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**Expectations**

**Criteria for assessing the treatment of and conditions for detainees in the Military Corrective Training Centre**

**Version 2, 2021**

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**Introduction by Charlie Taylor, HM Chief Inspector of Prisons**

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**Introduction**

Welcome to this edition of *Expectations for the Military Corrective Training Centre,* the criteria against which HM Inspectorate of Prisons inspects the treatment of and conditions for detainees held at the Ministry of Defence’s single central custodial facility. Expectations for the Military Corrective Training Centre (MCTC) were previously incorporated into a set that included Service Custody Facilities. Following our revision of expectations for both types of premises, they now have their own separate editions.

By invitation of the Provost Marshal (Army), we have conducted independent inspections of the MCTC since 2004. The MCTC differs from other forms of detention in some important respects. Both the staff and most of the detainees are service personnel. Many of those detained will resume their careers in the Armed Forces when they are released. However, other detainees are discharged from the services and return to civilian life on release. The MCTC also holds women, children and men, and these *Expectations* seek to make sure that this is done safely and decently. (Throughout these *Expectations* we define children as those under 18, in line with the Children Act 1989.)

This edition brings *Expectations* up to date so that we can continue independently to assess outcomes for detainees held at the centre, in accordance with the UK’s responsibilities as signatory to the Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT).

These *Expectations* are informed by and referenced against international human rights standards. The standards are drawn from those which generally apply to all places of detention and also those which are specific to the Armed Forces, in particular Recommendation CM/Rec(2010)4 of the Committee of Ministers to member states on human rights of members of the Armed Forces.

We have retained four healthy establishment tests, but our previous ‘resettlement’ test has been renamed ‘rehabilitation and release planning’, because this more accurately describes its content. For the first time we have included expectations for judging the effectiveness of leadership. We will make judgements when leadership has an observable impact on outcomes for detainees, and any judgements we make will relate to how leadership supports or obstructs the achievement of other expectations within the centre.

I hope that these latest *Expectations* will support the MCTC in its efforts to provide good outcomes for detainees.

**Charlie Taylor**

**HM Chief Inspector of Prisons**

**July 2021**

**Healthy establishment tests**

Expectations are organised under HM Inspectorate of Prisons’ four tests of a healthy establishment. For the Military Corrective Training Centre these are:

**Safety**

Detainees, particularly the most vulnerable, are held safely.

**Respect**

Detainees are treated with respect and dignity.

**Purposeful activity**

Detainees are able and expected to engage in activity that is likely to benefit them.

**Rehabilitation and release planning**

Detainees have a comprehensive sentence plan and can access interventions to address their offending behaviour. Detainees are supported to maintain and develop relationships with their children, family and friends. Detainees are thoroughly prepared for release. Detainees’ risk of serious harm to the public is managed effectively.

We have also included expectations for judging the effectiveness of **leadership** in the establishment.

Each expectation area provides an expected outcome, expectations and indicators.

**Expectations**

Describe the standards of treatment and conditions we expect an establishment to

achieve.

**Indicators**

Suggest evidence that may indicate whether the expectation/outcomes have been

achieved. The list of indicators is not exhaustive and they do not exclude an

establishment demonstrating the expectation has been met in other ways.

# **Section 1: Leadership**

**Leaders provide the direction, encouragement and resources to enable good outcomes for detainees.** (See Appendix I, note i.)

**Expectations**

1. **Direction: Leaders work collaboratively with staff, stakeholders and detainees to set and communicate strategic priorities that will improve outcomes for detainees.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Leaders and staff understand the centre’s strengths and weaknesses and where outcomes need to improve.*
* *Leaders have a good understanding of the experiences of detainees and staff in the centre.*
* *Leaders communicate a shared and ambitious vision for the centre.*
* *Realistic, aspirational plans are in place to improve outcomes for detainees.*
* *Staff understand and share the aims and priorities of the centre.*
* *Leaders develop successful working relationships with key partners and stakeholders to deliver the centre’s aims.*

1. **Engagement: Leaders create a culture in which staff and other stakeholders willingly engage in activities to improve outcomes for detainees.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Leaders at every level are visible and approachable.*
* *Leaders take time to listen to staff and detainees and follow up issues raised.*
* *Effective communication is used to promote understanding of current priorities, information sharing, collaboration and multidisciplinary working.*
* *Leaders set, model and enforce standards of staff behaviour and care for detainees that support rehabilitation.*
* *Leaders actively promote the well-being of staff.*
* *Staff feel motivated and supported in their work.*
* *Leaders show and encourage innovation and creativity to solve problems and meet the needs of detainees.*
* *Effective practice is recognised and shared.*
* *The organisational culture encourages staff to reflect on and learn from their mistakes.*

1. **Enabling: Leaders provide the necessary resources to enable good outcomes for detainees.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Staffing levels are sufficient to deliver the aims of the centre.*
* *Staff have the knowledge, skills and attitudes necessary to meet the needs of detainees.*
* *Leaders make good use of the staff and buildings at their disposal.*
* *Leaders identify resource constraints and seek to resolve them.*
* *The senior management team has the experience and skills necessary to improve outcomes for detainees.*
* *Line managers support their staff, challenge where necessary and provide suitable professional development opportunities.*
* *ICT systems support effective working practices.*

1. **Continuous improvement: Leaders focus on delivering priorities that support good outcomes for detainees. They closely monitor progress against these priorities.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Data is used effectively to understand the impact and fairness of policies, and to track progress against improvement plans.*
* *Feedback from detainees, staff and other stakeholders is used to generate ideas, create plans and measure progress.*
* *Decisions are made and plans are amended in response to new information.*
* *Leaders welcome and encourage external scrutiny.*
* *Inspection recommendations, audit findings, serious incident reports and best practice ideas are used to generate improvement.*
* *Leaders use quality assurance processes to drive continuous improvement.*
* *Collaboration with colleagues in partner organisations supports improvement.*

In relation to expectations 1–4, human rights standards emphasise that detention should be managed within a context which recognises the obligation to treat all detainees with dignity and which facilitates the reintegration of detainees. Standards recognise the important role of staff in rehabilitation and the need for adequate staffing levels to ensure a safe environment. Staff should receive ongoing training, including to undertake specialist roles and work with particular groups of detainees. Arrangements should be in place to ensure good communication and coordination both within and outside of the centre and the involvement of voluntary organisations should be encouraged. See EPR 6, 8, 72–87, 89–91, 93; SMR 1, 3, 74–80, 83; BOP 1; BR 1, 29, 33, 35; HR 81–87. See also CM/Rec(2010)4, 13.

**Section 2: Safety**

**Detainees, particularly the most vulnerable, are held safely.**

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**Early days in custody**

**Detainees transferring to the establishment are safe and their needs are met. On arrival, detainees are treated with respect and any risks are identified and addressed. Detainees are safe and supported on their first night. Induction is comprehensive.**

**Expectations**

1. **Detainees are transported to the establishment safely and in accordance with their needs.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees know where they are going and what to expect when they arrive.*
* *Escorting staff are aware of detainees’ individual needs. All necessary information identifying issues relating to risk or self-harm is recorded in the detainee escort record. This is completed thoroughly and accompanies the detainee on their journey.*
* *Confidential information that travels with the detainee is securely sealed and is only accessed in an emergency.*
* *Detainees are escorted in suitable vehicles which are safe, secure, clean and comfortable and are fully equipped to cater for their different needs.*
* *Escorting staff can easily observe detainees and detainees are always able to communicate with staff. Escorting staff regularly check on detainees’ welfare.*
* *Women, children (see Appendix II, note ii) and adult men are transported in separate vehicles.*
* *Women and girls are transported in vehicles with a female escorting staff member.*
* *Detainees are given adequate comfort breaks and refreshments during transfer, according to their specific needs.*
* *Detainees arrive wearing suitable clothing for their continued detention.*
* *Detainees’ personal belongings accompany them during their transfer to the establishment.*
* *Detainees are not made to wait outside the establishment in vehicles. There is an ongoing risk assessment of all detainees where there is a delay in reception processes.*
* *Detainees arrive at the establishment early enough to allow reception and first night procedures to be conducted effectively.*

1. **On arrival, detainees are treated with respect, their individual risks are identified and necessary support is implemented.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *The reception area is a welcoming and supportive environment.*
* *All searches are undertaken by staff of the same sex as the detainee.*
* *Detainees are only strip-searched when there are evidenced or justified security concerns. Strip-searching is appropriately authorised with a written record of the justification and authorisation. It is carried out in private by more than one member of staff. Children are only ever strip-searched in the presence of an appropriate adult.*
* *The needs of newly arrived detainees are promptly assessed to ensure their safety, with particular attention to the risk of suicide and self-harm.*
* *Staff use all existing, up-to-date information about a detainee to complete a risk assessment.*
* *Private interviews with establishment and health care staff identify a detainee’s vulnerability and risk.*
* *Staff use accredited translation and interpreting services to communicate with detainees whose first language is not English whenever accuracy and confidentiality is important.*
* *Staff understand that some detainees, such as those transferring to prison and those convicted of sexual and other serious offences, might be at heightened risk.*
* *Staff understand the different ways in which detainees may present mental health problems and other vulnerabilities and respond appropriately.*
* *Detainees identified as vulnerable are given immediate and appropriate support.*
* *Appropriate action is taken to identify children or other dependants (see Appendix II, note iii) who may be at risk because of their carer’s detention, and to ensure their safety where necessary.*
* *The parents and guardians or closest relative of children detained are informed of their whereabouts, unless this is not in the best interests of the child.*
* *Peer supporters are used effectively to support detainees in the reception area.*
* *Detainees are provided with their personal property on their first night.*
* *Detainees are moved quickly to their first night accommodation.*

1. **Detainees are safe on their first night in the establishment.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Staff responsible for first night accommodation are aware of and manage any immediate detainee vulnerability or risk.*
* *Room sharing risk assessments which take account of offending behaviour are carried out for all detainees.*
* *Children do not share a room with adults other than in exceptional circumstances, when this is in their best interests and with their consent. Decisions take account of their need for social interaction and the impact of potential isolation.*
* *Women and girls do not share a room with men or boys.*
* *Detainees not yet sentenced are located separately from other sentenced detainees.*
* *Detainees know how to access help and support from staff on their residential unit.*
* *Detainees can shower and get a hot meal.*
* *Detainees can make a free telephone call, subject to any immediate public protection concerns.*
* *Detainees receive basic essential items such as toiletries and bedding.*
* *Peer supporters are used effectively to support detainees.*
* *Regular welfare checks are carried out on new arrivals throughout their first night.*

1. **Detainees are promptly inducted and supported to understand life in the establishment.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees receive a comprehensive, multidisciplinary and easy-to-understand induction which informs them about the rules, regime and practicalities of day-to-day life in the establishment.*
* *Detainees who have not been convicted or charged are identified promptly and supported to exercise their legal rights.*
* *Detainees under sentence are informed about their sentence length and how to earn remission in a way they understand.*
* *Detainees are told about any final decision to retain them in, or discharge them from, the Armed Forces. Where no decision has been reached, detainees are told why they have been provisionally designated as either ‘retained’ or ‘discharged’ for the purposes of their detention.*
* *Induction includes a private conversation with a member of staff to identify and address any outstanding concerns, with a clear focus on anxiety caused by detention and its implications.*
* *Detainees transferring to prison receive additional support to help them cope with the implications.*
* *Detainees’ immediate needs, such as maintaining accommodation, managing debts and supporting dependants, are identified and met.*
* *Detainees know about the support available to help them manage their specific needs and experiences, for example relating to domestic violence or trauma.*
* *All detainees are meaningfully occupied during induction and are promptly allocated purposeful activity.*
* *Detainees are supported to arrange their first social visit.*

In relation to expectations 5 to 8, human rights standards set out a range of standards relating to arrival and early days in custody, including requiring detainees to be provided with information about their place of detention in a language and format they understand, identifying their health care and other needs, ensuring their safety and allowing them to inform someone of their whereabouts. As a general rule, women and men, adults and children (see Appendix II, note ii), and untried and sentenced detainees should not share rooms but should be allowed the benefits of undertaking activities and socialising together (subject to supervision). Detainees must be transported safely in suitable vehicles. See ICCPR 10; CRC 37(c); EPR 14–16A; 18.8, 24.8–24.9, 30, 32; SMR 7–9, 30, 34, 54, 55, 73, 112; BOP 16; BR 6–7; ERJO 59–60, 62, 99; HR 21–27, 29. See also CM/Rec(2010)4 23, 81; CPT/Inf(2018)24, Transport of detainees.

