection should be available, supported by a policy which specifically considers the needs of boys. (2.67)
- 5.60** Date checks for all medication should be documented. (2.82)
- 5.61** There should be two staff present during the administration of a controlled drug in line with best practice. (2.83)

Education, learning and skills

- 5.62** The coordination and ordering of all activities should give priority to attendance in education and training. (3.16)
- 5.63** Individual learning plans should set precise learning goals and targets which measure the progress boys make and accurately record the skills they develop. (3.28)
- 5.64** Equality and diversity should be promoted in lessons and around the education department. (3.29)
- 5.65** All boys should complete an induction to the library services. (3.39)

Pre-release and resettlement

- 5.66** Boys should be given realistic information about their likelihood of securing ROTL. (4.10)

Training planning and remand management

- 5.67** Boys should be given a copy of the targets they are working towards. (4.14)
- 5.68** Staff from all relevant departments should be represented at training planning and remand management reviews. (4.15)

Good practice

Health services

- 5.69** The CAMHS provision was impressive. It offered a range of individual and group sessions, including access to speech and language therapy, a learning disability nurse and joint working with the brain injury link worker service. (2.94)

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy chief inspector
Hindpal Singh Bhui	Team leader
Angela Johnson	Inspector
Andy Rooke	Inspector
Paul Rowlands	Inspector
Ian Thomson	Inspector
Tim McSweeney	Researcher
Rachel Murray	Researcher

Specialist inspectors

Paul Roberts	Substance misuse inspector
Maureen Jamieson	Health services inspector
Gerard McGrath	Ofsted inspector
Maria Navarro	Ofsted inspector

Appendix II: Progress on recommendations from the last report

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

Safety

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

At the last inspection in 2013, conditions in the SCU were poor. Apart from some routine strip-searching, young people were treated well on arrival. The first night and induction procedures were sound and the child protection and safeguarding arrangements had improved and were now good. Levels of self-harm were high, but this was managed effectively. Incidents involving violence were rare and discipline was generally well managed, with effective use of mediation. The rewards and sanctions scheme was motivational and inclusive. Despite their vulnerability, all the young people on the unit were well cared for. Support for young people with drug related problems was excellent. Outcomes for children and young people were good against this healthy prison test.

Recommendations

Young people should only be strip-searched on the basis of intelligence or specific suspicion. (1.16)

Achieved

Anti-ligature clothing should not be used. (1.34)

Not achieved

Staff undertaking mediation should be trained in its use and use of mediation should be monitored. (1.38)

Partially achieved

The rewards and sanctions scheme should be administered consistently. (1.43)

Achieved

Removal from unit should not be used as a punishment. (1.54)

Achieved

Force should not be used to gain compliance. (1.69)

Not achieved

Cool-down areas should be provided with a policy for their use. (1.70)

Partially achieved

Young people under the good order or discipline rule in the SCU or on the unit should be managed in accordance with prison rules and the local policy, Documentation should be fully completed. (1.76)

No longer relevant

Respect

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

At the last inspection in 2013, the living conditions were of a high standard. Relationships between staff and young people remained excellent. Young people from minority groups were well supported. The consultation arrangements were good and young people were positive about the standard of the food. Young people were well supported by the chaplains. Health care provision was impressive, particularly in relation to mental health. Outcomes for children and young people were good against this healthy prison test.

Recommendations

Young people should be able to wear their own clothes. (2.10)

Partially achieved

In order to help prevent discrimination towards young people from all backgrounds, diversity monitoring specific to the unit should be developed. (2.23)

Not achieved (Recommendation repeated, 2.24)

Some custody staff should receive training in the use of AEDs. (2.48)

Achieved

Young people located on the in-patient unit should have access to a normal regime. (2.52)

Achieved

Adequate pharmacy cover should be provided for leave and sickness. (2.56)

Achieved

The dental surgery floor should be re-covered to comply with the control of infection. (2.59)

Achieved

Young people should be able to place an order with the prison shop within 24 hours of their arrival. (2.72)

Not achieved (Recommendation repeated, 2.108)

Purposeful activity

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

At the last inspection in 2013, young people received adequate time out of their cells and they could exercise in the open air regularly. The standard of teaching and learning was good, as was the management of behaviour. Punctuality and attendance were good. The curriculum provided variety and balance, but it did not meet the needs of those remaining on the unit for long stays. Young people had suitable access to the library. The PE facilities were good but retention rates on PE courses required improvement. Outcomes for children and young people were good against this healthy prison test.

Recommendations

Quality improvement processes, including the collection and analysis of data, should be applied to prison provision to help identify good and poor performance and take action to improve where required. (3.12)

Not achieved

Young people, especially those with longer sentences, should have more opportunities to participate in the range of vocational training offered on the main site. (3.16)

Partially achieved

Young people should be accredited for the skills they develop on the environmental programme. (3.17)

Partially achieved

PE staff should analyse why retention rates are low on some academy programmes and take action to improve them. (3.33)

Achieved

All young people should have regular timetabled physical education in addition to recreational sessions. Non-attendance at recreational physical education should be monitored and action taken to improve participation. (3.44)

Achieved

Quality improvement processes should be applied to measure the quality of provision, identify areas for improvement and take effective action to rectify them. (3.45)

Not achieved

Resettlement

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

At the last inspection in 2013, an attempt was being made to achieve a more coordinated and strategic response to the complex resettlement needs of young people living on the unit. Day-to-day planning for young people was managed well by the case workers. Considerable effort was made to help prepare young people for their release and sufficient attention was paid to most of the pathway areas, although finance was a weakness. All young people had the opportunity to benefit from a wide range of useful interventions. Outcomes for children and young people were good against this healthy prison test.

Recommendations

Resettlement and reoffending outcomes for young people who leave the unit should be systematically collected. (4.8)

Not achieved (recommendation repeated, 4.8)

The section on transition arrangements for young people in the reducing reoffending strategy should be strengthened and the strategy should include the management and resettlement needs of young people who have sexually abused others. (4.9)

Partially achieved

Young people should only be moved to the main site before transfer to a YOI when there is evidence that it is in their best interest to do so. (4.16)

Partially achieved

All young people should have access to a pre-release programme to help them develop and focus on plans for release. (4.34)

Not achieved (recommendation repeated, 4.31)

Appendix III: Establishment population profile

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

Population breakdown by:

Status	Number of young people	%
Sentenced	37	90.2
Recall	0	0
Convicted unsentenced	0	0
Remand	4	9.8
Detainees	0	0
Total	41	100

Age	Number of young people	%
15 years	2	6.7
16 years	4	24.9
17 years	24	53.2
18 years	11	15.2
Total	41	100

Nationality	Number of young people	%
British	38	92.7
Foreign nationals	3	7.3
Total	41	100

Ethnicity	Number of young people	%
White		
British	38	92.7
Irish	1	2.4
Gypsy/Irish Traveller	0	0
Other white	0	0
Mixed		
White and black Caribbean	0	0
White and black African	0	0
White and Asian	1	2.4
Other mixed	1	2.4
Asian or Asian British		
Indian	0	0
Pakistani	0	0
Bangladeshi	0	0
Chinese	0	0
Other Asian	0	0
Black or black British		
Caribbean	0	0
African	0	0
Other black	0	0
Other ethnic group		
Arab	0	

Other ethnic group	0	
Not stated	0	0
Total	41	10

Religion	Number of young people	%
Baptist	0	
Church of England	6	14.7
Roman Catholic	8	19.5
Other Christian denominations	6	14.7
Muslim	1	2.4
Sikh	0	0
Hindu	0	0
Buddhist	0	0
Jewish	0	0
Other	1	2.4
No religion	19	46.3
Total	41	100

Other demographics	Number of young people	%
Gypsy/Romany/Traveller	0	0
Total	0	0

Sentenced only – length of stay by age

Length of stay	<1 mth	1–3 mths	3–6 mths	6–12 mths	1–2 yrs	2 yrs +	4 yrs +	Total
Age								
15 years	1	0	1	0	0	0	0	2
16 years	0	1	0	1	1	0	0	3
17 years	1	7	8	4	2	0	0	22
18 years	0	0	3	4	2	1	0	10
Total	2	8	12	9	5	1	0	37

Unsentenced only – length of stay by age

Length of stay	<1 mth	1–3 mths	3–6 mths	6–12 mths	1–2 yrs	2 yrs+	4 yrs +	Total
Age								
15 years			1					1
16 years								0
17 years			2					2
18 years			1					1
Total	0	0	4	0	0	0	0	4

Main offence	Number of young people	%
Violence against the person	8	19.5
Sexual offences	13	31.7
Burglary	4	9.8
Robbery	4	9.8
Theft and handling	1	2.4
Fraud and forgery	0	0
Drugs offences	0	0
Other offences	7	17.0
Offence not recorded / holding warrant	4 - Remand	9.8
Total	41	100

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

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

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

Sentence	Under 2 yrs	2–3 yrs	3–4 yrs	4–5 yrs	5 yrs +	Recall	Total
Age							
15 years		1					1
16 years		1	1				2
17 years		2	1	1			4
18 years		1	1	1			3
Total		5	3	2			10

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

Sentence	Under 2 yrs	2–3 yrs	3–4 yrs	4–5 yrs	5 yrs +	Recall	Total
Age							
15 years							0
16 years							0
17 years					2		2
18 years					1		1
Total	0	0	0	0	3	0	3

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

Sentence	Under 2 yrs	2–5 yrs	5–10 yrs	10–15 yrs	15–20 yrs	Recall	Total
Age							
15 years							0
16 years							0
17 years							0
18 years	1						1
Total	1	0	0	0	0	0	1

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

Sentence	Under 2 yrs	2–5 yrs	5–10 yrs	10–15 yrs	15–20 yrs	20 yrs +	Total
Age							
15 years							0
16 years							0
17 years							0
18 years							0
Total	0	0	0	0	0	0	0

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

Children and young people survey methodology

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

Sampling

Questionnaires were offered to all young people.

