

Report on an independent review of progress at

HMP/YOI Deerbolt

by HM Chief Inspector of Prisons

7-9 March 2022



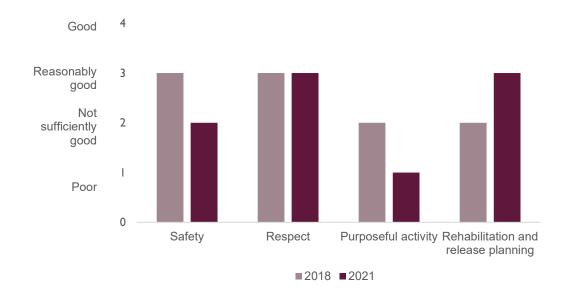
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Section 1 Chief Inspector's summary

- 1.1 Located near Barnard Castle in County Durham, HMP/YOI Deerbolt is a closed male young offender institution (YOI) and category C training prison for young adults aged 18 to 24. It receives prisoners from across the country, some serving long sentences. At the time of our visit, just as at the July 2021 inspection, Deerbolt held about 270 prisoners, which was much lower than its usual occupational capacity due to the ongoing refurbishment of some wings.
- 1.2 At our previous inspections of HMP/YOI Deerbolt in 2018 and 2021 we made the following judgements about outcomes for prisoners.

Figure 1: HMP/YOI Deerbolt healthy prison outcomes in 2018 and 2021



- 1.3 At our July 2021 inspection, our overriding concern had been the lack of time out of cell and purposeful activity for such a young population. Eight months later, at this review we found no improvement and progress had been much too slow. The aspiration as COVID-19 restrictions lifted was much too limited for a training prison, with just 3.5 hours a day out of cell planned for most. But even this part-time regime, in its infancy when we visited, was unreliable despite the reduced population. The prison faced major staff shortages, which affected most aspects of the regime.
- 1.4 We saw workshops sitting empty because there were no staff available to unlock and escort prisoners. There were tiny numbers of prisoners in classrooms. Places in work and education had often not been allocated and many prisoners had not had initial assessments to determine the most appropriate activity for them. Those who were not in work or education places still spent 23 hours in their cells each day, and we found nearly two-thirds of prisoners locked up during the working day, more than at the 2021 inspection.

- 1.5 Leaders had made better progress in addressing our concerns about safety. There were clear improvements to the segregation unit and there had been reasonable moves to manage better perpetrators of violence and strengthen oversight of the use of force. But even this progress required a note of caution. Violence between prisoners was higher than at the 2021 inspection and some of it was very serious. Use of force was also high. With so little constructive time unlocked to engage or tire them out, we saw prisoners with their backs to the perimeter of the exercise yards, clearly anxious for their safety. Some of the footage of incidents we viewed left us deeply concerned.
- 1.6 The challenge of managing conflict while getting prisoners to activity safely was a huge hurdle for managers. The prison's policy to incentivise good behaviour did not offer sufficient rewards relevant to the young age group, and was irrelevant in any case while prisoners had so little to lose in terms of their daily regime. Attempts to build staff-prisoner relationships through key work had not made meaningful advance and very few prisoners had any reliable support from a key worker.
- 1.7 There had been better progress against some of our other recommendations. A substantial improvement had been the introduction of in-cell phones on all but one wing. Medication queues were now better supervised, and consultation, both prison-wide and with protected groups, showed early promise.
- 1.8 Deerbolt remains a prison with some excellent facilities and great potential, but there was far too little for the young prisoners to do. We left without any assurance that managers would be able to deliver the safe and reliable full-time regime their population needed. They will need to move quickly to address staff shortages, restore purposeful activity and reduce the high levels of violence.