**Safeguarding**

**The establishment provides a safe environment which reduces the risk of self-harm and suicide. Detainees at risk of self-harm or suicide are identified and given appropriate care and support. The establishment promotes the welfare of children and protects them from all kinds of harm and neglect. Any vulnerable adults at risk are identified, protected from harm and neglect and receive effective care and support.**

**Expectations**

Self-harm and suicide prevention

1. **The establishment provides a safe and secure environment which reduces the risk of self-harm and suicide.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *There is a clear strategy for preventing self-harm and suicide, which recognises the different needs and risks of detainees.*
* *A multidisciplinary committee monitors the establishment’s self-harm and suicide prevention strategy and procedures and makes sure there is support for those at risk.*
* *Incidents of self-harm are monitored and any emerging patterns are identified and acted on.*
* *Investigations into any attempts by detainees to take their own lives are thorough and appropriately independent. They identify opportunities for improvement which are rigorously pursued.*
* *Where there has been a death in custody, managers respond quickly and comprehensively to subsequent investigations. Any recommendations, particularly from the coroner's court, are prioritised, acted on and regularly reviewed.*
* *Staff are trained in suicide prevention processes and know how to support detainees who self-harm.*
* *Staff are trained to identify and support detainees who may have mental health problems, or who have been affected by trauma.*
* *Detainees' family and friends know how to raise a concern about the risk of self-harm or suicide, can ask for support to be initiated, and are kept appropriately informed.*
* *Personal possessions are only removed from a detainee in documented exceptional circumstances, following a multidisciplinary review.*
* *The removal of clothing to manage self-harm is based on an individual risk assessment. It only occurs as a last resort when other options have been considered.*
* *Detainees at risk of suicide or self-harm are not held in special or unfurnished accommodation except in clearly documented exceptional circumstances, on the authority of the Commandant and in consultation with health care staff.*
* *Staff are clear about what to do in an emergency, including when to enter a locked room.*
* *Staff checking detainees always carry anti-ligature knives.*
* *Appropriate first aid equipment is readily available and sufficient staff working on the residential units are trained to use it.*

1. **Detainees at risk of self-harm or suicide receive individualised care from a multidisciplinary team and have unhindered access to help, including from their families.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Individualised care plans, developed by a multidisciplinary team in consultation with the detainee, are used to identify and deliver the actions needed to reduce the risk of suicide and self-harm. Care plans are reviewed at least weekly and following any change in risk. Reviews take account of observations recorded by staff.*
* *The care and support of a detainee is overseen by a single case manager.*
* *Information about detainees at risk of self-harm or suicide is shared effectively with all staff involved in their care.*
* *Measures to support detainees are proportionate to their individual risk of suicide and self-harm and are not unnecessarily intrusive.*
* *Detainees with complex self-harm/suicidal behaviours are given additional support, where necessary overseen by senior managers.*
* *There are arrangements to check on detainees after a care plan has been closed.*
* *Procedures to reduce the risk of suicide or self-harm are rigorously quality assured.*
* *Staff are supportive and constructive with detainees at risk of self-harm or suicide.*
* *Detainees at risk of self-harm or suicide can telephone the Samaritans 24 hours a day, seven days a week.*
* *Detainees at risk of self-harm or suicide have access to a counsellor, the chaplain and welfare department, and peer support.*
* *Detainees at risk of self-harm or suicide can use a comfortable, quiet and private room to speak to other detainees, peer workers or staff identified as sources of support, or telephone the Samaritans, their family and friends.*
* *Constant supervision is used infrequently. When it is necessary, staff create a positive environment which encourages and provides access to a purposeful regime.*
* *Staff encourage detainees to involve their family or friends in their care.*
* *Appropriate liaison arrangements are in place to support detainees on release back into the Armed Forces or the community. Information is shared subject to the detainee’s consent.*

Safeguarding of children (see Appendix II, note ii)

1. **Children are provided with a safe and secure environment which protects them from harm and neglect. They receive services that are designed to deliver safe and effective care and support.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Children (those under 18) feel safe and are protected from harm.*
* *Risk assessments ensure the safety and best interests of children.*
* *Children are allocated and informed of the identity of a named member of staff who is responsible for meeting their welfare needs while detained. Girls are allocated a female member of staff.*
* *Staff have the time to build positive relationships with children and to effectively respond to their concerns.*
* *Multidisciplinary planning provides effective care and support for children. This is done in consultation with the child, to identify and implement strategies for reducing risk.*
* *Staff are subject to recruitment and vetting procedures that comply with necessary legislation.*
* *The arrangements for external scrutiny of safeguarding performance at custodial establishments are published by the local safeguarding partnership.*
* *There is a process for notifying the safeguarding partnership of significant events involving a child, including any injuries, use of force or child protection referrals.*
* *Outcomes of child protection referrals are clearly recorded, including the support given to children who are the subject of any referrals or inquiries.*
* *Children are consulted regularly, particularly about their safety. There is evidence of action and outcomes where children have raised concerns about safety.*
* *Children are helped to understand how to keep themselves safe from abuse, bullying and discrimination.*
* *Children’s families, carers, friends, legal representatives and external agencies can easily provide information to the establishment about children, including any support needs.*

1. **Child protection concerns are identified and investigated, and action is taken to prevent further harm.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Staff immediately take appropriate action to protect children from harm.*
* *Staff understand and follow procedures for responding to concerns about the safety of a child. Any child protection concerns are shared with the local authority without delay, and a record of that referral and outcome is retained.*
* *Children can raise concerns in confidence with a range of people and services outside the establishment.*
* *Staff follow up the outcome of referrals quickly. They escalate their concerns appropriately and without delay if they are dissatisfied with the response from local authority children’s services.*
* *Investigations into allegations or suspicions of harm are shared with the appropriate agencies and are handled fairly, quickly and in accordance with statutory guidance. Children are supported and protected, including through specialist mental health and medical care. Support is given to the person making the allegation.*
* *Children who allege abuse or mistreatment are offered the help of an independent advocate at all stages of their complaint.*
* *Children or parents who allege harm are given a written response which sets out the action that has been, or will be, taken.*
* *The establishment has effective links with local authorities, designated officers and other safeguarding agencies.*
* *Visitors and families know how to raise concerns directly to the local authority if they think a child is being, or has been, mistreated while in custody.*
* *Alleged criminal acts are investigated in the same way as outside of detention.*

Safeguarding of vulnerable adults at risk (see Appendix II, note iv)

1. **Vulnerable adults at risk are provided with a safe and secure environment which protects them from harm and neglect. They are** **appropriately located and supported by trained staff who are resourced to meet their needs.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Vulnerable adults at risk feel safe and are protected from harm.*
* *There is a local safeguarding strategy to protect vulnerable adults at risk and a nominated local manager has responsibility for implementing it.*
* *Staff are aware of their responsibility to protect vulnerable adults at risk and know how to recognise signs of harm.*
* *Risk assessments ensure the safety and best interests of vulnerable adults at risk.*
* *Staff engage with all relevant agencies to make sure vulnerable adults at risk are appropriately cared for and supported.*
* *Vulnerable adults at risk can access a range of support services and staff encourage them to involve their family or friends in their care.*
* *Vulnerable adults at risk are held in an environment where they can easily access the support they need and a purposeful regime.*
* *Vulnerable adults at risk are not held in segregation unless in exceptional circumstances and justified in writing by a senior manager.*
* *Individual care plans are developed to manage the assessed needs of a vulnerable adult at risk.*
* *Consistent case managers are allocated to all vulnerable adults at risk and are responsible for the oversight of their care plans between reviews.*

1. **Concerns about vulnerable adults at risk are** **identified and investigated, and action is taken to prevent further harm.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Staff immediately take appropriate action to protect vulnerable adults at risk from harm.*
* *Staff understand and follow procedures for responding to concerns about the safety of a vulnerable adult at risk. Any concerns about a vulnerable adult at risk are shared with the local authority adult safeguarding board without delay, and a record of that referral and outcome is retained.*
* *Vulnerable adults at risk who allege abuse or mistreatment are offered the assistance of an independent advocate at all stages of their complaint.*
* *Visitors and families know how to raise concerns directly to the local authority adult safeguarding board if they think a vulnerable adult at risk is being, or has been, mistreated while in custody.*
* *Staff follow up the outcome of referrals quickly. If they are dissatisfied with the response from the local authority adult safeguarding board, they escalate their concerns appropriately and without delay.*
* *Investigations into allegations or suspicions of harm are shared with the appropriate agencies and are handled fairly, quickly and in accordance with statutory guidance. Vulnerable adults at risk are supported and protected. Support is given to the person making the allegation.*
* *Vulnerable adults at risk or any other detainees, staff or visitors who allege harm are given a written response which sets out the action that has been, or will be, taken.*
* *The establishment has effective links with local authorities and other safeguarding agencies.*
* *Alleged criminal acts are investigated in the same way as outside of detention.*

In relation to expectations 9 to 14, human rights standards are clear that detainees must be held safely. Detainees’ right to life must be protected and promoted and positive steps taken to minimise their risk of harming themselves. Any child who is detained must be protected from exploitation and abuse and be provided with care and protection to ensure their well-being. Staff should receive adequate training to allow them to work with detainees with particular needs. See ECHR 2, 3, 8; ICCPR 6, 7, 10; CRC 6, 34, 36, 37(c); SMR 75, 76; EPR 1, 52.2, 81; ERJO 1, 51, 70–73, 122, 129; HR 1, 12, 49, 51, 52, 82, 84–87; BR 12–13, 16, 29, 33, 35. See also CM/Rec(2010)4 7–13, 80.

**Managing behaviour**

**Detainees live in a safe, well ordered and motivational environment. Unacceptable conduct is dealt with in an objective, fair, proportionate and consistent manner. Positive behaviour is promoted and rewarded.**

**Expectations**

Minimising violence and antisocial behaviour

1. **A clear and coordinated approach across the establishment ensures that detainees feel and are safe from victimisation, violence and other antisocial behaviour.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *There is an effective multidisciplinary strategy to reduce violence and antisocial behaviour which considers the specific needs of minority groups.*
* *Incidents or allegations of victimisation, violence and other antisocial behaviour are thoroughly investigated to understand the causes and action is taken when required.*
* *Data on disorder and violence against detainees and staff are regularly analysed and used to inform strategy.*
* *Staff promote positive and supportive relationships, identify and challenge problematic behaviour and model pro-social behaviour.*
* *Mediation is used appropriately to help resolve disputes.*
* *Vulnerable detainees are protected and do not live in the same room as perpetrators of violence.*
* *Staff identify detainees who do not engage in daily life and provide support to promote positive relationships, well-being and participation in the regime.*
* *Perpetrators of violence and antisocial behaviour receive support to change their behaviour.*
* *Approaches to managing behaviour consider the complex needs of detainees and their individual care and support plans.*
* *Detainees are protected from extremist ideologies.*

1. **Detainees are encouraged to behave well and are involved in promoting a healthy and safe community.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *The establishment has a clear strategy for encouraging good behaviour which motivates detainees to contribute to their community, sets out what is expected of them and explains what they can achieve if they behave well.*
* *Behaviour management schemes reward good behaviour and motivate detainees to participate in their own progression.*
* *Staff support detainees to change their behaviour, giving them advice and opportunities to behave well.*
* *Detainees are actively involved in developing and reviewing behaviour management schemes.*
* *Behaviour is reviewed regularly. Detainees can participate in reviews and demonstrate their progress.*
* *Decisions to remove detainees’ privileges are well communicated and clearly evidenced. These decisions are reviewed at the earliest opportunity.*
* *Decisions made about detainees’ progress are quality assured.*
* *Detainees know they can appeal against behaviour management scheme decisions and are helped to do so.*
* *The establishment’s approach to encouraging good behaviour is proportionate, takes account of individual needs and is applied fairly and consistently to all detainees.*

Disciplinary procedures

1. **Detainees are subject to disciplinary procedures which are fair and proportionate and follow due process. Detainees understand the charges and procedures they face.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Wherever possible, antisocial behaviour is challenged effectively without the use of formal disciplinary procedures, which are only used as a last resort.*
* *Detainees who lack capacity to obey the rules because of mental illness or disability are not adjudicated.*
* *No unofficial or collective punishments are used.*
* *Detainees understand the charges they face and have time to prepare for a hearing.*
* *Hearings are conducted in non-intimidating surroundings.*
* *Detainees are routinely offered legal advice and given enough time to seek it.*
* *Hearings include multidisciplinary input from those who are supporting detainees to help explain their behaviour and make sure punishments do not interfere with rehabilitative work.*
* *Findings, punishments and the appeals process are clearly explained to detainees.*
* *The Commandant conducts adjudications regularly and routinely checks the quality of a proportion of adjudications conducted by others.*
* *Adjudication data is monitored and any emerging patterns are identified and acted on.*
* *Adjudications are conducted promptly in non-intimidating surroundings.*

In relation to expectations 15 to 17, human rights standards make it clear that detainees must understand the rules that apply to them. Conflict prevention, mediation or other forms of alternative dispute resolution should be used where possible and disciplinary procedures should be a last resort. Detainees must always have the charges against them explained in a way they understand and be able to seek legal advice. Any punishments should be proportionate to the severity of the offence and there must be no collective or unofficial punishments. See EPR 30, 56–60.5, 61–63; BP 30; SMR 36–41, 95; ERJO 88, 94, 95.1–95.3, 95.6–95.7; HR 24–25, 66–71, 87(a). See also CM/Rec(2010)4 17–21.