Distributing and collecting questionnaires

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

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

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

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

Survey response

At the time of the survey on 9 March 2015 the young person population at the Keppel unit was 41. Questionnaires were distributed to all young people.

We received a total of 41 completed questionnaires, a response rate of 100%. No surveys were completed via interview.

Presentation of survey results and analyses

Over the following pages we present the survey results for the Keppel unit.

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

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant¹⁰ differences are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in young people's background details.

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

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

The following comparative analyses are presented:

- The current survey responses from the Keppel unit in 2015 compared with responses from young people surveyed in all other young offender institutions. This comparator is based on all responses from young people surveys carried out in five YOIs since April 2014.
- The current survey responses from the Keppel unit in 2015 compared with the responses of young people surveyed at the Keppel unit in 2013.
- A comparison within the 2015 survey between the responses of young people who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2015 survey between responses of young people who have been in local authority care and those who have not been in local authority care.

¹⁰ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. Our significance level is set at 0.05 which means that there is only a 5% likelihood that the difference is due to chance.

Survey summary

SECTION I: ABOUT YOU

Q1	How old are you?	
	15	2 (5%)
	16	4 (10%)
	17	24 (59%)
	18	11 (27%)
Q2	Are you a British citizen?	
	Yes	39 (98%)
	No	1 (3%)
Q3	Do you understand spoken English?	
	Yes	39 (100%)
	No	0 (0%)
Q4	Do you understand written English?	
	Yes	38 (97%)
	No	1 (3%)
Q5	What is your ethnic origin?	
	White - British	35 (85%)
	White - Irish	4 (10%)
	White - Other	1 (2%)
	Black or Black British - Caribbean	0 (0%)
	Black or Black British - African	0 (0%)
	Black or Black British - Other	0 (0%)
	Asian or Asian British - Indian	0 (0%)
	Asian or Asian British - Pakistani	0 (0%)
	Asian or Asian British - Bangladeshi	0 (0%)
	Asian or Asian British - Chinese	0 (0%)
	Asian or Asian British - Other	1 (2%)
	Mixed race - White and Black Caribbean	0 (0%)
	Mixed race - White and Black African	0 (0%)
	Mixed race - White and Asian	0 (0%)
	Mixed race - Other	0 (0%)
	Arab	0 (0%)
	Other ethnic group	0 (0%)
Q6	What is your religion?	
	None	13 (33%)
	Church of England	10 (26%)
	Catholic	14 (36%)
	Protestant	0 (0%)
	Other Christian denomination	1 (3%)
	Buddhist	0 (0%)
	Hindu	0 (0%)
	Jewish	0 (0%)
	Muslim	1 (3%)
	Sikh	0 (0%)

Q7	Do you consider yourself to be Gypsy/Romany/Traveller?	
	Yes	6 (15%)
	No.....	32 (80%)
	Don't know	2 (5%)
Q8	Do you have any children?	
	Yes	4 (10%)
	No.....	37 (90%)
Q9	Do you consider yourself to have a disability? (i.e. do you need help with any long-term physical, mental or learning needs.)	
	Yes.....	28 (68%)
	No.....	13 (32%)
Q10	Have you ever been in local authority care?	
	Yes	25 (64%)
	No.....	14 (36%)

SECTION 2: ABOUT YOUR SENTENCE

Q1	Are you sentenced?	
	Yes	36 (88%)
	No - unsentenced/on remand	5 (12%)
Q2	How long is your sentence (the full DTO sentence)?	
	Not sentenced	5 (12%)
	Less than 6 months	4 (10%)
	6 to 12 months.....	9 (22%)
	More than 12 months, up to 2 years.....	11 (27%)
	More than 2 years.....	11 (27%)
	Indeterminate sentence for public protection (IPP).....	1 (2%)
Q3	How long have you been in this establishment?	
	Less than 1 month.....	3 (8%)
	1 to 6 months	22 (55%)
	More than 6 months, but less than 12 months	8 (20%)
	12 months to 2 years.....	5 (13%)
	More than 2 years.....	2 (5%)
Q4	Is this your first time in custody in a YOI, secure children's home or secure training centre?	
	Yes	28 (70%)
	No.....	12 (30%)

SECTION 3: COURTS, TRANSFERS AND ESCORTS

Q1	On your most recent journey here, did you feel safe?	
	Yes	31 (76%)
	No.....	2 (5%)
	Don't remember	8 (20%)
Q2	On your most recent journey here, were there any adults (over 18) or a mix of males and females travelling with you?	
	Yes	14 (34%)
	No.....	18 (44%)
	Don't remember	9 (22%)

Q3	On your most recent journey here, how long did you spend in the van?	
	<i>Less than 2 hours</i>	14 (34%)
	<i>2 to 4 hours</i>	17 (41%)
	<i>More than 4 hours</i>	6 (15%)
	<i>Don't remember</i>	4 (10%)
Q4	On your most recent journey here, were you offered a toilet break?	
	<i>My journey was less than 2 hours</i>	14 (34%)
	<i>Yes</i>	3 (7%)
	<i>No</i>	21 (51%)
	<i>Don't remember</i>	3 (7%)
Q5	On your most recent journey here, were you offered anything to eat or drink?	
	<i>My journey was less than 2 hours</i>	14 (34%)
	<i>Yes</i>	12 (29%)
	<i>No</i>	12 (29%)
	<i>Don't remember</i>	3 (7%)
Q6	On your most recent journey here, how did you feel you were treated by the escort staff?	
	<i>Very well</i>	14 (34%)
	<i>Well</i>	17 (41%)
	<i>Neither</i>	5 (12%)
	<i>Badly</i>	0 (0%)
	<i>Very badly</i>	1 (2%)
	<i>Don't remember</i>	4 (10%)
Q7	Before you arrived here, did you receive any information to help you prepare for coming here?	
	<i>Yes - and it was helpful</i>	15 (38%)
	<i>Yes - but it was not helpful</i>	5 (13%)
	<i>No - I received no information</i>	14 (35%)
	<i>Don't remember</i>	6 (15%)

SECTION 4: FIRST DAYS

Q1	How long were you in reception?	
	<i>Less than 2 hours</i>	28 (68%)
	<i>2 hours or longer</i>	5 (12%)
	<i>Don't remember</i>	8 (20%)
Q2	When you were searched, was this carried out in a respectful way?	
	<i>Yes</i>	34 (83%)
	<i>No</i>	2 (5%)
	<i>Don't remember/Not applicable</i>	5 (12%)
Q3	How well did you feel you were treated in reception?	
	<i>Very well</i>	16 (39%)
	<i>Well</i>	20 (49%)
	<i>Neither</i>	3 (7%)
	<i>Badly</i>	1 (2%)
	<i>Very badly</i>	0 (0%)
	<i>Don't remember</i>	1 (2%)

Q4	When you first arrived here, did staff ask if you needed help or support with any of the following things? (Please tick all that apply to you.)	
	Not being able to smoke	27 (68%)
	Loss of property	10 (25%)
	Feeling scared.....	18 (45%)
	Gang problems.....	7 (18%)
	Contacting family	28 (70%)
	Money worries	10 (25%)
	Feeling worried/upset/needing someone to talk to.....	24 (60%)
	Health problems.....	20 (50%)
	Getting phone numbers.....	25 (63%)
	Staff did not ask me about any of these	5 (13%)
Q5	When you first arrived here, did you have any of the following problems? (Please tick all that apply to you.)	
	Not being able to smoke	28 (72%)
	Loss of property	5 (13%)
	Feeling scared.....	17 (44%)
	Gang problems.....	5 (13%)
	Contacting family	21 (54%)
	Money worries	8 (21%)
	Feeling worried/upset/needing someone to talk to.....	16 (41%)
	Health problems.....	14 (36%)
	Getting phone numbers.....	17 (44%)
	I did not have any problems	2 (5%)
Q6	When you first arrived here, were you given any of the following? (Please tick all that apply to you.)	
	Toiletries/basic items	33 (80%)
	The opportunity to have a shower	25 (61%)
	Something to eat.....	36 (88%)
	A free phone call to friends/family.....	29 (71%)
	PIN phone credit.....	29 (71%)
	Information about feeling worried/upset.....	22 (54%)
	Don't remember	1 (2%)
	I was not given any of these	2 (5%)
Q7	Within your first 24 hours here, did you have access to the following people or services? (Please tick all that apply to you.)	
	Chaplain.....	27 (68%)
	Peer mentor.....	9 (23%)
	Childline/Samaritans.....	10 (25%)
	The prison shop/canteen.....	10 (25%)
	Don't remember	5 (13%)
	I did not have access to any of these	8 (20%)
Q8	Before you were locked up on your first night, were you seen by a doctor or nurse?	
	Yes	28 (68%)
	No.....	8 (20%)
	Don't remember	5 (12%)
Q9	Did you feel safe on your first night here?	
	Yes	30 (73%)
	No.....	7 (17%)
	Don't remember	4 (10%)
Q10	Did the induction course cover everything you needed to know about the establishment?	
	I have not been on an induction course	8 (21%)
	Yes	19 (49%)
	No.....	5 (13%)
	Don't remember	7 (18%)