Use of force

1. **Force is only used against detainees as a last resort and never as a punishment. When used, force is legitimate, necessary, proportionate, and subject to rigorous governance.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *All staff are trained in and use effective de-escalation techniques.*
* *Where force is used, staff only use approved techniques in line with their training.*
* *Staff are aware of the risks associated with particular forms of restraint and how these risks can be minimised.*
* *Detainees with challenging behaviour have care plans which highlight risk factors and set out other ways of managing them which reduce the likelihood of restraint techniques becoming necessary.*
* *A use of force plan is in place for all detainees with a medical condition who may be adversely affected by restraint. All staff are aware of the information in the plan and use it during restraint.*
* *Only age-appropriate and approved restraint techniques are used for children.*
* *Decisions to use personal protective equipment (PPE) are proportionate to the risks posed and are reviewed regularly by a senior manager.*
* *Mechanical restraints are used by staff as a last resort and for the shortest possible period.*
* *Health care staff are present whenever use of force is planned and give appropriate information to staff.*
* *Planned use of force is properly authorised and filmed.*
* *Force is not used against pregnant women unless it is to prevent harm.*
* *When force is used, detainees are examined promptly afterwards by an appropriately qualified health care professional.*
* *After a use of force incident, detainees have an opportunity to talk to staff about what happened to help prevent recurrence.*
* *All staff involved in the use of force against a detainee complete individual use of force statements promptly, which clearly explain what happened and why force was used.*
* *Use of force documentation and associated CCTV or video footage is retained appropriately and is subject to robust quality assurance to make sure any force used is necessary and proportionate and to identify and address any learning.*
* *Use of force data is monitored and any emerging patterns are identified and acted on.*

1. **Detainees are not located in special or unfurnished accommodation or placed in mechanical restraints or anti-rip clothing, except as a last resort and with proper authorisation.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Special or unfurnished accommodation, mechanical restraints or anti-rip clothing are properly authorised by a senior manager and only used for the shortest possible period.*
* *The use of any cell/room from which normal furniture, bedding or sanitation has been removed or in which a person is held in anti-rip clothing is authorised and recorded as a use of special or unfurnished accommodation.*
* *Detainees are not strip-searched or deprived of their normal clothing in special or unfurnished accommodation unless there is sufficient specific intelligence and proper authorisation. Detainees are never required to squat for searching.*
* *Detainees with severe mental illness and detainees at risk of suicide or self-harm are not held in special or unfurnished accommodation except in clearly documented, exceptional circumstances, on the authority of the Commandant and in consultation with health care staff.*
* *Monitoring of detainees in special or unfurnished accommodation is carried out at frequent and irregular intervals.*
* *Staff encourage detainees to return to their normal room at the earliest opportunity.*

Segregation

1. **Detainees are only segregated with proper authority and for the shortest possible time.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees are not segregated except as a last resort, for as short a time as possible and subject to proper authorisation.*
* *Children, detainees with severe mental illness and detainees at risk of suicide or self-harm are not segregated except in clearly documented exceptional circumstances on the authority of the Commandant.*
* *Children and vulnerable adults are never segregated as a punishment.*
* *Detainees are informed of the reasons for their segregation in a format and language they understand.*
* *A multidisciplinary staff group monitors detainees held in segregation to make sure they are held there as a last resort and for the shortest possible time.*

1. **Detainees are always kept safe while segregated and individual needs are recognised and given proper attention.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *There is a clear focus on meeting individual need and providing care and support for segregated detainees.*
* *Health staff promptly assess any detainee who is segregated and contribute to their care plan.*
* *Segregated detainees’ mental health is closely monitored and they receive the support they need.*
* *Detainees are never subjected to a regime which amounts to solitary confinement (see Appendix II, note v).*
* *Detainees have meaningful conversations with a range of staff every day, including the opportunity to speak in confidence with a senior manager, a health care professional and the chaplain.*
* *Segregated detainees are told that they can speak to an independent visitor and any request is promptly facilitated.*
* *Staff are vigilant in detecting signs of decline in mental health, mitigate the social isolation inherent in segregation and actively seek alternative locations.*
* *Reviews are held regularly, are multidisciplinary and detainees are encouraged to attend.*
* *Staff are appropriately trained and supported to deliver segregation.*
* *Systems are in place to understand and address the behaviour leading to segregation.*
* *Segregated detainees are only strip-searched when there are evidenced or justified security concerns. Strip-searching is appropriately authorised with a written record of the justification and authorisation. It is carried out in private by more than one member of staff. Staff conducting the search are the same sex as the detainee. Children are only ever strip-searched in the presence of an appropriate adult.*

1. **Segregated detainees have daily access to the telephone and a shower and a range of purposeful activities comparable to the rest of the establishment.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *The regime for a segregated detainee is tailored to their individual need. Detainees know what to expect and they have the opportunity to use the telephone and take a shower every day.*
* *Detainees have at least one hour of outside exercise every day.*
* *Detainees subject to long-term segregation have a care plan and are encouraged and supported to associate with others and return to living in normal accommodation.*
* *Detainees are provided with extra care and support after a period of isolation to help prevent future episodes.*
* *Detainees have appropriate activities to occupy and stimulate them in their cells.*
* *Subject to risk assessment, detainees can access the same facilities and privileges as elsewhere in the establishment, including regime activities and peer supporters.*
* *Detainees have access to outside exercise and other activities together, subject to appropriate risk assessment.*

In relation to expectations 18 to 22, human rights standards only allow for the use of force and restraint when absolutely necessary and as a measure of last resort. The force or restraint used must be the minimum necessary and for the shortest possible time. There must be clear procedures governing the use of force and restraint and staff must be trained to use techniques that minimise the use of force. Separation of detainees must also only be used when absolutely necessary, for the shortest possible time, and when proportionate to the desired outcome. Because of the harm that can be caused by separation, specific and additional safeguards need to be in place, including regular reviews of the reasons for separation and daily visits from health care staff. Separated detainees must have at least one hour of exercise and two hours of meaningful human contact each day. See CRC 3; CAT 1, 2, 16; ECHR 3, 8; ICCPR 7, 10; CRPD 15; EPR 53–53A, 64–66, 68–69; SMR 43–49, 67, 83; BR 24; ERJO 90, 91.2, 93, 95.3; HR 63–65. See also CM/Rec(2010)4 10, 13.

**Security**

**Security and good order are maintained through attention to physical and procedural matters, including effective security intelligence and positive relationships between staff and detainees. Detainees are safe from exposure to substance misuse and there are effective drug supply reduction measures.**

**Expectations**

1. **Detainees are held in a safe environment where security is proportionate.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *There are no weaknesses or anomalies in the physical and procedural security of the establishment.*
* *Security is proportionate to risk and not unnecessarily restrictive.*
* *Staff provide good supervision of detainees during association and movement around the establishment.*
* *The risk of detainees absconding is well managed, including while they are being escorted.*
* *Restraints are only used while detainees are being escorted and when it is justified by individual risk assessment.*
* *Detainees’ immediate needs are met while they are being escorted.*
* *Risk assessments for unsupervised temporary release are comprehensive and take account of detainees’ offending behaviour.*
* *Any incidents on temporary release or failures to return to the establishment are thoroughly investigated.*
* *The criteria to ban or otherwise restrict visitors relate only to abuse of visits and individual restrictions are reviewed regularly. Decisions show that proper consideration is given to any potential impact on the detainee’s mental health or their risk of self-harm and suicide.*

1. **The well-being of detainees is safeguarded by effective intelligence and proportionate searching measures.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Effective and responsive intelligence and security measures are in place.*
* *Decisions based on intelligence are proportionate to the risk posed and take account of the reliability of the evidence. These decisions are consistently and promptly actioned.*
* *Security systems identify current and emerging threats.*
* *There are effective liaison arrangements with the local police.*
* *There are systems to identify any threats from detainees with extremist ideologies.*
* *The approach to security respects cultural, racial and religious difference and actively promotes tolerance and acceptance of difference.*
* *Detainees are only strip-searched when there are evidenced or justified security concerns. Strip-searching is appropriately authorised with a written record of the justification and authorisation. It is carried out in private by more than one member of staff. Staff conducting the search are the same sex as the detainee. Children are only ever strip-searched in the presence of an appropriate adult.*
* *Children and vulnerable adults are never strip-searched using force.*
* *If children are strip-searched, they understand why and the process for doing so. They are offered help from an independent advocate to record any questions or concerns they have about why they were strip-searched, or how it was carried out.*
* *Detainees are told that their rooms or personal property are being searched and the rooms or property are left in the condition in which they were found.*
* *Routine searching is not excessive.*
* *Searches are thorough and systematically recorded.*
* *All searches are undertaken with respect and as privately as possible.*

1. **Effective processes are in place to protect detainees from misconduct or illegal conduct by staff.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees know how to make confidential complaints about staff and are confident that the system works effectively.*
* *Detainees and staff know the identity of the manager at the establishment responsible for corruption prevention.*
* *Immediate protection from reprisals is provided to detainees and staff who report misconduct or ill-treatment by staff.*
* *Reports of misconduct and ill-treatment are investigated by a competent and appropriately independent authority.*
* *Where inappropriate or abusive practice is found, staff are held to account.*
* *Staff know about whistleblowing arrangements and feel confident about using them.*

1. **There is an effective drug supply reduction strategy.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *There is a strategic approach to reducing drug and alcohol supply which involves staff from across the establishment. This approach reflects emerging trends and there are effective links with the support offered to detainees to stop or reduce their use of alcohol or drugs.*
* *Where problems are identified, remedial action is promptly taken and evaluated.*
* *Compulsory drug testing (CDT) takes place in a suitable environment and is conducted consistently in line with protocols which make sure procedures are valid.*
* *Detainees who test positive or refuse to be tested on CDT, or who are involved in suspected drug-related incidents, are referred to substance misuse services.*

In relation to expectations 23 to 26, human rights standards set out that detainees should be held with no more security restrictions than necessary to ensure safe custody and good order. There must be clearly defined procedures and justifications for conducting searches, and they must be conducted in a manner which respects human dignity and privacy, as well as the principles of proportionality, legality and necessity. In addition, detainees must be able to complain about their treatment, in confidence if they wish, without fear of negative consequences. See ECHR 3, 8; CRC 16; ICCPR 7, 10.1; CAT 2, 10, 12–13, 16; SMR 36, 47–50, 54–57; EPR 3, 18.10, 68, 70; ERJO 53.2–53.3, 54.1–54.5, 54.8–54.10, 89.1, 89.3, 89.4; HR 75–78; BR 19, 20, 25; BOP 1, 6, 33. See also CM/Rec(2010)4 10–13.

**Section 3: Respect**

**Detainees are treated with respect and dignity.**

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**Staff-detainee relationships**

**Detainees are treated with respect by staff throughout their time in custody and are encouraged to take responsibility for their own actions and decisions.**

**Expectations**

1. **Detainees are treated with care and respect. Relationships between detainees and staff are positive and courteous.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Staff and detainees are fair and courteous to each other.*
  + *Staff talk to detainees and try to get to know them as individuals.*
  + *Staff support detainees who find it difficult to talk to staff of a higher rank and encourage them to do so.*
  + *Senior managers lead by example and regularly spend time talking to detainees on residential units.*
  + *When staff need to relay sensitive or unwelcome news to detainees, they do this in private and with compassion.*
  + *Staff treat detainees’ rooms and possessions with respect.*
  + *Staff understand the impact of life experiences, such as trauma, abuse and mental illness, on the behaviour of detainees.*
  + *When rules are breached, staff take time to explain how and why to the detainee concerned.*
  + *Staff are able to access support to help them manage the emotional demands of their work.*

1. **Detainees are encouraged and supported to take responsibility for their rehabilitation and to contribute positively to the community.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Detainees take responsibility for meeting their own needs.*
  + *Detainees are encouraged to attend activities regularly and punctually.*
  + *Inappropriate conduct by detainees, including any verbal abuse, is routinely challenged.*
  + *Staff support and motivate detainees to engage positively with activities designed to reduce their risk of reoffending. Staff help detainees to prepare for release.*
  + *There is an organised and structured scheme which allows detainees to support their peers.*
  + *Peer workers’ roles are clearly defined and they receive appropriate training, support and supervision.*

1. **Staff support detainees emotionally and practically and help them to make positive changes in their lives.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Staff know detainees and their personal circumstances well.*
  + *Staff encourage detainees to have contact with the outside world.*
  + *Staff are caring and compassionate and support detainees to make good choices and manage their emotions.*
  + *Where appropriate, staff use care plans to coordinate care for the most vulnerable detainees.*
  + *Staff are aware of the services available in the establishment and use them to help detainees.*
  + *Staff encourage detainees to reflect on the consequences of their behaviour and use mediation to resolve conflict.*
  + *Staff believe in the possibility of rehabilitation and support detainees to achieve their objectives.*
  + *Staff help detainees with their resettlement issues.*
  + *Staff are consulted on matters relating to the detainees in their care.*
  + *Staff maintain an accurate chronological record of contact with detainees.*

In relation to expectations 27 to 29, human rights standards emphasise that all detainees should be treated with humanity and respect for their inherent dignity. Staff should model positive behaviour and their training and conditions should enable them to maintain high standards of care for detainees. See ICCPR 10.1; SMR 1, 5.1, 74.1, 75–77; EPR 72–77, 81, 83, 87.1; BOP 1; ERJO 18, 19, 127–130, 132; HR 12, 81–87; BR 29–35.

**Daily life**

**Detainees live in a clean and decent environment and are aware of the rules and routines of the establishment. They are provided with essential basic services, are consulted regularly and can apply for additional services and assistance.**

**Expectations**

Living conditions

1. **Detainees live in a clean and decent environment which is in a good state of repair and fit for purpose.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Communal areas are well-maintained, clean and free from graffiti.*
  + *Rooms provide adequate space for the number of detainees held, are free from potential ligature points and graffiti, are properly ventilated and heated and are well lit (including by natural light).*
  + *As a minimum, detainees have their own bed, chair and lockable cupboard and enough space to store personal belongings.*
  + *All in-room toilets have lids and are screened, and all washing facilities are screened.*
  + *Detainees always have access to clean drinking water, a toilet and washing facilities.*
  + *Residential units are as quiet as possible at night with appropriate lighting to enable rest and sleep.*
  + *Outside areas are well maintained and clean.*

1. **Detainees are appropriately and safely located in their residential units and understand the rules and routines of the establishment, which encourage responsible behaviour.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Room sharing risk assessments which take account of offending behaviour are carried out for all detainees.*
  + *Children do not share a room with adults other than in exceptional circumstances, when this is in their best interests and with their consent. Decisions take account of their need for social interaction and the impact of potential isolation.*
  + *Women and girls do not share a room with men or boys.*
  + *Detainees not yet sentenced are located separately from sentenced detainees.*
  + *Staff explain to detainees how to raise the alarm in an emergency and respond within five minutes when the alarm is raised.*
  + *Detainees know the local rules and routines, which are applied openly, fairly and consistently, with no discrimination.*
  + *When decisions are conveyed to detainees, appeal arrangements are explained and made available.*

1. **Detainees are encouraged to keep themselves, their rooms and communal areas clean.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Detainees can shower or bathe in private every day, following exercise and before and after health care appointments.*
  + *Detainees are provided with basic hygiene items for their personal use on arrival and are subsequently able to purchase them from the shop.*
  + *Women and girls are provided with an appropriate range of menstrual care products without having to ask.*
  + *Clean bedding is provided for each new detainee on arrival and can be replaced or laundered weekly or when soiled.*
  + *Mattresses are replaced when needed.*
  + *Detainees have access to enough cleaning materials to keep their rooms and communal areas clean.*

1. **Detainees have enough clean clothing of the right kind, size, quality and design to meet individual needs.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Detainees who are required to wear military dress have adequate sets of uniform available to them.*
  + *Civilian detainees who have never served in the military can wear their own clothing.*
  + *Detainees have at least weekly access to laundry facilities to wash and iron their clothes.*
  + *Where detainees lack enough clothing, they are provided with clothing which fits and is in good repair.*

1. **Detainees’ property held in storage is secure, and detainees can access it on request.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Detainees can receive parcels subject to security considerations.*
  + *The amount of property held in possession and storage takes account of individual needs.*
  + *The list of possessions that detainees are allowed to keep meets the needs of the population.*
  + *Detainees’ valuable property is routinely security-marked before it is issued.*
  + *All property is returned to detainees on release or transfer.*
  + *Detainees are fairly compensated for clothing and possessions which are lost or damaged in storage.*

Residential services

1. **Detainees have a sufficient, varied and nutritious diet which meets their individual needs.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Mealtimes match those in the general community.*
  + *Detainees can eat out of their rooms, with others.*
  + *Detainees are provided with a diet which considers their age, health, religious and cultural requirements and the demands of their daily regime.*
  + *Catering staff provide meals that meet medical dietary requirements and support vegan and vegetarian diets.*
  + *Menus are agreed following advice from dieticians and nutritionists and meet the needs of the population.*
  + *Detainees are consulted about the menu and their feedback about food is routinely considered.*
  + *Detainees can cater for themselves using items bought from the shop.*
  + *Detainees returning from temporary release do not miss out on their evening meal.*
  + *Detainees locked up overnight can still make a hot drink.*

1. **Detainees’ food and meals are stored, prepared and served in line with religious, cultural and other special dietary requirements and conform to hygiene regulations.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Managers make sure that relevant food and safety hygiene regulations are adhered to in all areas where food is stored, prepared or served.*
  + *Catering staff prepare food that meets religious, cultural or other specific dietary needs.*
  + *Staff who work with food are trained, wear proper clothing and have been health screened.*
  + *Staff supervise the serving of food to prevent tampering and to make sure there is appropriate portion control.*

1. **Detainees have a weekly opportunity to purchase a suitable range of goods at reasonable prices.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Detainees can buy items from the shop within 24 hours of arriving at the establishment.*
  + *Prices are broadly equivalent to those in the community.*
  + *The range of products available meets the diverse needs of the population, including children, women and black and minority ethnic detainees.*
  + *Detainees can purchase healthy food choices.*
  + *Detainees can make purchases at least once a week.*
  + *Detainees can access accurate and up-to-date records of their finances, free of charge.*
  + *Detainees can read a daily newspaper.*
  + *Detainees can receive magazines, books and hobby materials which are sent in by family or friends, subject to an individual risk assessment.*

Detainee consultation and applications

1. **Detainees are able to take an active role in influencing decisions about services, routines and facilities in the establishment and in managing their own day-to-day life.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Detainees are regularly consulted about life in the establishment and are given the opportunity to present any areas of grievance or dissatisfaction directly to managers.*
  + *Detainees can raise issues or concerns for discussion.*
  + *Detainees can challenge decisions appropriately and are confident that their views are taken seriously.*
  + *The selection of detainees to take part in more formal consultation events or to represent the wider detainee group is fair and transparent and reflects the population.*
  + *Detainees are informed of the outcome of consultation and are provided with justifiable reasons for any decision made.*
  + *Ongoing feedback mechanisms, for example food comments books, are readily available, regularly checked and responded to appropriately.*

1. **Staff and detainees are encouraged to resolve requests informally. When this is not possible detainees understand how to apply for available services and can do so easily.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Staff and detainees are encouraged to resolve requests informally, before making a formal, written application or complaint.*
  + *Detainees know how to make applications and can do so confidentially.*
  + *Staff help detainees to make applications, as requested.*
  + *Detainees do not have to make repeated applications for services they access or receive on a regular basis.*
  + *Detainees receive prompt responses to their applications which are respectful, easy to understand and address the issues raised.*
  + *There are effective and thorough quality assurance arrangements in place.*

In relation to expectations 30 to 39, human rights standards require that detainees are housed in accommodation which respects their dignity and privacy, provides sufficient living space and which is adequately ventilated and light. Detainees must be able to wash daily and be provided with adequate clean bedding and clothing. There must be an alarm system that allows detainees to contact staff without delay. Detainees must be provided with nutritious food that takes into account their personal needs (such as religion, age, health and culture) and be able to purchase a range of goods. Property not in the possession of detainees must be safely stored. See ICCPR 10, EHRC 3, CRC 27, 37(c); SMR 11–22, 67; EPR 4, 18–22, 31; ERJO 63–68; 31–37, 62; BR 5. See also CM/Rec(2010)4 61, 62, 75, 76.

**Complaints and legal rights**

**Complaints processes are efficient and fair. Detainees can exercise their legal rights without delay.**

**Expectations**

Complaints

1. **Detainees have confidence in complaints procedures, which are effective, timely and well understood.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Detainees know how to complain and are provided with information about complaints procedures in a format they can easily understand.*
  + *Detainees have easy access to complaint forms and can submit them confidentially.*
  + *Detainees can ask for help from staff, family, friends or legal advisors to make their complaint.*
  + *All complaints are dealt with fairly and promptly. Responses consider individual circumstances and the outcome the detainee is seeking.*
  + *Detainees can elect to explain their complaint in person.*
  + *Responses to complaints are received within agreed timeframes, easy to understand, comprehensive, respectful and address the issues raised.*
  + *All types of complaint are routinely logged and monitored to identify any patterns and improve provision.*
  + *There is an effective quality assurance process for complaints responses, with external validation.*
  + *Detainees are consulted regularly about the internal complaints system to monitor and maintain confidence in it.*
  + *Complaints about health care provision and treatment are managed separately from the main complaints system.*
  + *Mediation services are available and effective.*

1. **Detainees feel safe from repercussions when using complaints procedures and can appeal decisions easily.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Detainees are not discouraged or deterred in any way from complaining and are not encouraged to withdraw complaints.*
  + *Detainees can elect to have someone else make a complaint on their behalf.*
  + *Complaints can be made outside the chain of command.*
  + *Measures are in place to protect those who make complaints against staff and/or other detainees from possible reprisals and consequences.*
  + *Complaints about staff are investigated by an appropriately senior and independent person.*
  + *Detainees know how to appeal against decisions.*
  + *Detainees have access to recognised external organisations offering support in pursuing a complaint.*
  + *Detainees can easily speak to an independent visitor and/or the Service Visiting Officer in confidence.*
  + *Information about how to contact the Service Complaints Ombudsman for the Armed Forces is well advertised.*
  + *If detainees remain dissatisfied with the outcome, they receive help to pursue complaints and grievances beyond the establishment and can take their complaint to an independent body.*
  + *Detainees are not discouraged from speaking to inspectors or other independent visitors to custody or disadvantaged in any way if they have done so.*

Legal rights

1. **Detainees are supported to understand their legal rights.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Detainees understand their legal rights, including rights of appeal and where applicable, their right to elect to be heard by court martial.*
  + *Detainees are provided with information about the legal advice and representation available to them (both civilian and military) in a manner they understand.*
  + *Information about the Service Justice System is available in an understandable format.*
  + *Parents/carers are informed of children’s legal rights at the request of the child.*
  + *Detainees can contact community legal advice helplines free of charge.*
  + *Detainees still awaiting a decision on their future in the Armed Forces are kept regularly updated and can attend any hearings with their parent unit.*
  + *Detainees who will be discharged from the Armed Forces at the end of their sentence understand the terms of their discharge.*

1. **Detainees are supported to exercise their legal rights without delay.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Detainees are supported to find a legal representative if necessary.*
  + *Detainees eligible for legal aid are helped to apply for it.*
  + *Detainees can confidentially communicate with their legal and political representatives by telephone, fax and letter, even if they do not have the means to do so.*
  + *Private and confidential legal visits are supported and accommodated without delay in suitable facilities.*
  + *Detainees have access to stamps, writing materials and a computer and printer to prepare legal correspondence and documents, and can review their digital evidence.*
  + *Detainees requiring help with reading or writing legal correspondence are offered it, including help from outside the establishment.*
  + *Video link is available for eligible hearings and for other legal consultations, and facilities are fit for purpose.*
  + *Legally privileged correspondence is not opened by staff unless there are documented exceptional circumstances and the detainee is present.*
  + *When a decision is made to discharge them from the Armed Forces, detainees can appeal.*
  + *Detainees are on the electoral register if they are eligible and wish to vote, can receive campaigning material and can freely exercise their right to vote.*

In relation to expectations 40 to 43, the ability to make requests or complaints without repercussions and the requirement that these receive a prompt response is clearly set out in human rights standards, as is the ability to make complaints to independent external bodies. Detainees’ legal rights must be explained to them and they must have access to confidential legal advice. See CRC 3, 37(d); ECHR 9; ICCPR 9; ECHR 5, 6; SMR 56, 57, 61, 62; EPR 23, 70; BOP 17, 18, 33; HR 18, 24, 25, 60, 75–78; ERJO 50.3, 105, 120–125; BR 25, 26. See also CM/Rec(2010)4 22–31, 33, 34, 85.

**Equality, diversity and faith**

**There is a clear approach to promoting equality of opportunity, eliminating discrimination and fostering good relationships. The distinct needs of detainees with protected and minority characteristics are recognised and addressed. Detainees can practise their religion and the chaplaincy plays a full part in the life of the establishment, contributing to detainees’ overall care, support and rehabilitation.**

**Expectations**

Strategic management

1. **The establishment demonstrates strong leadership in delivering a coordinated approach to embedding equality considerations in regimes, eliminating all forms of discrimination and promoting inclusion.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *There is a local equality and diversity strategy that outlines how the needs of all groups within the establishment will be identified and addressed.*
  + *The Commandant leads by example in promoting equality and diversity.*
  + *Establishment policies and regime activities reflect the diverse needs of the detainee population.*
  + *A named member of staff of appropriate seniority has overall responsibility for equality and diversity.*
  + *Staff with responsibility for specific protected groups are given enough time and support to fulfil their role and have clear job descriptions and objectives.*
  + *Equality and diversity issues and outcomes are monitored regularly by a committee involving managers, staff and detainees from across the establishment.*
  + *There is regular and effective input by external community representatives, who provide advice at a strategic level and support to detainees.*
  + *Awareness of the needs of people with protected and minority characteristics is promoted by educational and celebratory events which involve and are led by detainees.*

1. **The establishment employs fair processes to make sure no detainee or group is disadvantaged.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *The establishment has clear systems in place to minimise all forms of discrimination or disadvantage, including multiple discrimination.*
  + *Staff are trained and supported to identify and eliminate discrimination.*
  + *There are effective monitoring systems to help identify discrimination in treatment and access to services, for example, allocation to activities.*
  + *Data on discriminatory incidents and allegations is routinely analysed for patterns.*
  + *Potentially adverse outcomes and disproportionate treatment are investigated thoroughly. Remedial action is promptly taken and evaluated.*
  + *The centre can explain why disproportionality or disadvantage do not amount to discrimination.*
  + *Monitoring data is made available in accessible formats to all detainees, visitors and staff.*
  + *Detainees can regularly express their views about equality and diversity issues.*

1. **Discriminatory behaviour is challenged robustly and consistently.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *All forms of discriminatory language and conduct are challenged.*
  + *Detainees and staff know what behaviour and language are acceptable.*
  + *There is a clear route of complaint for detainees, staff and visitors to report discrimination to establishment managers. Detainees, staff and visitors know how to report an incident, are supported to do so and are safe from any repercussions.*
  + *Responses to discrimination complaints are timely and are based on a thorough investigation.*
  + *There is independent quality assurance of the discrimination complaints process and the responses given to detainees to make sure the process is effective and drives improvements.*
  + *There are clear links between designated equality staff and the establishment’s approach to managing behaviour.*
  + *There is effective support for victims of discrimination and action is taken to challenge perpetrators.*
  + *Detainees who have shown discriminatory attitudes or behaviour are identified and managed appropriately.*

Protected and minority characteristics

1. **Detainees with protected and minority characteristics are treated equitably and according to their individual needs.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Detainees with protected and minority characteristics can self-identify on arrival and are able to discuss any diversity needs in private.*
  + *Detainees who require additional support are identified quickly and individualised plans are put in place. These plans are kept up to date, meet need and, where appropriate, are multidisciplinary.*
  + *Detainees have access to information in a format and language they can easily understand.*
  + *Staff promote and model inclusion in all aspects of their work and show an awareness of equality, anticipating and addressing the needs of detainees.*
  + *Staff make reasonable adjustments to make sure all detainees can participate in activities which meet their needs.*
  + *Detainees with protected and minority characteristics can easily contact relevant external support groups and networks to seek advice.*
  + *Rehabilitation and release planning work takes account of the specific needs of detainees with protected and minority characteristics.*

1. **The specific needs of women and girls are met.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Policies and procedures recognise the specific needs of women and girls from the first point of detention.*
  + *There are enough female members of staff and appropriate provision and facilities to respond to the welfare needs of women and girls.*
  + *Women and girls do not share a room with men or boys. The potential for them to feel and be isolated and marginalised is always carefully balanced with the need to keep them safe, make sure that they can socialise and have regular and equitable access to facilities and activities.*
  + *All staff have a clear understanding of the specific needs of women and girls, including pregnant women and those who are separated from their dependants.*
  + *Pregnant women receive appropriate care and support. Where a child is separated from its mother before the mother’s release date, the mother is given emotional and practical support in making the arrangements for separation.*

1. **The specific needs of children (aged 16–17) and young adults (aged 18–25) are met.** (See Appendix II, notes ii and viii.)