SECTION 5: DAILY LIFE AND RESPECT

Q1	Can you normally have a shower every day if you want to?	
	Yes	41 (100%)
	No	0 (0%)
	Don't know	0 (0%)
Q2	Is your cell call bell normally answered within five minutes?	
	Yes	19 (49%)
	No.....	15 (38%)
	Don't know	5 (13%)
Q3	What is the food like here?	
	Very good.....	1 (3%)
	Good.....	11 (28%)
	Neither	14 (35%)
	Bad	6 (15%)
	Very bad.....	8 (20%)
Q4	Does the shop/canteen sell a wide enough variety of products?	
	<i>I have not bought anything yet/Don't know</i>	3 (7%)
	Yes	24 (59%)
	No.....	14 (34%)
Q5	How easy is it for you to attend religious services?	
	<i>I don't want to attend religious services</i>	8 (21%)
	Very easy.....	12 (31%)
	Easy	10 (26%)
	Neither	1 (3%)
	Difficult.....	2 (5%)
	Very difficult.....	2 (5%)
	Don't know	4 (10%)
Q6	Are you religious beliefs respected?	
	Yes	23 (59%)
	No.....	4 (10%)
	Don't know/Not applicable.....	12 (31%)
Q7	Can you speak to a Chaplain of your faith in private if you want to?	
	Yes	29 (71%)
	No.....	2 (5%)
	Don't know/Not applicable.....	10 (24%)
Q8	Can you speak to a peer mentor when you need to?	
	Yes	23 (57%)
	No.....	2 (5%)
	Don't know	15 (38%)
Q9	Can you speak to a member of the IMB (Independent Monitoring Board) when you need to?	
	Yes	12 (29%)
	No	4 (10%)
	Don't know	25 (61%)

Q10	Can you speak to an advocate (an outside person to help you) when you need to?	
	Yes	21 (51%)
	No.....	3 (7%)
	Don't know	17 (41%)

SECTION 6: RELATIONSHIPS WITH STAFF

Q1	Do most staff treat you with respect?	
	Yes	33 (83%)
	No.....	7 (18%)

Q2	If you had a problem, who would you turn to? (Please tick all that apply to you.)	
	No-one	9 (23%)
	Personal officer	17 (43%)
	Wing Officer.....	16 (40%)
	Teacher/education staff	8 (20%)
	Gym staff.....	5 (13%)
	Chaplain.....	7 (18%)
	Independent Monitoring Board (IMB)	6 (15%)
	YOT worker	17 (43%)
	Social worker	8 (20%)
	Health services staff	5 (13%)
	Peer mentor	4 (10%)
	Another young person here.....	13 (33%)
	Case worker.....	19 (48%)
	Advocate.....	6 (15%)
	Family/friends.....	24 (60%)
	Childline/Samaritans	1 (3%)

Q3	Have staff checked on you personally in the last week to see how you are getting on?	
	Yes	17 (44%)
	No.....	22 (56%)

Q4	When did you first meet your personal (named) officer?	
	I still have not met him/her	2 (5%)
	In your first week	15 (38%)
	After your first week.....	10 (25%)
	Don't remember	13 (33%)

Q5	How often do you see your personal (named) officer?	
	I still have not met him/her	2 (6%)
	At least once a week	25 (71%)
	Less than once a week.....	8 (23%)

Q6	Do you feel your personal (named) officer tries to help you?	
	I still have not met him/her	2 (5%)
	Yes	31 (82%)
	No.....	5 (13%)

SECTION 7: APPLICATIONS AND COMPLAINTS

Q1	Is it easy to make an application?	
	Yes	27 (66%)
	No.....	5 (12%)
	Don't know	9 (22%)

Q2	Are applications sorted out fairly?	
	I have not made an application	11 (28%)
	Yes	23 (57%)
	No.....	6 (15%)

Q3	Are applications sorted out quickly (within 7 days)?	
	<i>I have not made an application</i>	11 (28%)
	Yes	13 (33%)
	No.....	15 (38%)
Q4	Is it easy to make a complaint?	
	Yes	24 (59%)
	No.....	6 (15%)
	Don't know	11 (27%)
Q5	Are complaints sorted out fairly?	
	<i>I have not made a complaint</i>	19 (48%)
	Yes	11 (28%)
	No.....	10 (25%)
Q6	Are complaints sorted out quickly (within 7 days)?	
	<i>I have not made a complaint</i>	19 (48%)
	Yes	12 (30%)
	No.....	9 (23%)
Q7	Have you ever felt too scared or intimidated to make a complaint?	
	Yes	7 (18%)
	No.....	19 (48%)
	Never needed to make a complaint.....	14 (35%)

SECTION 8: 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>	3 (7%)
	Enhanced (top)	11 (27%)
	Standard (middle)	20 (49%)
	Basic (bottom)	4 (10%)
	Don't know	3 (7%)
Q2	Have you been treated fairly in your experience of the rewards and sanctions scheme?	
	<i>Don't know what the rewards and sanctions scheme is</i>	3 (8%)
	Yes	21 (55%)
	No.....	9 (24%)
	Don't know	5 (13%)
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>	3 (8%)
	Yes	23 (62%)
	No.....	9 (24%)
	Don't know	2 (5%)
Q4	Have you had a minor report since you have been here?	
	Yes	34 (83%)
	No.....	7 (17%)
	Don't know	0 (0%)
Q5	If you have had a minor report, was the process explained clearly to you?	
	<i>I have not had a minor report</i>	7 (18%)
	Yes	26 (67%)
	No.....	6 (15%)

Q6	Have you had an adjudication ('nicking') since you have been here?	
	Yes	27 (68%)
	No.....	11 (28%)
	Don't know	2 (5%)
Q7	If you have had an adjudication ('nicking'), was the process explained clearly to you?	
	<i>I have not had an adjudication</i>	13 (33%)
	Yes	22 (55%)
	No.....	5 (13%)
Q8	Have you been physically restrained (C and R) since you have been here?	
	Yes	12 (30%)
	No.....	24 (60%)
	Don't know	4 (10%)
Q9	If you have spent a night in the care and separation unit (CSU), how were you treated by staff?	
	<i>I have not been to the care and separation unit</i>	31 (82%)
	Very well.....	3 (8%)
	Well.....	1 (3%)
	Neither	2 (5%)
	Badly.....	1 (3%)
	Very badly	0 (0%)

SECTION 9: SAFETY

Q1	Have you ever felt unsafe here?	
	Yes	27 (68%)
	No.....	13 (33%)
Q2	Do you feel unsafe now?	
	Yes	9 (23%)
	No.....	30 (77%)
Q3	In which areas have you felt unsafe? (Please tick all that apply to you.)	
	Never felt unsafe	13 (33%)
	Everywhere	8 (20%)
	Care and separation unit.....	1 (3%)
	Association areas	4 (10%)
	Reception area	1 (3%)
	At the gym	9 (23%)
	In an exercise yard	4 (10%)
	At work.....	3 (8%)
	At education	4 (10%)
	At religious services.....	3 (8%)
	At meal times.....	3 (8%)
	At healthcare.....	3 (8%)
	Visits area	9 (23%)
	In wing showers.....	0 (0%)
	In gym showers	1 (3%)
	In corridors/stairwells.....	3 (8%)
	On your landing/wing	1 (3%)
	During movement	9 (23%)
	In your cell	11 (28%)

Q4	Have you ever been victimised by another young person/group of young people here? (e.g. insulted or assaulted you)	
	Yes	21 (54%)
	No.....	18 (46%)
Q5	If yes, what did the incident(s) involve/what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you, your family or friends)</i>	12 (31%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	9 (23%)
	<i>Sexual abuse</i>	1 (3%)
	<i>Feeling threatened or intimidated</i>	9 (23%)
	<i>Having your canteen/property taken</i>	1 (3%)
	<i>Medication</i>	3 (8%)
	<i>Debt</i>	1 (3%)
	<i>Drugs</i>	0 (0%)
	<i>Your race or ethnic origin</i>	0 (0%)
	<i>Your religion/religious beliefs</i>	0 (0%)
	<i>Your nationality</i>	0 (0%)
	<i>You are from a different part of the country to others</i>	2 (5%)
	<i>You are from a Traveller community</i>	1 (3%)
	<i>Your sexuality</i>	4 (10%)
	<i>Your age</i>	0 (0%)
	<i>You having a disability</i>	3 (8%)
	<i>You were new here</i>	6 (15%)
	<i>Your offence/crime</i>	8 (21%)
	<i>Gang related issues</i>	1 (3%)
Q7	Have you ever been victimised by staff here? (e.g. insulted or assaulted you.)	
	Yes	13 (33%)
	No.....	27 (68%)
Q8	If yes, what did the incident(s) involve/what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you, your family or friends)</i>	5 (13%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	6 (15%)
	<i>Sexual abuse</i>	0 (0%)
	<i>Feeling threatened or intimidated</i>	5 (13%)
	<i>Having your canteen/property taken</i>	0 (0%)
	<i>Medication</i>	1 (3%)
	<i>Debt</i>	0 (0%)
	<i>Drugs</i>	1 (3%)
	<i>Your race or ethnic origin</i>	0 (0%)
	<i>Your religion/religious beliefs</i>	0 (0%)
	<i>Your nationality</i>	0 (0%)
	<i>You are from a different part of the country to others</i>	1 (3%)
	<i>You are from a Traveller community</i>	1 (3%)
	<i>Your sexuality</i>	1 (3%)
	<i>Your age</i>	1 (3%)
	<i>You having a disability</i>	0 (0%)
	<i>You were new here</i>	0 (0%)
	<i>Your offence/crime</i>	0 (0%)
	<i>Gang related issues</i>	0 (0%)
	<i>Because you made a complaint</i>	1 (3%)
Q10	If you were being victimised, would you tell a member of staff?	
	Yes	16 (44%)
	No.....	10 (28%)
	Don't know	10 (28%)

Q11	Do you think staff would take it seriously if you told them you had been victimised?		
	Yes	22 (56%)	
	No.....	8 (21%)	
	Don't know	9 (23%)	

Q12	Is shouting through the windows a problem here?		
	Yes	27 (69%)	
	No.....	9 (23%)	
	Don't know	3 (8%)	

SECTION 10: HEALTH SERVICES

Q1	Is it easy to see the following people if you need to?			
		Yes	No	Don't know
	The doctor	24 (62%)	7 (18%)	8 (21%)
	The nurse	29 (74%)	4 (10%)	6 (15%)
	The dentist	15 (39%)	15 (39%)	8 (21%)