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Local policies and practices, including staff training, reflect the distinct needs of children and young adults and respond appropriately to individual levels of maturity.*
  + *Children have a named member of staff and an individual care plan to support their emotional well-being and help identify and meet specific needs. Where appropriate, young adults have the same.*
  + *Behaviour management processes are applied proportionately to children and young adults.*
  + *Children and young adults are regularly consulted about the range of age-appropriate activities offered.*
  + *Staff understand the impact of life experiences, such as trauma, abuse and mental illness, on the behaviour of children and young adults.*
  + *Staff are aware of the needs and entitlements of children and young adults who have been looked after children, and these are met.*
  + *Rehabilitation and release planning support reflects the specific needs of children and young adults.*

1. **The specific needs of detainees from all racial and ethnic minority groups are met.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Staff are aware of and respond appropriately to race and cultural issues.*
  + *Responses to complaints about racial discrimination are fair and thorough and address all the issues raised.*
  + *The range of products available from the shop meets the needs of black and minority ethnic detainees.*
  + *Attention is paid to the distinct needs of any detainees from the Gypsy, Roma and Traveller communities, including support for maintaining family ties.*

1. **The specific needs of foreign national detainees are met.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Staff are aware of the distinct needs and cultural preferences of any foreign national detainees in the establishment.*
  + *Foreign national detainees can readily access the relevant consulate or embassy and are informed without delay of their right to do so.*
  + *Foreign national detainees receive help to keep in touch with family abroad.*
  + *Foreign national detainees’ individual rehabilitation and release needs are met.*
  + *Independent immigration advice is offered to foreign national detainees if needed.*
  + *Staff use accredited translation and interpreting services to communicate with detainees whose first language is not English whenever accuracy and confidentiality is important.*

1. **The specific needs of detainees with disabilities are met.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Reasonable adjustments are made to make sure that detainees with disabilities, including those with learning disabilities/difficulties, have equitable access to the regime and facilities.*
  + *Staff are aware of detainees who need assistance to complete everyday activities.*
  + *Staff are aware of detainees who may require extra support in the event of an emergency. Personal emergency evacuation plans are used.*
  + *Detainees who are unable to work because of a disability are unlocked during the day and provided with sufficient appropriate regime activities.*
  + *Detainees with less obvious disabilities (for example learning disabilities) are identified, assessed and have their needs met.*

1. **The specific needs of detainees of all sexual orientations are met.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Staff training promotes equal respect for detainees of all sexual orientations and raises awareness of the discrimination faced by lesbian, gay and bisexual detainees.*
  + *Acceptance of all sexual orientations is promoted across the establishment.*
  + *Detainees who are lesbian, gay or bisexual are supported by staff and through referral to external support networks.*

1. **The specific needs of trans and intersex detainees are met.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Subject to a prompt multidisciplinary case conference which involves the detainee and takes account of all available evidence, including all potential risks and needs, trans and intersex detainees are located appropriately within the establishment. All detainees are supported to participate in and present evidence during a multidisciplinary case conference.*
  + *Trans and intersex detainees are supported to express their gender identity and have an agreement with the establishment on how to facilitate this. Any restrictions are based on properly evidenced justifications.*
  + *The views of detainees who express a gender identity different to their legal sex are considered when deciding the gender of staff conducting physical searches and drug tests.*
  + *Detainees with a gender recognition certificate are treated in accordance with it.*
  + *All detainees have access to items, including clothing, to maintain their gender identity. Any restrictions are based on properly evidenced justifications.*
  + *Detainees are routinely addressed as and referred to in the gender they identify with, using their preferred pronoun and by their chosen name.*
  + *Detainees who wish to begin gender reassignment are permitted to live permanently in their chosen gender identity and can access appropriate medical and other specialist support.*
  + *Trans and intersex detainees are easily and anonymously able to access information and specialist support and counselling (including for gender dysphoria), including external support networks.*
  + *Staff receive training and support which enables them to understand issues relating to gender identity and expression and support trans and intersex detainees.*
  + *The establishment fosters an understanding of gender identity and expression.*

1. **The specific needs of older detainees are met.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Older detainees have access to daily activities which engage and are suitable for them.*
  + *Older detainees who are retired or unfit for work are provided with sufficient appropriate activities outside of their rooms each day.*
  + *The potential isolation experienced by any older detainees is recognised and additional support is put in place.*

Faith and religion

1. **Detainees are encouraged to practise their religion fully and in safety.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Detainees have easy access to corporate worship every week.*
  + *Staff supervision of faith services is respectful and proportionate.*
  + *Detainees and staff know the establishment’s chaplain well.*
  + *Detainees can speak to a chaplain of their faith in private on request.*
  + *Faith areas are accessible and permit contemplation, reflection and prayer.*
  + *Alternative or additional provisions are made if individual detainees are excluded from corporate worship.*
  + *Detainees can obtain, keep and use items that have religious significance.*
  + *Detainees can fulfil religious lifestyle requirements.*

1. **Different religious faiths are recognised and respected.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Staff are aware of religious diversity and the way this interacts with cultural and racial identities.*
  + *Searches of staff, visitors, detainees and their property are conducted in a religiously sensitive manner.*
  + *Detainees can learn about different faiths. Detainees are free to change or abandon their religion.*
  + *Detainees are able to celebrate all major religious festivals, and they are actively promoted to all detainees.*
  + *Monitoring of the different religions in the establishment population is comprehensive, accurate and reviewed regularly to shape service provision.*

1. **Detainees are fully supported by the chaplain, who contributes to their overall care, support and rehabilitation.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *The chaplain meets all new detainees within 24 hours of their arrival in the establishment and has a meaningful and private conversation with them.*
  + *The chaplain visits any segregated detainees daily.*
  + *The chaplain provides support to detainees who have experienced bereavement or loss.*
  + *The chaplain contributes to multidisciplinary teams across the establishment and attends individual detainee case reviews where appropriate.*
  + *The chaplain establishes and maintains links with faith communities outside the establishment to support detainees returning to their parent unit at the end of their sentence, as well as those being discharged and returning to the community.*
  + *The chaplain supports the role of faith in promoting desistance from offending and helps detainees meet their faith needs on release.*
  + *The chaplain has a role in identifying and challenging extremist ideologies.*
  + *Detainees of no faith can receive support from the chaplain and are no less favourably treated than detainees of faith.*

In relation to expectations 44 to 58, the prohibition on discrimination and the right to equality are fundamental principles enshrined in human rights treaties and standards. Human rights standards relating to places of detention expressly note that standards should be applied impartially and without discrimination. In addition, all detainees have the right to freedom of thought, conscience, religion and belief and must be able to profess and practise their religion without any interference. See ICCPR 18, 26, CERD 1, 2; CEDAW 1, 2; ICESCR 2.2; CRPD 2, 3, 5, 9, 14; CRC 2, 14, 23, 30; ECHR 9; HR 4, 6, 28, 38, 48; ERJO 11, 87, 104–107; SMR 2, 5.2, 55.2, 65, 66, 109.2; EPR 13, 29, 38; BOP 5. See also CM/Rec(2010)4 40, 42–48, 77, 78; and Yogyakarta Principles.

**Health and well-being**

**Detainees are cared for by services that assess and meet their health, social care and substance misuse needs and promote continuity of care. The standard of provision is similar to that which detainees could expect to receive elsewhere in the community.**

**Expectations**

Strategy, clinical governance and partnerships

1. **Detainees are cared for by services which accurately assess and meet their health, social care and substance misuse needs and which promote continuity of health and social care on release.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Effective partnership working between the establishment and health care providers ensures that health, social care and substance misuse services meet the assessed needs of detainees.*
* *Effective leadership and governance systems provide good outcomes for detainees.*
* *Health, substance misuse and social care provision meet the required regulatory standards.*
* *Service delivery is informed by effective detainee consultation which leads to service improvements.*
* *Local and serious incidents are reported and investigated within national detainee safety guidelines. Duty of candour is applied, and lessons are learned and shared with staff.*
* *Staffing levels and skill mix throughout the 24-hour day meet detainee need.*
* *Health care staff are easily recognisable, appropriately trained and supported; this includes regular reflective practice, recorded clinical and managerial supervision and annual appraisal.*
* *Every detainee has a single clinical record which meets contemporary record-keeping standards.*
* *Information is shared within the bounds of medical confidentiality to promote continuity of care and maintain detainee safety.*
* *Detainees whose health is likely to be injuriously affected by their detention are safeguarded.*

1. **Detainees receive treatment which is sensitive to their diverse needs from competent staff in an environment that promotes dignity and maintains privacy.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *All detainees have equal access to health, well-being and social care services regardless of location, regime, disabilities or language barriers.*
* *Staff are professional and treat all detainees with dignity, respect and compassion.*
* *There are enough equipped clinical rooms to provide a full range of health services. Rooms are well maintained and managed in line with national infection prevention and control measures.*
* *All clinical equipment is logged, appropriately maintained and serviced.*
* *Detainees are seen in private, except in clearly documented exceptional circumstances.*
* *Detainees can see a doctor or practitioner promptly, of their own sex if they prefer. They are aware that they can request this service.*
* *Children can access health services which meet their specific needs.*
* *There are comprehensive clinical audit programmes in place. Audit action plans are monitored within agreed timelines.*
* *Joint emergency response plans are in place to respond to medical emergencies. Competent staff respond promptly to medical emergencies with appropriate emergency equipment.*
* *Arrangements to gain and review detainee consent are appropriate and in line with national guidance. When detainees lack mental capacity to make decisions, health professionals make ‘best interests’ decisions in accordance with legislation.*
* *Detainees**are kept**safe, are safeguarded from abuse and have access to independent advocacy services if required.*
* *Detainees can complain about their treatment in confidence, without recrimination. Responses are timely, easy to understand, address all the issues raised and are apologetic when required.*
* *Any detainees with social care and support needs are identified and receive assessment, care packages, adaptations and advocacy services that continue on release or transfer.*

Promoting health and well-being

1. **Detainees are supported and encouraged to optimise their health and well-being.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *There is a joint approach across the establishment to improving the health and well-being of detainees.*
* *Admissions processes include health promotion advice and signposting.*
* *Information about available health services and current national health campaigns is easily accessible in all required formats and languages.*
* *Detainees can easily access health checks, disease prevention, screening programmes and mental health promotion.*
* *Detainees can confidentially access contraception and sexual health services. Barrier protection and related health advice is freely available.*
* *Detainees can access community-equivalent smoking cessation support.*
* *There are robust systems to prevent, identify and manage communicable diseases.*
* *Detainees receive individual harm minimisation and health promotion advice on release.*

Sexual and reproductive health

1. **Detainees’ sexual health and reproductive needs are assessed and met during detention and on release.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees are screened for sexual health and reproductive needs on arrival and referred onwards as appropriate.*
* *Sexual health services are confidential and provided by suitably qualified staff.*
* *Detainees can access pregnancy testing and emergency contraception within 24 hours of arrival if required.*
* *Pregnant women have access to community-equivalent antenatal care in line with national standards, including access to midwifery advice by telephone whenever they need it.*
* *Pregnant detainees can prepare for childbirth and parenting in line with national standards.*
* *Detainees who experience a miscarriage shortly before or during their detention have access to appropriate physical and emotional care, including counselling.*
* *Detainees considering termination of a pregnancy can access appropriate services and follow-up care.*
* *Counselling services are available for those who have experienced loss or bereavement, including post-adoption.*
* *Post-natal care is equivalent to that available in the community.*
* *Detainees who disclose they have been the victim of sexual assault have access to a sexual assault referral centre and associated follow-up care.*
* *Where a child is separated from its mother before the mother’s release date, the mother is provided with emotional and practical support in making the arrangements for separation.*
* *Detainees experiencing the menopause are supported to the same level as those in the community.*