Q2	What do you think of the overall quality of the health services here?		
	<i>I have not been</i>	2 (5%)	
	<i>Very good</i>	14 (37%)	
	<i>Good</i>	11 (29%)	
	<i>Neither</i>	6 (16%)	
	<i>Bad</i>	5 (13%)	
	<i>Very bad</i>	0 (0%)	

Q3	If you are taking medication, are you allowed to keep some/all of it in your room?		
	<i>I am not taking any medication</i>	8 (21%)	
	<i>Yes, all of my meds</i>	4 (11%)	
	<i>Yes, some of my meds</i>	5 (13%)	
	<i>No</i>	21 (55%)	

Q4	Do you have any emotional or mental health problems?		
	Yes	29 (73%)	
	No.....	11 (28%)	

Q5	Are you being helped by anyone here with your emotional or mental health problems? (e.g. a psychologist, doctor, counsellor, personal officer or another member of staff.)		
	<i>I do not have any emotional or mental health problems</i>	11 (28%)	
	Yes	21 (54%)	
	No.....	7 (18%)	

Q6	Did you have problems with alcohol when you first arrived here?		
	Yes	10 (25%)	
	No.....	30 (75%)	

Q7	Have you received any help with alcohol problems here?		
	Yes	5 (13%)	
	No.....	35 (88%)	

Q8	Did you have problems with drugs when you first arrived here?		
	Yes	25 (63%)	
	No.....	15 (38%)	

Q9	Do you have problems with drugs now?	
	Yes	5 (13%)
	No.....	35 (88%)
Q10	Have you received any help with drugs problems here?	
	Yes	14 (35%)
	No.....	26 (65%)
Q11	How easy or difficult is it to get illegal drugs here?	
	Very easy.....	5 (13%)
	Easy	3 (8%)
	Neither	6 (15%)
	Difficult.....	2 (5%)
	Very difficult.....	6 (15%)
	Don't know	17 (44%)

SECTION II: ACTIVITIES

Q1	How old were you when you were last at school?	
	14 or under	12 (31%)
	15 or over.....	27 (69%)
Q2	Have you ever been excluded from school?	
	Yes	36 (90%)
	No.....	4 (10%)
	Not applicable.....	0 (0%)
Q3	Did you ever skip school before you came into custody?	
	Yes	33 (83%)
	No.....	7 (18%)
	Not applicable.....	0 (0%)
Q4	Do you CURRENTLY take part in any of the following activities? (Please tick all that apply to you.)	
	Education	37 (95%)
	A job in this establishment.....	14 (36%)
	Vocational or skills training	8 (21%)
	Offending behaviour programmes	12 (31%)
	I am not currently involved in any of these	1 (3%)
Q5	If you have been involved in any of the following activities here, do you think they will help you when you leave prison?	
		Not been involved Yes No Don't know
	Education	0 (0%) 29 (73%) 10 (25%) 1 (3%)
	A job in this establishment	6 (21%) 13 (46%) 5 (18%) 4 (14%)
	Vocational or skills training	7 (28%) 10 (40%) 5 (20%) 3 (12%)
	Offending behaviour programmes	7 (25%) 14 (50%) 4 (14%) 3 (11%)
Q6	Do you usually have association every day?	
	Yes	38 (97%)
	No.....	1 (3%)
Q7	Can you usually go outside for exercise every day?	
	Don't want to go.....	0 (0%)
	Yes	22 (58%)
	No.....	16 (42%)

Q8	How many times do you usually go to the gym each week?	
	<i>Don't want to go</i>	2 (5%)
	<i>None</i>	2 (5%)
	<i>One to two times</i>	14 (36%)
	<i>Three to five times</i>	17 (44%)
	<i>More than five times</i>	4 (10%)

SECTION 12: FAMILY AND FRIENDS

Q1	Are you able to use the telephone every day, if you want to?	
	<i>Yes</i>	35 (88%)
	<i>No</i>	4 (10%)
	<i>Don't know</i>	1 (3%)

Q2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	<i>Yes</i>	20 (50%)
	<i>No</i>	16 (40%)
	<i>Don't know</i>	4 (10%)

Q3	How many visits do you usually have each week, from family or friends?	
	<i>I don't get visits</i>	13 (33%)
	<i>Less than one a week</i>	13 (33%)
	<i>About one a week</i>	10 (25%)
	<i>More than one a week</i>	1 (3%)
	<i>Don't know</i>	3 (8%)

Q4	How easy is it for your family and friends to visit you here?	
	<i>I don't get visits</i>	13 (33%)
	<i>Very easy</i>	4 (10%)
	<i>Easy</i>	9 (23%)
	<i>Neither</i>	2 (5%)
	<i>Difficult</i>	6 (15%)
	<i>Very difficult</i>	4 (10%)
	<i>Don't know</i>	1 (3%)

Q5	Do your visits usually start on time?	
	<i>I don't get visits</i>	13 (33%)
	<i>Yes</i>	12 (30%)
	<i>No</i>	10 (25%)
	<i>Don't know</i>	5 (13%)

SECTION 13: PREPARATION FOR RELEASE

Q1	Do you think you will have a problem with any of the following things, when you are released? (Please tick all that apply to you.)	
	<i>Finding accommodation</i>	16 (42%)
	<i>Getting into school or college</i>	17 (45%)
	<i>Getting a job</i>	28 (74%)
	<i>Money/finances</i>	18 (47%)
	<i>Claiming benefits</i>	16 (42%)
	<i>Continuing health services</i>	8 (21%)
	<i>Opening a bank account</i>	10 (26%)
	<i>Avoiding bad relationships</i>	12 (32%)
	<i>I won't have any problems</i>	4 (11%)

Q2	Do you have a training plan, sentence plan or remand plan? (i.e. a plan that is discussed in your DTO/planning meetings, which sets out your targets)	
	Yes	29 (73%)
	No.....	4 (10%)
	Don't know	7 (18%)
Q3	Were you involved in the development of your plan?	
	<i>I don't have a plan/don't know if I have a plan</i>	11 (31%)
	Yes	23 (64%)
	No.....	2 (6%)
Q4	Do you understand the targets that have been set in your plan?	
	<i>I don't have a plan/don't know if I have a plan</i>	11 (31%)
	Yes	21 (58%)
	No.....	4 (11%)
Q5	Do you have a caseworker here?	
	Yes	40 (100%)
	No.....	0 (0%)
	Don't know	0 (0%)
Q6	Has your caseworker helped to prepare you for release?	
	<i>I don't have a caseworker</i>	0 (0%)
	Yes	24 (60%)
	No.....	8 (20%)
	Don't know	8 (20%)
Q7	Has your social worker been to visit you since you have been here?	
	<i>I don't have a social worker</i>	9 (25%)
	Yes	22 (61%)
	No.....	5 (14%)
Q8	Have you had a say in what will happen to you when you are released?	
	Yes	21 (53%)
	No.....	11 (28%)
	Don't know	8 (20%)
Q9	Do you know who to contact for help with any of the following problems, before your release? (Please tick all that apply to you.)	
	<i>Finding accommodation</i>	10 (28%)
	<i>Getting into school or college</i>	11 (31%)
	<i>Getting a job</i>	17 (47%)
	<i>Help with money/finances</i>	12 (33%)
	<i>Help with claiming benefits</i>	11 (31%)
	<i>Continuing health services</i>	3 (8%)
	<i>Opening a bank account</i>	4 (11%)
	<i>Avoiding bad relationships</i>	7 (19%)
	<i>I don't know who to contact</i>	15 (42%)

Q10	What is most likely to stop you offending in the future? (Please tick all that apply to you.)	
	<i>Not sentenced</i> 5 (13%)	<i>Having a mentor (someone you can ask for advice)</i> 7 (18%)
	<i>Nothing, it is up to me</i> 9 (23%)	<i>Having a YOT worker or social worker that I get on with</i> 14 (36%)
	<i>Making new friends outside</i> 14 (36%)	<i>Having children</i> 6 (15%)
	<i>Going back to live with my family</i> 17 (44%)	<i>Having something to do that isn't crime</i> 15 (38%)
	<i>Getting a place of my own</i> 15 (38%)	<i>This sentence</i> 19 (49%)
	<i>Getting a job</i> 21 (54%)	<i>Getting into school/college</i> 17 (44%)
	<i>Having a partner (girlfriend or boyfriend)</i> 16 (41%)	<i>Talking about my offending behaviour with staff</i> 5 (13%)
	<i>Staying off alcohol/drugs</i> 18 (46%)	<i>Anything else</i> 5 (13%)
Q11	Do you want to stop offending?	
	<i>Not sentenced</i> 5 (13%)	
	<i>Yes</i> 30 (77%)	
	<i>No</i> 0 (0%)	
	<i>Don't know</i> 4 (10%)	
Q12	Have you done anything, or has anything happened to you here, that you think will make you less likely to offend in the future?	
	<i>Not sentenced</i> 5 (13%)	
	<i>Yes</i> 25 (64%)	
	<i>No</i> 9 (23%)	