Primary care services

1. **Detainees’ immediate health, substance misuse and social care needs are recognised on reception and responded to promptly and effectively.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *A competent health professional screens all new detainees on arrival to identify their immediate needs and make appropriate onward referrals.*
* *Relevant risk and care planning information is shared between health care staff and establishment staff, both on reception and while a detainee is held at the establishment.*
* *With consent from the detainee, medical records other than those held by Defence Medical Services are obtained.*
* *Immediate substance misuse needs are identified and managed, including overnight monitoring and medicine titration.*
* *Immediate social care needs not previously identified are managed through local protocols and urgent referral processes. Care packages for those already identified are continued.*
* *Medicines are reconciled and prescribed to ensure continuity of care. Detainees who arrive without expected medicines are managed with an emergency or out of hours prescription.*
* *Detainees arriving with acute mental health problems or at risk of self-harm are managed through a multidisciplinary care planning process.*
* *Decisions to place detainees in quarantine or medical isolation are made by health care staff. Safeguards are in place to ensure the health and well-being of these detainees, including necessary treatment, time outdoors, and meaningful human contact.*

1. **Detainees’ individual, ongoing health care needs are addressed through an appropriate range of care services. Continuity of care is maintained on transfer or release.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees can access all necessary primary care services, including pain management support services and effective out-of-hours GP services, within community-equivalent waiting times.*
* *There is a confidential and effective appointments system.*
* *Detainees with long-term conditions and complex health needs receive appropriate joined-up care in line with national standards. Up-to-date and evidence-based care plans demonstrate detainee involvement and continuity of care.*
* *Detainees receive secondary care services within community-equivalent waiting times and care is not disrupted by a lack of escort staff.*
* *Security measures during hospital escorts are proportionate and are based on an individual risk assessment, which includes an appropriate contribution from health staff.*
* *All partners involved in the planning of health care, access to it and treatment work together effectively to make sure continuity of care is maintained during custody and on release.*
* *Detainees receive relevant pre-release assessments and interventions. Discharged detainees are supported to register with community health services.*

Mental health

1. **Detainees with mental health problems are identified promptly and supported by community-equivalent services to optimise their mental well-being during their stay and on transfer or release.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees’ immediate mental health needs are assessed during their initial health screening and appropriate onward referrals are made.*
* *Establishment staff receive training to recognise when a detainee requires referral for mental health assessment, and there is a clear referral pathway.*
* *Referrals are reviewed promptly and appointments are allocated on clinical need/risk.*
* *Sufficient skilled practitioners meet the mental health needs of the population. Provision is psychologically informed and evidence based.*
* *Specialist support for those who have been sexually assaulted, bereaved or require antenatal and post-natal mental health support is accessible.*
* *A community-equivalent range of evidence-based interventions are available in a timely manner.*
* *Prescribing reviews and related physical health checks occur in line with national guidelines.*
* *Detainees are assessed using a standardised format and additional information is obtained from other sources as required.*
* *Detainees have written care plans which are regularly reviewed with their mental health practitioners.*
* *Liaison and joint working with other teams across the establishment is effective.*
* *Detainees with severe and enduring mental illness are supported within the Care Programme Approach.*
* *Detainees who require assessment or treatment under the Mental Health Act are assessed and transferred according to national guidance.*
* *Effective discharge planning and liaison with community mental health services ensures continuity of care when detainees are released.*

Substance misuse treatment

1. **An effective strategic approach across the establishment ensures the demand for drugs and alcohol is reduced.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Effective joint working between the establishment, treatment providers and other relevant stakeholders embeds a dynamic drug and alcohol strategy.*
* *A regular and comprehensive needs assessment informs the strategy and action plans.*
* *Establishment staff receive training to enable them to recognise when a detainee requires referral to substance misuse services, and there is a clear referral pathway.*
* *Psychosocial and clinical services meet the needs of detainees. Detainee feedback and outcomes inform service delivery.*
* *Psychosocial and clinical substance misuse treatment services are well integrated with each other, the establishment and all health services.*
* *Sufficient competent staff provide effective evidence-based psychosocial and clinical services.*
* *Detainees have personalised recovery plans which are regularly quality assured.*
* *Detainees with both mental health and substance-related problems have prompt access to joined-up, comprehensive support.*

1. **Detainees can promptly access safe, effective and individualised clinical and psychosocial support.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Newly arrived drug and/or alcohol-dependent detainees receive appropriate first night treatment without delay, and regular monitoring until they are stable.*
* *All detainees have prompt access to appropriate clinical, psychological and harm-reduction interventions.*
* *All prescribing is individualised and in line with national guidelines, prescribing is undertaken by a suitably qualified clinician and complex cases such as pregnant women are managed through multidisciplinary teams involving psychiatric, midwifery and addiction specialists.*
* *Detainees are involved in decisions about their care. Care plans are flexible, meet individual needs and are reviewed regularly.*
* *Newly arrived detainees receive harm reduction information about illicit substance use in detention and substance misuse treatment services.*
* *Detainees can easily access family support services, self-help and mutual aid.*
* *All interventions are gender-informed, evidence-based and suitable for those in crisis, stabilisation or recovery.*
* *Effective discharge planning within the establishment and with community services ensures continuity of support after detainees leave the establishment. Care plans accompany detainees continuing in service, discharged detainees and detainees transferring to prison.*
* *Detainees receive information on how to avoid drug- or alcohol-related overdose, injuries and death on release or transfer. Where clinically indicated, detainees receive an emergency reversal agent to prevent overdose on release.*

Medicines optimisation and pharmacy services

1. **Detainees receive community-equivalent, person-centred medicines optimisation and pharmacy services.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees’ medication histories, including allergies, are recorded during the initial reception screening and a full medicines reconciliation is completed within 72 hours of admission.*
* *Any disruption in prescribing regimens is minimised and urgent/critical medicines can be accessed promptly.*
* *Detainees have direct access to clinical pharmacy services and advice.*
* *All medicines are handled, transported and stored legally, safely and securely with effective pharmaceutical stock management and use.*
* *There are robust governance processes to ensure safe and effective medicines management, including monitoring of medication incidents and prescribing trends.*
* *Detainees’ medicines are prescribed safely in line with evidence-based practice and formularies, reviewed regularly and administered at clinically appropriate times.*
* *Detainee’ adherence to medication is monitored. Detainees are promptly reviewed when adherence is poor and/or diversion is suspected.*
* *Subject to a regularly reviewed in-possession risk assessment, detainees can store their medicines securely and self-administer.*
* *Detainees can access basic self-care medicines safely and easily, including out of hours.*
* *Medicines are administered from a secure and respectful environment.*
* *Detainees receive information about their medicines in a format they understand and have regular clinical prescribing reviews.*
* *Detainees going to court or being released or transferred receive adequate supplies of medication or a community prescription to meet their needs.*

Dental services and oral health

1. **Detainees receive timely, community-equivalent dental services, including oral health promotion.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees have timely access to the full range of NHS-equivalent treatment that can be reasonably delivered while they are detained.*
* *All detainees have timely access to emergency dental services based on clinical need. Detainees continuing in service, discharged detainees and detainees transferring to prison have treatment plans to support any ongoing care they require after they leave the establishment.*
* *Detainees receive evidence-based interventions in oral health promotion and disease prevention.*
* *Detainees have prompt access to required medicines following dental interventions.*
* *Dental care meets contemporary professional standards.*

In relation to expectations to 59 to 69, detainees have the right to the enjoyment of the highest attainable standard of physical and mental health. Detainees should be provided with community-equivalent care which takes into account their particular needs. Health and social care needs and substance misuse needs should be assessed on arrival and monitored throughout detention. There must be prompt access to care in urgent cases and referral to external care when needed. Health care staff must have full clinical independence. See ICESCR 12; CRC 3(3), 24; SMR 24–28, 30–34; EPR 39–43.1, 43.3, 46; BR 6–18; ERJO 28, 62.2, 62.5, 69–75, 102.1; HR 1, 12, 21, 31, 49-55. See also CM/Rec(2010)4 68–70, 72.

**Section 4: Purposeful activity**

**Detainees are able and expected to engage in activity that is likely to benefit them.**

Contents

* Time out of room
* Education, skills and work activities

**Time out of room**

**Detainees spend most of their time out of their room, engaged in activities such as military training, education and physical exercise, seven days a week.**

**Expectations**

1. **Detainees have enough regular and predictable time out of room to promote their rehabilitation and well-being.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *Detainees have as much time out of their room as possible, and no less than 10 hours, every day.*
  + *Wherever they are located, detainees are never subjected to a regime which amounts to solitary confinement.*
  + *Detainees have the opportunity for at least one hour of association in the evening every day.*
  + *Detainees know the daily routines for activities, association and exercise.*
  + *Out of room activities happen on time and are not cancelled unnecessarily.*
  + *There is enough time in the regime for detainees to attend compulsory regime activities and still have time for domestic routines such as showering, collecting medication, room cleaning, telephone calls and recreational activity.*
  + *Detainees who are unable to attend learning or work activities are unlocked during the day and are provided with suitable activities.*
  + *Detainees can telephone or video-call their families and friends during the evening.*

1. **Detainees are expected and encouraged to use time out of room constructively, including at weekends.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees have daily opportunities to speak to staff and seek their support.*
* *Detainees engage in a variety of activities throughout the day and can have at least one rest day a week.*
* *Detainees are encouraged to socialise with each other.*
* *Subject to risk assessment and with supervision, children and women can socialise with the rest of the population to avoid potential isolation. Supervision is at an appropriate level to ensure safety and well-being.*
* *Detainees have properly equipped areas for association.*
* *Detainees are encouraged to take part in sociable recreational activities which promote well-being.*

1. **Every detainee is able to spend at least one hour in the open air every day.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Exercise areas are spacious and inviting and have adequate seating and equipment.*
* *Waterproof coats are available.*
* *Detainees do not have to choose between access to the open air and other important regime activities.*
* *Detainees understand that time in the open air is important to their mental and physical health.*
* *Outside exercise is only cancelled in extreme weather conditions.*

1. **Detainees benefit from regular access to a well-equipped library which has direct links to libraries in the community, and offers library materials and additional learning resources that meet their needs. They are encouraged to use it frequently.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *All detainees receive a prompt and effective library induction.*
* *The library provides an opportunity for both learning and social interaction in an informal, relaxed setting.*
* *The quantity and quality of library materials meets the needs of the population.*
* *Detainees have enough time to sit and read materials if they are unable to take them away from the library.*
* *Detainees can easily access legal textbooks and other documents relating to their rights and entitlements.*
* *Detainees have access to internet and IT services, subject to a risk assessment and any public protection concerns.*
* *The library runs a range of educational programmes.*
* *The library promotes literacy effectively.*
* *Services provided by the library actively promote contact with children, families and friends.*
* *The library provides detainees being discharged with the time and opportunity to research and plan for their future outside the services.*

1. **Detainees are encouraged to participate in physical education and fitness provision that meets their needs.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *The range of physical education and fitness activities offered is varied and meets the needs of the population.*
* *All detainees can use the physical education facilities daily and shower in safety and privacy after each session.*
* *Effective joint working between gym and health care staff supports safe gym use for all detainees and focuses on detainees’ individual needs.*
* *Detainees being retained in the services and those being discharged receive equitable access to recreational gym sessions.*
* *Detainees being discharged from the services can achieve employment-related qualifications.*
* *Physical education and fitness staff have appropriate qualifications and expertise.*

In relation to expectations 70 to 74, human rights standards recognise that life in detention should replicate the positive aspects of life at liberty as much as possible and minimise differences which might lessen the responsibility of detainees or the respect due to their dignity. See SMR 5; EPR 2–5. Detainees must always have at least one hour in the open air each day, be able to associate with one another and be provided with adequate opportunities for exercise and recreation outside of their rooms. There must be an adequately stocked library containing both educational and recreational materials. See SMR 23, 64, 105; EPR 25, 27–28, 101; BOP 28; CRC 31; ERJO 76–77, 80–81; HR 12, 47; BR 42. See also standards in relation to safeguarding children.

**Education, skills and work activities (Ofsted)**

**All detainees are expected and enabled to engage in education, skills or work activities that promote personal development and employability, whether military or civilian. There are sufficient, suitable education, skills and work places to meet the needs of the population and provision is of a high standard.**

This part of the inspection will be conducted by Ofsted. To ensure that establishments are held accountable to the same standard of performance as further education colleges in the community, we have chosen to explicitly adopt Ofsted's Education Inspection Framework, which explains the different style of this section of Expectations.

**Expectations**

1. **Detainees benefit from good quality education, skills and work.**

Ofsted’s Education Inspection Framework (EIF) sets out the main criteria for judging the quality of education, skills and work. The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Leaders and managers have selected and developed a curriculum that develops the knowledge, skills and behaviours (including English, mathematics and information and communication technology) that detainees need to take advantage of the opportunities, responsibilities and experiences that prepare them for their next stage in education, training or employment, whether military or civilian.*
* *It is clear what the curriculum is preparing detainees for and what detainees will need to be able to know and do, at the end of their learning or training programmes.*
* *Leaders, managers and teachers have planned and sequenced the curriculum so that detainees can build on previous teaching and learning and develop the new knowledge and skills they need.*
* *The curriculum takes into account the needs of detainees and offers them the knowledge and skills that reflect the needs of the relevant Armed Forces or national labour need.*
* *Teachers, trainers and instructors have expert knowledge of the subjects that they teach.*
* *Teachers, trainers and instructors enable detainees to understand key concepts, presenting information clearly and promoting discussion.*
* *Teachers, trainers and instructors check detainees’ understanding effectively, and identify and correct misunderstandings.*
* *Where trained peers are deployed as mentors they work closely with staff to provide focused individual guidance and help to detainees.*
* *The curriculum is sequenced so that new knowledge and skills build on what detainees know and can do, and detainees can work towards defined end points.*
* *Teachers, trainers and instructors use assessment to develop detainees’ understanding to extend and improve their skills beyond simply memorising disconnected facts. Assessment also checks detainees’ understanding to inform further teaching, training and instruction.*
* *The design and delivery of the curriculum and teaching, including the use of assessment, ensure detainees embed key concepts and knowledge to long-term memory and apply concepts and knowledge consistently and easily.*
* *Detainees’ military and employment-related skills are recognised and recorded.*
* *Community work or education placements are used to enhance detainees’ employment or training skills and prepare them for return to military duties or civilian life.*
* *Detainees make progress from their starting points, attaining skills, behaviour and, where appropriate, qualifications.*
* *Teachers, trainers and instructors are aware of and plan for individual detainees’ diverse needs in teaching, training and work sessions and provide effective support. All staff make reasonable adjustments for detainees with disabilities or with additional educational needs.*
* *Detainees with learning difficulties and/or disabilities and those with Special Educational Needs and Disability (SEND) gain knowledge and skills and progress towards rehabilitation and to becoming more independent in their everyday life, and/or return to employment, as appropriate.*
* *Mandatory military assessments and external examinations are used as useful indicators of detainees’ outcomes, but it is recognised that they only represent a sample of what detainees learn.*
* *Learning takes account of detainees’ sentence and career plans.*
* *All learning builds towards an end point. Detainees are being prepared and are ready for their next stage of education, training or employment, in the establishment or on release, at each stage of their learning.*
* *Provision reduces reoffending and promotes military and employability skills so that detainees are well-prepared for the next stage of their education, employment, self-employment or training on release.*

1. **Provision successfully promotes positive behaviour and attitudes.**

Ofsted’s EIF sets out the main criteria for judging behaviour and attitudes. The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees feel safe and experience a calm and orderly environment in the establishment’s classrooms, work areas and relevant community placements.*
* *Staff and detainees do not accept bullying, harassment or discrimination.*
* *There are clear expectations for high standards of behaviour across education, skills and work activities.*
* *There is a strong focus on attendance and punctuality at education, skills and work areas.*
* *Staff deal with any concerns quickly, fairly and effectively.*
* *The establishment supports a culture in which staff know and care about detainees and prioritise their attendance at education, skills and work.*
* *Detainees take pride in their achievements and the work they complete.*
* *Detainees understand the importance of the skills maintained and learnt in the context of their next steps and sentence plans.*

1. **Provision successfully promotes personal development.**

Ofsted’s EIF sets out the main criteria for judging detainees’ personal development. The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees are expected to behave as responsible and respectful individuals and are encouraged to become involved in the establishment and the wider community when in education or work placements.*
* *Detainees are helped to understand the values of democracy, individual liberty, the rule of law and mutual respect and tolerance while demonstrating a clear understanding of modern military ethics.*
* *Equality of opportunity, awareness of diversity and the need to tackle discrimination are promoted.*
* *The importance of an inclusive environment that meets the diverse needs of each detainee is promoted.*
* *Detainees are supported to reflect carefully, learn eagerly, behave with integrity and cooperate consistently well with others.*
* *Detainees are supported to develop their confidence, resilience and knowledge as ways to improve their mental well-being.*
* *Detainees are provided with an effective careers programme that offers advice, experience and contact with employers, where appropriate, to encourage them to make informed choices about their current learning and future career plan.*
* *Learning plans are effectively linked with and take account of detainees’ sentence plans.*
* *Detainees are supported to prepare for the next phase of education, training or employment on release.*
* *Detainees are effectively encouraged and supported to prepare and progress to suitable further education, training and employment on release, including through access to modern means of job search and job application, such as the internet.*

1. **The leadership and management of education, skills and work activities effectively improves outcomes for detainees.**

Ofsted’s EIF sets out the overarching criteria for judging the effectiveness of leadership and management of education, skills and work activities. The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Leaders focus their attention on education, skills and work-related activities in a way which leads to better outcomes for detainees such as reducing reoffending.*
* *Leaders and staff, in and outside the chain of command, engage with detainees, their community and employers to plan and support the education and training that detainees receive.*
* *The establishment has sufficient education, skills and work provision for its population and appropriate learning opportunities are available.*
* *Allocation and attendance measures ensure detainees attend their activity on time with minimal interruptions.*
* *Continuing professional development for teachers, trainers, instructors and other staff is aligned with the curriculum, and this allows teachers to develop subject expertise and teaching/training knowledge over time, so that they deliver high-quality education and training.*
* *Detainees benefit from effective teaching/training and high expectations in classrooms, in workshops and at work.*
* *Leaders and managers consider the workload and well-being of their staff and improve the quality of the workforce to strengthen the quality of the provision.*
* *Senior leaders responsible for the establishment understand their respective roles and carry these out to enhance the effectiveness of the establishment.*
* *Leaders and managers have an accurate understanding of the establishment and their providers’ and subcontractors’ effectiveness and they use this information well to secure and maintain high quality provision.*
* *Leaders and managers monitor the progression and destinations of detainees (including whether detainees return to their military careers or enter other sustained employment).*

In relation to expectations 75 to 78, human rights standards require detainees to be provided with equal opportunities to undertake work, education and vocational training. Education and vocational training should ensure literacy and numeracy and meet detainee’s individual needs, taking into account their aspirations. Work opportunities should help to equip detainees for life on release from detention and detainees should be remunerated for their work. Detainees should be able to choose the type of work they perform (with due regard to proper vocational selection and to the requirements of institutional administration) and there should be no discrimination on the basis of gender in the type of work offered to them. See ICESCR, 6–7, 13; EPR 26, 28, 100, 106; SMR 96–104; CRC 28–29; HR 39–46; ERJO 78–79. See also CM/Rec(2010)4, 15, 63–64, 66–67, 69.

**Section 5: Rehabilitation and release planning**

**Detainees have a comprehensive sentence plan and can access interventions to address their offending behaviour. Detainees are supported to maintain and develop relationships with their children, family and friends. Detainees are thoroughly prepared for release. Detainees’ risk of serious harm to the public is managed effectively.**

Contents

* Addressing offending behaviour
* Children and families and contact with the outside world
* Preparation for release or transfer
* Protecting the public from harm

**Addressing offending behaviour**

**Detainees access well-coordinated rehabilitation services. Each detainee has a comprehensive sentence plan designed to address their specific needs and reduce their likelihood of reoffending. Detainees access interventions designed to address their offending behaviour, including support to address experiences of trauma where relevant.**

**Expectations**

1. **Detainees’ needs are met by coordinated rehabilitation services.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *There is a local rehabilitation strategy which is informed by an up-to-date, comprehensive population needs analysis and outlines how the needs of all groups within the establishment will be met.*
* *There is good cooperation and communication between the various organisations and departments delivering rehabilitative work in the establishment.*
* *There are sound arrangements for sharing information about individual detainees within the establishment and with partner agencies.*
* *Staff on residential units have a good working knowledge of the rehabilitation services available, actively promote them and can easily refer detainees for support.*
* *Relevant voluntary and community sector organisations are supported to work with detainees during their detention and on their release.*
* *A named manager is responsible for coordinating the work of voluntary and community sector organisations.*
* *Staff from voluntary and community sector organisations are encouraged to take part in establishment training and can contribute to relevant multidisciplinary forums.*

1. **Detainees’ likelihood of reoffending is reduced.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees are encouraged and helped to take responsibility for their own rehabilitation.*
* *Detainees’ immediate rehabilitation needs (including families, accommodation, employment and debt) are identified on arrival and met.*
* *There is a prompt and sufficient assessment of each detainee’s likelihood of reoffending, which identifies their offending behaviour needs and resettlement needs.*
* *Detainees are involved in preparing a sentence plan based on the likelihood of their reoffending, their risk of serious harm to others and their individual strengths, skills and goals.*
* *Sentence plans include relevant time-limited and appropriately sequenced interventions and reintegration support.*
* *Detainees are involved in regular reviews of their sentence plan, which is adapted to meet their needs.*

1. **Detainees receive support to complete their sentence plan and progress through their sentence.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *A case manager works with the detainee to make sure key decisions about interventions and activities reflect their sentence plan.*
* *There is enough contact between the detainee and their case manager to manage their assessed levels of risk and need. Contact is meaningful and drives sentence progression.*
* *Detainees can easily arrange an appointment with their case manager.*
* *A central case record holds up-to-date details of contact with the detainee and the work done to achieve sentence plan objectives.*
* *Detainees understand and are meaningfully engaged in the delivery of their sentence plan.*
* *Staff on residential units are familiar with detainees’ sentence plans, support detainees to engage with them and reinforce any learning or progress.*

1. **Appropriate interventions are provided to address detainees’ offending behaviour.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees can access offending behaviour interventions that help them show changes in their attitudes, thinking and behaviour.*
* *The range of interventions available meets the needs of the population and the effectiveness of interventions is monitored to improve provision.*
* *Detainees who are eligible for accredited group work programmes can access these interventions.*
* *Where appropriate, suitably qualified staff deliver offending behaviour work on a one-to-one basis.*
* *Detainees know what interventions are available and can access them easily.*

1. **Detainees who have experienced trauma are identified and supported appropriately.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Staff have a clear understanding that detainees may have experienced trauma and receive relevant training to support them.*
* *Detainees know about the support available to help manage life experiences, including trauma, abuse, adverse childhood experiences or their time in active service.*
* *Disclosure of trauma is handled sensitively and responded to appropriately.*
* *Detainees can access support to help them manage previous or current trauma.*
* *The range of support is kept under review and amended according to evidence of needs.*
* *Support services use the expertise of partner agencies and service charities.*

In relation to expectations 79 to 83, human rights standards emphasise that detainees must be provided with sufficient rehabilitation opportunities. Planning for rehabilitation should commence on admission, take into account individual circumstances, including the need for social work or psychological care, and include input from the detainee. Plans should be reviewed regularly in consultation with the detainee and all relevant staff. See ECHR 3, 5, 8; EPR 102–104, SMR 91, 92, 94; BR 45–46; HR 12, 27, 79; ERJO 50–52, 62.6, 76–77, 79.

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

**The establishment supports detainees’ contact with their children, families and friends. Detainees not receiving visits are helped in other ways to establish or maintain support from family and friends.**

**Expectations**

1. **Detainees are encouraged and supported to re-establish or maintain relationships with their children, families and friends where it is appropriate.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *There is a strategy to help detainees initiate or maintain contact with family and friends which is based on a population needs analysis, is developed in liaison with external specialist organisations and recognises that many families live far from the establishment.*
* *Subject to any public protection concerns, unsupervised short-term temporary release is used to help detainees maintain contact with family and friends.*
  + *There are opportunities for families to be involved in supporting detainees, particularly children, those at risk of self-harm or those being discharged.*
* *Detainees can access the help of an appropriately skilled family support worker.*
  + *Apart from visits, there is a range of initiatives to help detainees build ties with their children.*
  + *Subject to risk assessment, detainees can visit sick relatives and attend funerals.*
  + *Detainees have access to parenting courses.*
  + *There are opportunities for detainees to celebrate success with their family and friends.*
  + *Detainees receive advice on how to support their children during the experience of parental detention.*
  + *Detainees can continue to exercise their rights as parents and are involved in decisions about their children.*
  + *Detainees who do not receive visits are identified and receive individual support to maintain relationships with their family and friends.*
  + *Detainees’ families and friends know how to tell the establishment about any concerns they have about a detainee’s safety or welfare.*

1. **The establishment supports children to visit their detained family member, subject to a risk assessment.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *The visitors’ centre is proactive in supporting visitors and has activities to keep children entertained.*
  + *Search and entry procedures for visits are child-friendly and proportionate.*
  + *Children are allowed physical contact with their detained parent or relative and can move around the visits area.*
  + *Children are safe and can enjoy age-appropriate activities with the detainee they are visiting.*
  + *Staff are trained in child safeguarding arrangements. There are clear processes for identifying visiting children, especially where there are child safeguarding concerns.*

1. **Detainees are able to regularly and easily communicate with their family and friends, subject to a risk assessment.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees can make a free telephone call on their first night and telephone numbers for family and friends are approved for use within 24 hours of arrival, subject to any immediate public protection concerns.*
* *Detainees have access to a range of options to maintain contact with family and friends, including telephone, letter, email and video calling.*
* *Detainees are provided with free calls and letters to enable them to maintain contact if they do not have the means to pay.*
* *Child detainees who are parents are provided with additional free letters and telephone calls.*
* *Detainees who are parents can receive incoming calls from their dependants when the dependant would benefit from their support.*
* *When detainees are restricted from having contact with children, victims or other individuals, staff know about these restrictions and implement them daily.*
* *Detainees’ outgoing mail is posted within 24 hours (48 hours when submitted by the detainee on a Saturday) and incoming mail is received by detainees within 24 hours of arrival at the establishment, including registered and recorded mail.*
* *Foreign nationals receive additional help and resources to keep in touch with family abroad.*
* *Detainees can easily find the telephone numbers of outside organisations and know which numbers they are permitted to call.*