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



**Survey responses from children and young people:
Keppel unit 2015**

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

Key to tables

		2015 Keppel unit	Young people's comparator	2015 Keppel unit	2013 Keppel unit
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
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	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		41	530	41	43
SECTION 1: ABOUT YOU					
1.1	Are you 18 years of age?	27%	12%	27%	26%
1.2	Are you a foreign national?	3%	5%	3%	0%
1.3	Do you understand spoken English?	100%	99%	100%	98%
1.4	Do you understand written English?	97%	98%	97%	100%
1.5	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other category)	2%	45%	2%	5%
1.6	Are you Muslim?	3%	23%	3%	3%
1.7	Do you consider yourself to be Gypsy/Romany/Traveller?	15%	7%	15%	0%
1.8	Do you have any children?	10%	9%	10%	21%
1.9	Do you consider yourself to have a disability?	68%	15%	68%	56%
1.10	Have you ever been in local authority care?	64%	36%	64%	47%
SECTION 2: ABOUT YOUR SENTENCE					
2.1	Are you sentenced?	88%	75%	88%	81%
2.2	Is your sentence 12 months or less?	32%	37%	32%	44%
2.3	Have you been in this establishment for one month or less?	8%	16%	8%	19%
2.4	Is this your first time in custody in a YOI, secure children's home or secure training centre?	70%	57%	70%	64%
SECTION 3: COURTS, TRANSFERS AND ESCORTS					
On your most recent journey here:					
3.1	Did you feel safe?	76%	83%	76%	84%
3.2	Did you travel with any adults (over 18) or a mix of males and females?	34%	36%	34%	44%
3.3	Did you spend more than 4 hours in the van?	15%	6%	15%	7%
For those who spent 2 or more hours in the escort van:					
3.4	Were you offered a toilet break if you needed it?	11%	13%	11%	22%
3.5	Were you offered anything to eat or drink?	44%	45%	44%	44%
3.6	Were you treated well/very well by the escort staff?	76%	53%	76%	71%
3.7	Before you arrived, did you receive any helpful information to help you prepare for coming here?	38%	15%	38%	28%
SECTION 4: YOUR FIRST FEW DAYS HERE					
4.1	Were you in reception for less than 2 hours?	68%	81%	68%	79%

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

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4.2	When you were searched, was this carried out in a respectful way?	83%	82%	83%	78%
4.3	Were you treated well/very well in reception?	88%	68%	88%	79%
When you first arrived, did staff ask if you needed help or support with any of the following:					
4.4a	Not being able to smoke?	68%	50%	68%	58%
4.4b	Loss of property?	25%	18%	25%	18%
4.4c	Feeling scared?	45%	28%	45%	31%
4.4d	Gang problems?	18%	46%	18%	20%
4.4e	Contacting family?	70%	54%	70%	58%
4.4f	Money worries?	25%	16%	25%	18%
4.4g	Feeling worried/upset/needing someone to talk to?	60%	35%	60%	46%
4.4h	Health problems?	50%	54%	50%	60%
4.4i	Getting phone numbers?	63%	40%	63%	40%
4.5	Did you have any problems when you first arrived?	95%	71%	95%	85%
When you first arrived, did you have problems with any of the following:					
4.5a	Not being able to smoke?	72%	40%	72%	58%
4.5b	Loss of property?	13%	11%	13%	3%
4.5c	Feeling scared?	44%	8%	44%	20%
4.5d	Gang problems?	13%	16%	13%	8%
4.5e	Contacting family?	54%	29%	54%	35%
4.5f	Money worries?	21%	13%	21%	20%
4.5g	Feeling worried/upset/needing someone to talk to?	41%	10%	41%	20%
4.5h	Health problems?	36%	11%	36%	28%
4.5i	Getting phone numbers?	44%	28%	44%	28%
When you first arrived, were you given any of the following:					
4.6a	Toiletries/basic items?	81%	79%	81%	85%
4.6b	The opportunity to have a shower?	61%	46%	61%	37%
4.6c	Something to eat?	88%	83%	88%	95%
4.6d	A free phone call to friends/family?	71%	77%	71%	73%
4.6e	PIN phone credit?	71%	54%	71%	70%
4.6f	Information about feeling worried/upset?	54%	30%	54%	37%
Within your first 24 hours, did you have access to the following people or services:					
4.7a	A chaplain?	68%	45%	68%	48%
4.7b	A peer mentor?	23%	10%	23%	24%
4.7c	Childline/Samaritans	25%	17%	25%	28%

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

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Number of completed questionnaires returned		41	530	41	43
4.7d	The prison shop/canteen?	25%	11%	25%	17%
4.8	Before you were locked up on your first night, were you seen by a doctor or nurse?	68%	69%	68%	60%
4.9	Did you feel safe on your first night here?	73%	79%	73%	83%
4.10	For those who have been on an induction course: did it cover everything you needed to know about the establishment	61%	59%	61%	70%
SECTION 5: DAILY LIFE AND RESPECT					
5.1	Can you normally have a shower every day if you want to?	100%	86%	100%	100%
5.2	Is your cell call bell normally answered within five minutes?	49%	38%	49%	51%
5.3	Do you find the food here good/very good?	30%	16%	30%	49%
5.4	Does the shop/canteen sell a wide enough variety of products?	59%	50%	59%	78%
5.5	Is it easy/very easy for you to attend religious services?	56%	53%	56%	51%
5.6	Do you feel your religious beliefs are respected?	59%	56%	59%	58%
Can you speak to:					
5.7	A chaplain of your faith in private?	71%	67%	71%	69%
5.8	A peer mentor?	58%	29%	58%	63%
5.9	A member of the IMB (Independent Monitoring Board)?	29%	24%	29%	58%
5.10	An advocate (an outside person to help you)?	51%	45%	51%	74%
SECTION 6: RELATIONSHIPS WITH STAFF					
6.1	Do most staff treat you with respect?	83%	70%	83%	92%
6.2	If you had a problem, would you have no-one to turn to?	23%	29%	23%	16%
6.3	Have staff checked on you personally in the last week to see how you are getting on?	44%	35%	44%	77%
For those who have met their personal officer:					
6.4	Did you meet your personal (named) officer within the first week?	40%	38%	40%	56%
6.5	Do you see your personal (named) officer at least once a week?	76%	50%	76%	80%
6.6	Do you feel your personal (named) officer tries to help you?	86%	61%	86%	93%
SECTION 7: APPLICATIONS AND COMPLAINTS					
7.1	Is it easy to make an application?	66%	71%	66%	82%
For those who have made an application:					
7.2	Do you feel applications are sorted out fairly?	79%	63%	79%	97%
7.3	Do you feel applications are sorted out quickly (within 7 days)?	46%	47%	46%	66%
7.4	Is it easy to make a complaint?	59%	58%	59%	24%
For those who have made a complaint:					
7.5	Do you feel complaints are sorted out fairly?	52%	41%	52%	80%
7.6	Do you feel complaints are sorted out quickly (within 7 days)?	57%	37%	57%	70%

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7.7	Have you ever felt too scared or intimidated to make a complaint?	18%	9%	18%	14%
SECTION 8: REWARDS AND SANCTIONS, AND DISCIPLINE					
8.1	Are you on the enhanced (top) level of the reward scheme?	27%	25%	27%	29%
8.2	Have you been treated fairly in your experience of the reward scheme?	55%	47%	55%	58%
8.3	Do the different levels make you change your behaviour?	62%	44%	62%	53%
8.4	Have you had a minor report since you have been here?	83%	44%	83%	68%
For those who have had a minor report:					
8.5	Was the process explained clearly to you?	81%	76%	81%	88%
8.6	Have you had an adjudication ('nicking') since you have been here?	68%	65%	68%	63%
For those who have had an adjudication ('nicking'):					
8.7	Was the process explained clearly to you?	82%	85%	82%	96%
8.8	Have you been physically restrained (Cand R) since you have been here?	30%	41%	30%	36%
8.9	For those who had spent a night in the care and separation unit: did the staff treat you well/very well?	57%	40%	57%	100%
SECTION 9: SAFETY					
9.1	Have you ever felt unsafe here?	68%	31%	68%	41%
9.2	Do you feel unsafe now?	23%	12%	23%	16%
9.4	Have you ever been victimised by other young people here?	54%	25%	54%	45%
Since you have been here, have other young people:					
9.5a	Made insulting remarks about you, your family or friends?	31%	12%	31%	36%
9.5b	Hit, kicked or assaulted you?	23%	10%	23%	15%
9.5c	Sexually abused you?	3%	1%	3%	3%
9.5d	Threatened or intimidated you?	23%	9%	23%	21%
9.5e	Taken your canteen/property?	3%	4%	3%	0%
9.5f	Victimised you because of medication?	8%	1%	8%	0%
9.5g	Victimised you because of debt?	3%	2%	3%	0%
9.5h	Victimised you because of drugs?	0%	2%	0%	0%
9.5i	Victimised you because of your race or ethnic origin?	0%	3%	0%	0%
9.5j	Victimised you because of your religion/religious beliefs?	0%	2%	0%	0%
9.5k	Victimised you because of your nationality?	0%	2%	0%	3%
9.5l	Victimised you because you were from a different part of the country?	5%	3%	5%	5%
9.5m	Victimised you because you are from a Traveller community?	3%	1%	3%	0%
9.5n	Victimised you because of your sexual orientation?	10%	0%	10%	13%

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9.5o	Victimised you because of your age?	0%	1%	0%	0%
9.5p	Victimised you because you have a disability?	8%	1%	8%	3%
9.5q	Victimised you because you were new here?	15%	5%	15%	8%
9.5r	Victimised you because of your offence/crime?	21%	2%	21%	0%
9.5s	Victimised you because of gang related issues?	3%	5%	3%	0%
9.7	Have you ever been victimised by a member of staff here?	33%	24%	33%	18%
Since you have been here, have staff:					
9.8a	Made insulting remarks about you, your family or friends?	13%	12%	13%	13%
9.8b	Hit, kicked or assaulted you?	15%	5%	15%	0%
9.8c	Sexually abused you?	0%	1%	0%	0%
9.8d	Threatened or intimidated you?	13%	5%	13%	5%
9.8e	Taken your canteen/property?	0%	4%	0%	0%
9.8f	Victimised you because of medication?	3%	1%	3%	0%
9.8g	Victimised you because of debt?	0%	0%	0%	0%
9.8h	Victimised you because of drugs?	3%	1%	3%	0%
9.8i	Victimised you because of your race or ethnic origin?	0%	4%	0%	0%
9.8j	Victimised you because of your religion/religious beliefs?	0%	3%	0%	0%
9.8k	Victimised you because of your nationality?	0%	2%	0%	0%
9.8k	Victimised you because you were from a different part of the country?	3%	2%	3%	0%
9.8m	Victimised you because you are from a Traveller community?	3%	1%	3%	0%
9.8n	Victimised you because of your sexual orientation?	3%	0%	3%	0%
9.8o	Victimised you because of your age?	3%	1%	3%	0%
9.8p	Victimised you because you have a disability?	0%	1%	0%	3%
9.8q	Victimised you because you were new here?	0%	3%	0%	0%
9.8r	Victimised you because of your offence/crime?	0%	2%	0%	0%
9.8s	Victimised you because of gang related issues?	0%	1%	0%	0%
9.8t	Victimised you because you made a complaint?	3%	4%	3%	0%
9.10	If you were being victimised, would you tell a member of staff?	44%	25%	44%	46%
9.11	Do you think staff would take it seriously if you told them you had been victimised?	56%	28%	56%	67%
9.12	Is shouting through the windows a problem here?	69%	35%	69%	50%
SECTION 10: HEALTH SERVICES					
10.1a	Is it easy for you to see the doctor?	62%	50%	62%	76%
10.1b	Is it easy for you to see the nurse?	74%	63%	74%	87%
10.1c	Is it easy for you to see the dentist?	40%	31%	40%	57%

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Number of completed questionnaires returned		41	530	41	43
10.2	For those who have been to health services: Do you think the overall quality good/very good?	69%	49%	69%	74%
10.3	If you are taking medication, are you allowed to keep some/all of it in your cell?	30%	55%	30%	35%
10.4	Do you have any emotional or mental health problems?	73%	20%	73%	57%
10.5	If you have emotional or mental health problems, are you being helped by anyone here?	75%	58%	75%	86%
10.6	Did you have any problems with alcohol when you first arrived?	25%	6%	25%	24%
10.7	Have you received any help with any alcohol problems here?	13%	4%	13%	16%
10.8	Did you have any problems with drugs when you first arrived?	63%	34%	63%	57%
10.9	Do you have a problem with drugs now?	13%	7%	13%	27%
10.10	Have you received any help with any drug problems here?	35%	21%	35%	47%
10.11	Is it easy/very easy to get illegal drugs here?	21%	16%	21%	13%
SECTION 11: ACTIVITIES					
11.1	Were you 14 or younger when you were last at school?	31%	44%	31%	31%
11.2	Have you ever been excluded from school?	90%	85%	90%	87%
11.3	Did you ever skip school before you came into custody?	83%	73%	83%	82%
Do you currently take part in any of the following:					
11.4a	Education?	95%	72%	95%	100%
11.4b	A job in this establishment?	36%	27%	36%	32%
11.4c	Vocational or skills training?	21%	13%	21%	30%
11.4d	Offending behaviour programmes?	31%	16%	31%	27%
11.4e	Nothing	3%	19%	3%	0%
For those who have taken part in the following activities while in this establishment, do you think that they will help you when you leave prison:					
11.5a	Education?	73%	60%	73%	82%
11.5b	A job in this establishment?	59%	43%	59%	64%
11.5c	Vocational or skills training?	56%	46%	56%	70%
11.5d	Offending behaviour programmes?	67%	44%	67%	76%
11.6	Do you usually have association every day?	97%	65%	97%	97%
11.7	Can you usually go outside for exercise every day?	58%	60%	58%	84%
11.8	Do you go to the gym more than five times each week?	10%	8%	10%	5%
SECTION 12: KEEPING IN TOUCH WITH FAMILY AND FRIENDS					
12.1	Are you able to use the telephone every day?	88%	77%	88%	100%
12.2	Have you had any problems with sending or receiving letters or parcels?	50%	45%	50%	31%
12.3	Do you usually have one or more visits per week from family and friends?	28%	37%	28%	38%
12.4	Is it easy/very easy for your family and friends to visit you here?	33%	32%	33%	32%

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

Key to tables

		2015 Keppel unit	Young people's comparator	2015 Keppel unit	2013 Keppel unit
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in young people's background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		41	530	41	43
12.5	Do your visits start on time?	30%	33%	30%	49%
SECTION 13: PREPARATION FOR RELEASE					
Do you think you will have a problem with the following, when you are released:					
13.1a	Finding accommodation?	42%	24%	42%	24%
13.1b	Getting into school or college?	45%	28%	45%	32%
13.1c	Getting a job?	74%	52%	74%	57%
13.1d	Money/finances?	47%	35%	47%	32%
13.1e	Claiming benefits?	42%	13%	42%	24%
13.1f	Continuing health services?	21%	8%	21%	13%
13.1g	Opening a bank account?	26%	16%	26%	16%
13.1h	Avoiding bad relationships?	32%	16%	32%	30%
13.2	Do you have a training plan, sentence plan or remand plan?	73%	39%	73%	73%
For those with a training plan, sentence plan or remand plan:					
13.3	Were you involved in the development of your plan?	92%	86%	92%	75%
13.4	Do you understand the targets set in your plan?	84%	95%	84%	93%
13.5	Do you have a caseworker here?	100%	89%	100%	87%
13.6	Has your caseworker helped to prepare you for release?	60%	43%	60%	55%
For those with a social worker:					
13.7	Has your social worker been to visit you since you have been here?	82%	71%	82%	71%
13.8	Have you had a say in what will happen to you when you are released?	53%	40%	53%	32%
Do you know who to contact for help with the following problems?					
13.9a	Finding accommodation	28%	29%	28%	34%
13.9b	Getting into school or college	31%	26%	31%	46%
13.9c	Getting a job	47%	31%	47%	46%
13.9d	Help with money/finances	33%	22%	33%	29%
13.9e	Help with claiming benefits	31%	17%	31%	29%
13.9f	Continuing health services	8%	14%	8%	31%
13.9g	Opening a bank account	11%	18%	11%	26%
13.9h	Avoiding bad relationships	19%	14%	19%	26%
For those who were sentenced:					
13.11	Do you want to stop offending?	88%	91%	88%	93%
13.12	Have you done anything or has anything happened to you here that you think will make you less likely to offend in the future	74%	50%	74%	64%

Diversity analysis - disability



Key question responses (disability analysis) Keppel unit 2015

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

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		28	13
1.2	Are you a foreign national?	4%	0%
1.3	Do you understand spoken English?	100%	100%
1.4	Do you understand written English?	96%	100%
1.5	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	4%	0%
1.6	Are you Muslim?	4%	0%
1.5	Do you consider yourself to be Gypsy/ Romany/ Traveller?	19%	8%
1.10	Have you ever been in local authority care?	67%	58%
2.1	Are you sentenced?	86%	92%
2.4	Is this your first time in custody in a YOI, secure children's home or secure training centre?	68%	75%
3.2	Did you travel with any adults (over 18) or a mix of males and females?	36%	31%
3.6	Were you treated well/very well by the escort staff?	75%	77%
3.7	Before you arrived, did you receive any helpful information to help you prepare for coming here?	44%	23%
4.2	When you were searched, was this carried out in a respectful way?	79%	92%
4.3	Were you treated well/very well in reception?	82%	100%
4.8	Before you were locked up on your first night, were you seen by a doctor or nurse?	71%	62%
4.9	Did you feel safe on your first night here?	68%	85%
5.1	Can you normally have a shower every day if you want to?	100%	100%
5.2	Is your cell call bell normally answered within five minutes?	46%	54%
5.3	Do you find the food here good/very good?	30%	31%
5.4	Does the shop/canteen sell a wide enough variety of products?	61%	54%
5.6	Do you feel your religious beliefs are respected?	46%	85%

Diversity analysis - disability

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Can you speak to:			
5.7	A chaplain of your faith in private?	68%	77%
5.8	A peer mentor?	52%	69%
5.9	A member of the IMB (Independent Monitoring Board)?	29%	31%
5.10	An advocate (an outside person to help you)?	57%	39%
6.1	Do most staff treat you with respect?	85%	77%
6.2	If you had a problem, would you have no-one to turn to?	22%	23%
7.1	Is it easy to make an application?	64%	69%
7.4	Is it easy to make a complaint?	57%	62%
8.1	Are you on the enhanced (top) level of the reward scheme?	25%	31%
8.2	Have you been treated fairly in your experience of the reward scheme?	58%	50%
8.3	Do the different levels make you change your behaviour?	60%	67%
8.4	Have you had a minor report since you have been here?	79%	92%
8.6	Have you had an adjudication ('nicking') since you have been here?	63%	77%
8.8	Have you been physically restrained (C and R) since you have been here?	33%	23%
9.1	Have you ever felt unsafe here?	70%	62%
9.2	Do you feel unsafe now?	26%	17%
9.4	Have you been victimised by other young people here?	54%	54%
Since you have been here, have other young people:			
9.5d	Threatened or intimidated you?	27%	15%
9.5i	Victimised you because of your race or ethnic origin?	0%	0%
9.5j	Victimised you because of your religion/religious beliefs?	0%	0%
9.5k	Victimised you because of your nationality?	0%	0%
9.5p	Victimised you because you have a disability?	12%	0%
9.7	Have you been victimised by staff here?	33%	31%
Since you have been here, have staff:			