1. **Detainees can maintain access to the outside world through regular and easy access to visits.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees are able to receive a visit within one week of arrival and thereafter at least one visit each week for a minimum of one hour, including at weekends.*
* *Detainees not serving a sentence can receive additional visits, including at weekends.*
* *The visits booking system is accessible and able to deal with the volume of requests and the diverse requirements of visitors.*
* *Access to social visits and children’s/family days is not affected by any privileges or penalties detainees have received due to their progress or behaviour in the establishment.*
* *Detainees’ visitors are given information about how to get to the establishment, visiting hours, what to expect and how to complain.*
* *Where public transport is poor, the establishment provides transport to the establishment from local stations.*
* *Visitors can apply for their next visit before they leave the establishment.*
* *The banning or restricting of visits is authorised only when they are assessed to present a significant risk. This is justified by security intelligence about the individual and the decisions are reviewed at least monthly.*
* *Extended or consecutive visits are facilitated to meet the needs of visitors who travel long distances.*

1. **Detainees can receive their visitors in a clean, safe and respectful environment which meets their needs.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* + *There is a welcoming visitors’ centre which meets the diverse needs of visitors and provides support and advice, including how to raise concerns about detainees.*
  + *Visitor parking and access arrangements are appropriate, including for visitors with disabilities.*
  + *Search processes are respectful and proportionate and take account of the needs of people with protected and minority characteristics. Visitors are never strip-searched.*
  + *There are effective systems to collect feedback from detainees and visitors (including children) about their visits experience.*
  + *Detainees and visitors can always access toilet facilities, including baby changing facilities.*
  + *Visits areas are comfortable, friendly and welcoming. Where possible, detainees and their visitors can sit outdoors.*
  + *Security arrangements and restrictions on physical contact during visits are not excessive.*
  + *Visitors can buy a selection of snacks and drinks during visits.*
  + *Partner agencies and charities are used to support the visits experience.*

In relation to expectations 84 to 88, human rights standard recognise the importance of family ties and maintaining contact with the outside world, including through visits. Detainees should be supported to maintain contact with family and friends, and visits should take place in as normal a manner as possible. Disciplinary measures must not include restrictions on contact with family. See ECHR 8; CRC 5, 7, 16; ICCPR 17; EPR 24, 37.2, 60.4, 99; SMR 43.3, 58, 88.2, 106, 107; BR 26, 28, 43, 44; ERJO 83–85, 95.6; HR 59–61. See also CM/Rec(2010)4 81.

**Preparation for release or transfer**

**Planning for a detainee’s release starts on their arrival at the establishment and they are helped to manage their resettlement needs. Detainees continuing in service, discharged detainees and those transferring to prison all receive effective, individual pre-release support which is reviewed regularly.**

**Expectations**

1. **All detainees receive advice and help to manage their financial commitments and housing.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Provision to help detainees manage their finances and maintain or find housing takes account of the impact that their detention and loss of salary has on their dependants.*
* *Financial and housing support services* *use the expertise of partner agencies and service charities.*
* *Newly arrived detainees receive immediate help and advice to manage existing rental agreements, mortgage payments or to retain service accommodation.*
* *Detainees can access financial advice about the immediate and long-term consequences of detention and possible imprisonment.*
* *Detainees have ongoing access to debt and money management advice.*
* *Detainees with gambling issues receive specialist support.*
* *Subject to a risk assessment and any public protection concerns, detainees can manage their finances using the internet.*
* *Housing advisors are suitably trained and have the level of knowledge required to effectively address the wide range of accommodation issues facing detainees.*
* *There are good links with national housing providers.*

1. **Prior to release, all detainees’ outstanding resettlement needs are met.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Decisions about whether to discharge or retain a detainee in the services are made far enough ahead of release to allow for good release planning.*
* *Each detainee has a resettlement plan which identifies their outstanding needs far enough ahead of release to allow effective support to be implemented.* *The plan is reviewed as release approaches to assess progress in meeting these needs.*
* *Resettlement plans use the expertise of partner agencies and service charities.*
* *Detainees understand and are meaningfully engaged in their resettlement plans.*
* *All necessary work required to support a detainee’s release is completed in good time for it.*
* *Information about risk, vulnerability, health or safeguarding is communicated confidentially to relevant agencies and support organisations.*
* *Particular attention is given to releasing vulnerable detainees and children safely.*
* *Resettlement outcomes for detainees are monitored after their release to understand and improve the effectiveness of provision.*

1. **Detainees continuing in service are supported to return to work in the Armed Forces.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees can speak about their return to work with staff from their parent unit before release, either in person or by video-calling.*
* *Prior to release, staff at the establishment inform the parent unit if the detainee requires any ongoing support or has any outstanding needs.*
* *Detainees already accessing support from partner agencies and service charities can continue to do so when they return to their parent unit.*

1. **Discharged detainees are prepared for life in the community.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees have opportunities to practise necessary life skills such as cooking and IT in preparation for independent living.*
* *Short-term temporary release, both accompanied and unsupervised, helps detainees to prepare for their eventual release, subject to any public protection concerns.*
* *Detainees have access to specialist services providing advice and information about benefits/pension entitlements and are helped to make claims in advance of release.*
* *Detainees can arrange an appointment with their local job centre for the day after release.*
* *Detainees have suitable and sustainable accommodation on release. Those wishing to relocate are helped to do so.*
* *Foreign national detainees who intend to return to their home country are helped to do so.*
* *Complex and/or vulnerable detainees are offered a ‘through the gate’ mentor and can meet them before release.*

1. **Detainees transferring to prison are well informed and supported.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Detainees are provided with information which gives them a clear, realistic understanding of the differences between day-to-day life at the establishment and a prison.*
* *Detainees are visited by staff from the receiving prison or have contact through video calling.*
* *Where necessary, additional support is put in place to manage the anxieties felt by detainees awaiting transfer to prison.*

1. **All detainees are given practical support for their day of release.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Children being discharged from the Armed Forces are always met at the gate by an appropriate adult.*
* *Facilities are available before release to launder clothes that have been in storage for long periods.*
* *On release detainees receive all their property.*
* *Eligible detainees receive discharge grants and money for travel.*
* *Detainees can make a telephone call and charge their mobile phone before release.*
* *Detainees have enough civilian clothing to wear on release and, where necessary, are supplied with a suitable bag to carry their belongings.*
* *On release detainees are given information about sources of help and support in the community in a format and language they understand.*
* *Unless they are being collected or have their own transport, detainees are taken to the nearest railway or bus station.*

In relation to expectations 89 to 94, human rights standards emphasise that planning for release from detention should begin on admission. Detainees should be provided with support to address their needs ahead of release, including to find accommodation, return to work and understand any benefits they may be entitled to on leaving the forces. On release, all detainees should have immediate means of subsistence, clothing suitable for the weather and the means to reach their destination. See EPR 33, 107; SMR 90, 92, 107–108; BR 46–47; ERJO 50–51, 77, 79,100, 102; HR 35. See also CM/Rec(2010)4 65, 73–74.

**Protecting the public from harm**

**Detainees presenting a risk of serious harm to others are appropriately managed during their detention and in preparation for their release.**

**Expectations**

1. **All reasonable steps are taken to protect the public while detainees are held in custody.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Staff are trained to identify and assess detainees posing a risk of serious harm to others and receive professional supervision.*
* *There is an accurate and timely assessment of all detainees’ risk of serious harm to others and (if necessary) a risk management plan which is shared as appropriate. To make their assessments, staff access all pertinent information.*
* *Reviews of the detainee’s risk of serious harm to others are undertaken every 12 months or following any significant events which indicate a change in risk.*
* *When the circumstances of a detainee’s offence, or subsequent intelligence, suggests that they present an ongoing risk of serious harm to people in the community, their telephone calls and/or mail are monitored to understand and manage the level of risk.*
* *When detainees are subject to telephone and mail monitoring, staff understand who is to be monitored and for how long. Any emerging risks are identified promptly and are followed by appropriate action.*
* *The need for an individual’s telephone calls and mail to be monitored is regularly reviewed and decisions to continue or stop monitoring are based on the latest risk information.*
* *Any restrictions on detainees’ contact with children are imposed following a full risk assessment which prioritises the best interests and safety of the children. There are good links to other agencies such as the police and social services to inform these decisions.*
* *Restrictions on detainees’ contact with children are regularly reviewed and decisions to continue, amend or remove restrictions are based on the latest risk information.*
* *Detainees assessed as a continuing risk to children are held separately from any child detainees.*
* *When detainees are restricted from having contact with children, victims or other individuals, staff know about these restrictions and implement them daily.*
* *Unsupervised short-term temporary release is granted subject to a current, individual risk assessment which takes account of any public protection concerns.*
* *Detainees are informed of the arrangements for managing the risk of serious harm they pose to others and the options available to them for challenge.*
* *Restrictions on access to specific activities and interventions, such as unsupervised short-term temporary release, are proportionate and clearly communicated to detainees.*

1. **All reasonable steps are taken to protect the public when detainees are released from custody.**

The following indicators describe evidence that may show this expectation being met, but do not exclude other ways of achieving it.

* *Release arrangements for all high risk of serious harm cases are reviewed by a multidisciplinary team at the establishment, far enough in advance to address any deficiencies in planning.*
* *Staff have access to the Violent and Sex Offenders Register (ViSOR) and use it effectively.*
* *The establishment follows the latest multi-agency public protection arrangements (MAPPA) guidance and identifies and refers relevant detainees to the responsible authority. Decisions are robust and well-documented.*
* *Where relevant, there is a clear process to establish detainees’ MAPPA management levels and these are set at least six months prior to release.*
* *Staff at the establishment share all relevant risk information and work together with the responsible authority to support pre-release planning.*
* *Submissions made to MAPPA panels provide a full account of the detainee’s military record, the precise circumstances of their offence and an accurate assessment of their behaviour at the establishment. Where possible, staff attend these panels.*
* *Victims of sexual or serious violent offences are notified when detainees are approaching release.*
* *Detainees understand the requirements and restrictions placed on them and can discuss them before release.*

In relation to expectations 95 and 96, the risk a detainee may pose to the public on release must be identified and all reasonable steps taken to protect the public from that risk. See ECHR 2, 3, 8; SMR 91; HR 27; ERJO 79.

**Appendix I: List of abbreviations**

**Human rights treaties**

CAT Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment

CEDAW Convention on the Elimination of All Forms of Discrimination against Women

CERD International Convention on the Elimination of All Forms of Racial Discrimination

CRC Convention on the Rights of the Child

CRPD Convention on the Rights of Persons with Disabilities

ECHR European Convention on Human Rights

ICCPR International Covenant on Civil and Political Rights

ICESCR International Covenant on Economic, Social and Cultural Rights

**Human rights standards and guidance**

BOP Body of Principles for the Protection of All Persons under Any Form of Detention or Imprisonment

BR United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the ‘Bangkok Rules’)

CM/Rec(2010)4 Recommendation CM/Rec(2010)4 of the Committee of Ministers to member states on human rights of members of the armed forces

EPR Recommendation Rec(2006)2 of the Committee of Ministers to member states on the European Prison Rules (revised 2020)

ERJO Recommendation CM/Rec(2008)11 of the Committee of Ministers to member states on the European Rules for juvenile offenders subject to sanctions or measures

HR United Nations Rules for the Protection of Juveniles Deprived of their Liberty (‘Havana Rules’)

SMR United Nations Standard Minimum Rules for the Treatment of Prisoners (‘Mandela Rules’)

**Appendix II: Notes and references**

* + 1. In these expectations, the term ‘leader’ refers to anyone with leadership or management responsibility in the Military Corrective Training Centre. We will direct our narrative at the level of leadership which has the most capacity to influence a particular outcome.
    2. We define a child as a person under the age of 18 years, in line with the Children Act 1989.
    3. Dependants refers to a person who relies on another, especially a family member, for financial support.
    4. Safeguarding duties apply to vulnerable adults at risk who:
* have needs for care and support (whether or not the local authority is meeting any of those needs
* are experiencing, or are at risk of, abuse or neglect
* as a result of those care and support needs are unable to protect themselves from either the risk of, or the experience of, abuse and neglect (Care Act 2014).
  + 1. Solitary confinement is when detainees are confined for 22 hours or more a day without meaningful human contact (United Nations Standard Minimum Rules for the Treatment of Prisoners, Rule 44).
    2. We consider leadership and management only insofar as it has a direct and observable impact on outcomes for detainees. The term ‘leaders and managers’ may include any member of staff, including those working for contracted services, and the management hierarchy, including commissioners. Our judgements relate to how leaders and managers support or obstruct the achievement of our expectations. We do not assess leadership and management in isolation, nor do we do so comprehensively. Our judgements will be presented at the end of the relevant healthy establishment test summary.
    3. The following definition of dynamic security can be found in chapter 2 of this document: <https://www.unodc.org/documents/justice-and-prison-reform/UNODC_Handbook_on_Dynamic_Security_and_Prison_Intelligence.pdf>

*‘Physical and procedural security arrangements are essential features of any prison but they are not sufficient in themselves to ensure that prisoners do not escape. Security also depends on an alert group of staff who interact with, and who know, their prisoners; staff developing positive staff-prisoner relationships; staff who have an awareness of what is going on in the prison; fair treatment and a sense of “well- being” among prisoners; and staff who make sure that prisoners are kept busy doing constructive and purposeful activities that contribute to their future reintegration into society. This concept is often described as dynamic security and is increasingly being adopted globally.’*

* + 1. We have deliberately defined ‘young adults’ in this context as those aged 18–25 years old. This reflects emerging evidence that young people often have specific needs beyond 21 years old.