Diversity analysis - disability

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
9.8d	Threatened or intimidated you?	11%	15%
9.8i	Victimised you because of your race or ethnic origin?	0%	0%
9.8j	Victimised you because of your religion/religious beliefs?	0%	0%
9.8k	Victimised you because of your nationality?	0%	0%
9.8p	Victimised you because you have a disability?	0%	0%
9.10	If you were being victimised, would you tell a member of staff?	44%	46%
9.11	Do you think staff would take it seriously if you told them you had been victimised?	58%	54%
10.1a	Is it easy/very easy for you to see the doctor?	58%	69%
10.1b	Is it easy/very easy for you to see the nurse?	73%	77%
10.4	Do you feel you have any emotional or mental health problems?	78%	62%
Do you currently take part in any of the following:			
11.4a	Education?	93%	100%
11.4b	A job in this establishment?	37%	33%
11.4c	Vocational or skills training?	26%	8%
11.4d	Offending behaviour programmes?	33%	25%
11.4e	Nothing?	4%	0%
11.6	Do you usually have association every day?	100%	92%
11.7	Can you usually go outside for exercise every day?	60%	54%
11.8	Do you go to the gym more than five times each week?	12%	8%
12.1	Are you able to use the telephone every day?	85%	92%
12.2	Have you had any problems with sending or receiving letters or parcels?	41%	69%
12.3	Do you usually have one or more visits per week from family and friends?	26%	31%
13.2	Do you have a training plan, sentence plan or remand plan?	82%	54%
13.8	Have you had a say in what will happen to you when you are released?	56%	46%

Diversity analysis



Key question responses (local authority care analysis) Keppel unit 2015

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

Key to tables

	Any percentage highlighted in green is significantly better	Young people who have been in local authority care	Young people who have not been in local authority care
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		25	14
1.2	Are you a foreign national?	0%	0%
1.3	Do you understand spoken English?	100%	100%
1.4	Do you understand written English?	96%	100%
1.5	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	0%	7%
1.6	Are you Muslim?	0%	7%
1.5	Do you consider yourself to be Gypsy/ Romany/ Traveller?	21%	0%
1.9	Do you consider yourself to have a disability?	72%	64%
2.1	Are you sentenced?	84%	93%
2.4	Is this your first time in custody in a YOI, secure children's home or secure training centre?	54%	93%
3.2	Did you travel with any adults (over 18) or a mix of males and females?	28%	36%
3.6	Were you treated well/very well by the escort staff?	76%	79%
3.7	Before you arrived, did you receive any helpful information to help you prepare for coming here?	38%	36%
4.2	When you were searched, was this carried out in a respectful way?	84%	86%
4.3	Were you treated well/very well in reception?	84%	93%
4.8	Before you were locked up on your first night, were you seen by a doctor or nurse?	72%	64%
4.9	Did you feel safe on your first night here?	76%	64%
5.1	Can you normally have a shower every day if you want to?	100%	100%
5.2	Is your cell call bell normally answered within five minutes?	39%	57%
5.3	Do you find the food here good/very good?	29%	21%
5.4	Does the shop/canteen sell a wide enough variety of products?	64%	43%
5.6	Do you feel your religious beliefs are respected?	57%	57%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Young people who have been in local authority care	Young people who have not been in local authority care
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Can you speak to:			
5.7	A chaplain of your faith in private?	68%	79%
5.8	A peer mentor?	54%	64%
5.9	A member of the IMB (Independent Monitoring Board)?	40%	14%
5.10	An advocate (an outside person to help you)?	44%	64%
6.1	Do most staff treat you with respect?	76%	92%
6.2	If you had a problem, would you have no-one to turn to?	28%	15%
7.1	Is it easy to make an application?	68%	64%
7.4	Is it easy to make a complaint?	60%	57%
8.1	Are you on the enhanced (top) level of the reward scheme?	28%	21%
8.2	Have you been treated fairly in your experience of the reward scheme?	54%	58%
8.3	Do the different levels make you change your behaviour?	61%	67%
8.4	Have you had a minor report since you have been here?	92%	64%
8.6	Have you had an adjudication ('nicking') since you have been here?	75%	57%
8.8	Have you been physically restrained (C and R) since you have been here?	42%	14%
9.1	Have you ever felt unsafe here?	67%	64%
9.2	Do you feel unsafe now?	25%	23%
9.4	Have you been victimised by other young people here?	67%	31%
Since you have been here, have other young people:			
9.5d	Threatened or intimidated you?	33%	0%
9.5i	Victimised you because of your race or ethnic origin?	0%	0%
9.5j	Victimised you because of your religion/religious beliefs?	0%	0%
9.5k	Victimised you because of your nationality?	0%	0%
9.5p	Victimised you because you have a disability?	13%	0%
9.7	Have you been victimised by staff here?	25%	50%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Young people who have been in local authority care	Young people who have not been in local authority care
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Since you have been here, have staff:			
9.8d	Threatened or intimidated you?	13%	14%
9.8i	Victimised you because of your race or ethnic origin?	0%	0%
9.8j	Victimised you because of your religion/religious beliefs?	0%	0%
9.8k	Victimised you because of your nationality?	0%	0%
9.8p	Victimised you because you have a disability?	0%	0%
9.10	If you were being victimised, would you tell a member of staff?	46%	42%
9.11	Do you think staff would take it seriously if you told them you had been victimised?	52%	57%
10.1a	Is it easy/very easy for you to see the doctor?	63%	57%
10.1b	Is it easy/very easy for you to see the nurse?	79%	62%
10.4	Do you feel you have any emotional or mental health problems?	79%	71%
Do you currently take part in any of the following:			
11.4a	Education?	96%	93%
11.4b	A job in this establishment?	30%	50%
11.4c	Vocational or skills training?	13%	36%
11.4d	Offending behaviour programmes?	26%	36%
11.4e	Nothing?	4%	0%
11.6	Do you usually have association every day?	96%	100%
11.7	Can you usually go outside for exercise every day?	61%	54%
11.8	Do you go to the gym more than five times each week?	0%	29%
12.1	Are you able to use the telephone every day?	92%	79%
12.2	Have you had any problems with sending or receiving letters or parcels?	50%	57%
12.3	Do you usually have one or more visits per week from family and friends?	13%	50%
13.2	Do you have a training plan, sentence plan or remand plan?	63%	93%
13.8	Have you had a say in what will happen to you when you are released?	54%	50%



Survey responses from children and young people: Keppel unit 2015 vs. Wetherby 2015

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

Key to tables

		2015 Keppel unit	2015 Wetherby
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		41	152
SECTION 1: ABOUT YOU			
1.1	Are you 18 years of age?	27%	11%
1.2	Are you a foreign national?	3%	5%
1.3	Do you understand spoken English?	100%	98%
1.4	Do you understand written English?	97%	98%
1.5	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other category)	2%	25%
1.6	Are you Muslim?	3%	14%
1.7	Do you consider yourself to be Gypsy/Romany/Traveller?	15%	8%
1.8	Do you have any children?	10%	9%
1.9	Do you consider yourself to have a disability?	68%	15%
1.10	Have you ever been in local authority care?	64%	32%
SECTION 2: ABOUT YOUR SENTENCE			
2.1	Are you sentenced?	88%	85%
2.2	Is your sentence 12 months or less?	32%	39%
2.3	Have you been in this establishment for one month or less?	8%	22%
2.4	Is this your first time in custody in a YOI, secure children's home or secure training centre?	70%	54%
SECTION 3: COURTS, TRANSFERS AND ESCORTS			
On your most recent journey here:			
3.1	Did you feel safe?	76%	80%
3.2	Did you travel with any adults (over 18) or a mix of males and females?	34%	40%
3.3	Did you spend more than 4 hours in the van?	15%	7%
For those who spent 2 or more hours in the escort van:			
3.4	Were you offered a toilet break if you needed it?	11%	12%
3.5	Were you offered anything to eat or drink?	44%	41%
3.6	Were you treated well/very well by the escort staff?	76%	55%
3.7	Before you arrived, did you receive any helpful information to help you prepare for coming here?	38%	17%
SECTION 4: YOUR FIRST FEW DAYS HERE			
4.1	Were you in reception for less than 2 hours?	68%	80%

Key to tables

	Any percentage highlighted in green is significantly better	2015 Keppel unit	2015 Wetherby
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		41	152
4.2	When you were searched, was this carried out in a respectful way?	83%	84%
4.3	Were you treated well/very well in reception?	88%	69%
When you first arrived, did staff ask if you needed help or support with any of the following:			
4.4a	Not being able to smoke?	68%	60%
4.4b	Loss of property?	25%	23%
4.4c	Feeling scared?	45%	31%
4.4d	Gang problems?	18%	31%
4.4e	Contacting family?	70%	58%
4.4f	Money worries?	25%	17%
4.4g	Feeling worried/upset/need someone to talk to?	60%	39%
4.4h	Health problems?	50%	60%
4.4i	Getting phone numbers?	63%	43%
4.5	Did you have any problems when you first arrived?	95%	73%
When you first arrived, did you have problems with any of the following:			
4.5a	Not being able to smoke?	72%	49%
4.5b	Loss of property?	13%	12%
4.5c	Feeling scared?	44%	9%
4.5d	Gang problems?	13%	11%
4.5e	Contacting family?	54%	28%
4.5f	Money worries?	21%	10%
4.5g	Feeling worried/upset/need someone to talk to?	41%	10%
4.5h	Health problems?	36%	10%
4.5i	Getting phone numbers?	44%	27%
When you first arrived, were you given any of the following:			
4.6a	Toiletries/basic items?	81%	79%
4.6b	The opportunity to have a shower?	61%	30%
4.6c	Something to eat?	88%	86%
4.6d	A free phone call to friends/family?	71%	75%
4.6e	PIN phone credit?	71%	50%
4.6f	Information about feeling worried/upset?	54%	27%
Within your first 24 hours, did you have access to the following people or services:			
4.7a	A chaplain?	68%	49%
4.7b	A peer mentor?	23%	6%

Key to tables

		2015 Keppel unit	2015 Wetherby
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		41	152
4.7c	Childline/Samaritans	25%	13%
4.7d	The prison shop/canteen?	25%	10%
4.8	Before you were locked up on your first night, were you seen by a doctor or nurse?	68%	64%
4.9	Did you feel safe on your first night here?	73%	75%
4.10	For those who have been on an induction course: did it cover everything you needed to know about the establishment	61%	57%
SECTION 5: DAILY LIFE AND RESPECT			
5.1	Can you normally have a shower every day if you want to?	100%	90%
5.2	Is your cell call bell normally answered within five minutes?	49%	30%
5.3	Do you find the food here good/very good?	30%	24%
5.4	Does the shop/canteen sell a wide enough variety of products?	59%	52%
5.5	Is it easy/very easy for you to attend religious services?	56%	59%
5.6	Do you feel your religious beliefs are respected?	59%	53%
Can you speak to:			
5.7	A chaplain of your faith in private?	71%	64%
5.8	A peer mentor?	58%	28%
5.9	A member of the IMB (Independent Monitoring Board)?	29%	16%
5.10	An advocate (an outside person to help you)?	51%	44%
SECTION 6: RELATIONSHIPS WITH STAFF			
6.1	Do most staff treat you with respect?	83%	72%
6.2	If you had a problem, would you have no-one to turn to?	23%	30%
6.3	Have staff checked on you personally in the last week to see how you are getting on?	44%	38%
For those who have met their personal officer:			
6.4	Did you meet your personal (named) officer within the first week?	40%	40%
6.5	Do you see your personal (named) officer at least once a week?	76%	49%
6.6	Do you feel your personal (named) officer tries to help you?	86%	68%
SECTION 7: APPLICATIONS AND COMPLAINTS			
7.1	Is it easy to make an application?	66%	65%
For those who have made an application:			
7.2	Do you feel applications are sorted out fairly?	79%	73%
7.3	Do you feel applications are sorted out quickly (within 7 days)?	46%	49%
7.4	Is it easy to make a complaint?	59%	52%
For those who have made a complaint:			
7.5	Do you feel complaints are sorted out fairly?	52%	35%

Key to tables

		2015 Keppel unit	2015 Wetherby
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		41	152
7.6	Do you feel complaints are sorted out quickly (within 7 days)?	57%	35%
7.7	Have you ever felt too scared or intimidated to make a complaint?	18%	5%
SECTION 8: REWARDS AND SANCTIONS, AND DISCIPLINE			
8.1	Are you on the enhanced (top) level of the reward scheme?	27%	24%
8.2	Have you been treated fairly in your experience of the reward scheme?	55%	47%
8.3	Do the different levels make you change your behaviour?	62%	39%
8.4	Have you had a minor report since you have been here?	83%	59%
For those who have had a minor report:			
8.5	Was the process explained clearly to you?	81%	78%
8.6	Have you had an adjudication ('nicking') since you have been here?	68%	60%
For those who have had an adjudication ('nicking'):			
8.7	Was the process explained clearly to you?	82%	88%
8.8	Have you been physically restrained (Cand R) since you have been here?	30%	33%
8.9	For those who had spent a night in the care and separation unit: did the staff treat you well/very well?	57%	62%
SECTION 9: SAFETY			
9.1	Have you ever felt unsafe here?	68%	29%
9.2	Do you feel unsafe now?	23%	14%
9.4	Have you ever been victimised by other young people here?	54%	29%
Since you have been here, have other young people:			
9.5a	Made insulting remarks about you, your family or friends?	31%	13%
9.5b	Hit, kicked or assaulted you?	23%	10%
9.5c	Sexually abused you?	3%	2%
9.5d	Threatened or intimidated you?	23%	12%
9.5e	Taken your canteen/property?	3%	4%
9.5f	Victimised you because of medication?	8%	2%
9.5g	Victimised you because of debt?	3%	3%
9.5h	Victimised you because of drugs?	0%	1%
9.5i	Victimised you because of your race or ethnic origin?	0%	4%
9.5j	Victimised you because of your religion/religious beliefs?	0%	2%
9.5k	Victimised you because of your nationality?	0%	2%
9.5l	Victimised you because you were from a different part of the country?	5%	5%

Key to tables

		2015 Keppel unit	2015 Wetherby
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		41	152
9.5m	Victimised you because you are from a Traveller community?	3%	0%
9.5n	Victimised you because of your sexual orientation?	10%	0%
9.5o	Victimised you because of your age?	0%	1%
9.5p	Victimised you because you have a disability?	8%	1%
9.5q	Victimised you because you were new here?	15%	5%
9.5r	Victimised you because of your offence/crime?	21%	4%
9.5s	Victimised you because of gang related issues?	3%	6%
9.7	Have you ever been victimised by a member of staff here?	33%	18%
Since you have been here, have staff:			
9.8a	Made insulting remarks about you, your family or friends?	13%	10%
9.8b	Hit, kicked or assaulted you?	15%	5%
9.8c	Sexually abused you?	0%	2%
9.8d	Threatened or intimidated you?	13%	3%
9.8e	Taken your canteen/property?	0%	3%
9.8f	Victimised you because of medication?	3%	2%
9.8g	Victimised you because of debt?	0%	1%
9.8h	Victimised you because of drugs?	3%	0%
9.8i	Victimised you because of your race or ethnic origin?	0%	2%
9.8j	Victimised you because of your religion/religious beliefs?	0%	0%
9.8k	Victimised you because of your nationality?	0%	0%
9.8k	Victimised you because you were from a different part of the country?	3%	2%
9.8m	Victimised you because you are from a Traveller community?	3%	0%
9.8n	Victimised you because of your sexual orientation?	3%	0%
9.8o	Victimised you because of your age?	3%	1%
9.8p	Victimised you because you have a disability?	0%	1%
9.8q	Victimised you because you were new here?	0%	1%
9.8r	Victimised you because of your offence/crime?	0%	1%
9.8s	Victimised you because of gang related issues?	0%	1%
9.8t	Victimised you because you made a complaint?	3%	1%
9.10	If you were being victimised, would you tell a member of staff?	44%	27%
9.11	Do you think staff would take it seriously if you told them you had been victimised?	56%	30%
9.12	Is shouting through the windows a problem here?	69%	36%
SECTION 10: HEALTH SERVICES			
10.1a	Is it easy for you to see the doctor?	62%	57%

Key to tables

	Any percentage highlighted in green is significantly better	2015 Keppel unit	2015 Wetherby
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		41	152
10.1b	Is it easy for you to see the nurse?	74%	69%
10.1c	Is it easy for you to see the dentist?	40%	34%
10.2	For those who have been to health services: Do you think the overall quality good/very good?	69%	48%
10.3	If you are taking medication, are you allowed to keep some/all of it in your cell?	30%	65%
10.4	Do you have any emotional or mental health problems?	73%	25%
10.5	If you have emotional or mental health problems, are you being helped by anyone here?	75%	61%
10.6	Did you have any problems with alcohol when you first arrived?	25%	8%
10.7	Have you received any help with any alcohol problems here?	13%	3%
10.8	Did you have any problems with drugs when you first arrived?	63%	42%
10.9	Do you have a problem with drugs now?	13%	6%
10.10	Have you received any help with any drug problems here?	35%	20%
10.11	Is it easy/very easy to get illegal drugs here?	21%	19%
SECTION 11: ACTIVITIES			
11.1	Were you 14 or younger when you were last at school?	31%	49%
11.2	Have you ever been excluded from school?	90%	90%
11.3	Did you ever skip school before you came into custody?	83%	80%
Do you currently take part in any of the following:			
11.4a	Education?	95%	66%
11.4b	A job in this establishment?	36%	49%
11.4c	Vocational or skills training?	21%	8%
11.4d	Offending behaviour programmes?	31%	11%
11.4e	Nothing	3%	25%
For those who have taken part in the following activities while in this establishment, do you think that they will help you when you leave prison:			
11.5a	Education?	73%	59%
11.5b	A job in this establishment?	59%	43%
11.5c	Vocational or skills training?	56%	39%
11.5d	Offending behaviour programmes?	67%	39%
11.6	Do you usually have association every day?	97%	81%
11.7	Can you usually go outside for exercise every day?	58%	60%
11.8	Do you go to the gym more than five times each week?	10%	2%
SECTION 12: KEEPING IN TOUCH WITH FAMILY AND FRIENDS			
12.1	Are you able to use the telephone every day?	88%	77%

Key to tables

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	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in young people's background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		41	152
12.2	Have you had any problems with sending or receiving letters or parcels?	50%	50%
12.3	Do you usually have one or more visits per week from family and friends?	28%	28%
12.4	Is it easy/very easy for your family and friends to visit you here?	33%	27%
12.5	Do your visits start on time?	30%	26%
SECTION 13: PREPARATION FOR RELEASE			
Do you think you will have a problem with the following, when you are released:			
13.1a	Finding accommodation?	42%	18%
13.1b	Getting into school or college?	45%	21%
13.1c	Getting a job?	74%	46%
13.1d	Money/finances?	47%	34%
13.1e	Claiming benefits?	42%	13%
13.1f	Continuing health services?	21%	8%
13.1g	Opening a bank account?	26%	16%
13.1h	Avoiding bad relationships?	32%	15%
13.2	Do you have a training plan, sentence plan or remand plan?	73%	46%
For those with a training plan, sentence plan or remand plan:			
13.3	Were you involved in the development of your plan?	92%	89%
13.4	Do you understand the targets set in your plan?	84%	96%
13.5	Do you have a caseworker here?	100%	82%
13.6	Has your caseworker helped to prepare you for release?	60%	36%
For those with a social worker:			
13.7	Has your social worker been to visit you since you have been here?	82%	68%
13.8	Have you had a say in what will happen to you when you are released?	53%	38%
Do you know who to contact for help with the following problems?			
13.9a	Finding accommodation	28%	32%
13.9b	Getting into school or college	31%	28%
13.9c	Getting a job	47%	35%
13.9d	Help with money/finances	33%	27%
13.9e	Help with claiming benefits	31%	23%
13.9f	Continuing health services	8%	19%
13.9g	Opening a bank account	11%	25%
13.9h	Avoiding bad relationships	19%	14%
For those who were sentenced:			
13.11	Do you want to stop offending?	88%	89%
13.12	Have you done anything or has anything happened to you here that you think will make you less likely to offend in the future	74%	48%