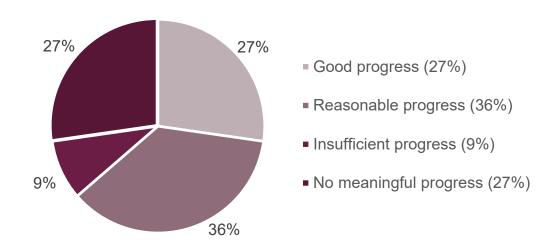
Charlie Taylor HM Chief Inspector of Prisons March 2022

Section 2 Key findings

- 2.1 At this IRP visit, we followed up 12 recommendations from our most recent inspection in July 2021 and Ofsted followed up three themes based on their latest inspection or progress monitoring visit to the prison, whichever was most recent.
- 2.2 HMI Prisons judged that there was good progress in three recommendations, reasonable progress in four recommendations, insufficient progress in one recommendation and no meaningful progress in three recommendations. No judgement was made for one recommendation due to lack of sufficient evidence.

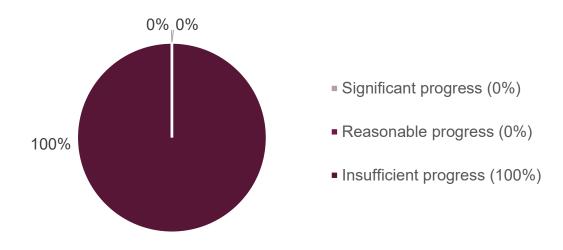
Figure 2: Progress on HMI Prisons recommendations from 2021 inspection (n=11)

This pie chart excludes any recommendations that were followed up as part of a theme within Ofsted's concurrent prison monitoring visit.



2.3 Ofsted judged that there was insufficient progress in all three themes.

Figure 3: Progress on Ofsted themes from 2021 inspection (n=3).



Notable positive practice

- 2.4 We define notable positive practice as innovative work or practice that leads to particularly good outcomes from which other establishments may be able to learn. Inspectors look for evidence of good outcomes for prisoners; original, creative or particularly effective approaches to problem-solving or achieving the desired goal; and how other establishments could learn from or replicate the practice.
- 2.5 Inspectors found one example of notable positive practice during this independent review of progress.
- 2.6 All incidents involving force were reviewed within 24 hours by the duty governor and any concerning practice was referred to the deputy governor for further action. (See paragraph 3.11.)

Section 3 Progress against the key concerns and recommendations and Ofsted themes

The following provides a brief description of our findings in relation to each recommendation followed up from the full inspection in [YEAR]. The reference numbers at the end of each recommendation refer to the paragraph location in the full inspection report.

Encouraging positive behaviour

Concern: There were few meaningful incentives to motivate positive behaviour among young adult prisoners. The regime offered few opportunities for progress to be supported or recognised among those who engaged constructively with their sentence plan or the wider custodial experience. The existing and limited incentives scheme was not applied equitably.

Recommendation: Managers should review the prison's approach to incentives in all aspects of prison life. Rewards and incentives that are meaningful to prisoners and which recognise and support those who engage with the regime and behave well should be introduced. (1.38)

- 3.1 There was still far too little to incentivise prisoners to behave well. A new local policy was not sufficiently creative or relevant to the needs of the young adult population. The differences in rewards between the incentive levels were minimal. There was no enhanced wing with better facilities to encourage prisoners to progress. The scheme did not provide anywhere near enough incentive to deter antisocial behaviour or reduce the high levels of violence.
- 3.2 Most prisoners were locked up during the working day and were very frustrated. Very limited time out of cell and minimal access to purposeful activity gave them little incentive to engage constructively with the regime, and there was very little benefit in their daily lives that they risked losing through misbehaviour.
- 3.3 We considered that the prison had made no meaningful progress against this recommendation.

Violence reduction

Concern: Processes to manage victims and perpetrators of violence (challenge, support and intervention plans [CSIP]) were in disarray. Only serious incidents of violence were investigated. Subsequent plans to manage victim and perpetrators lacked detail, wing staff were unsure of who was subject to monitoring and why, and there was no managerial oversight of the process, including reviews. As a result, some prisoners were locked up for several weeks without meaningful human contact, welfare checks or any indication as to when the restrictions would end. There was no system to resolve conflicts between prisoners swiftly, which meant that the default response was to keep prisoners apart, rather than help them resolve their issues.

Recommendation: Oversight of violence reduction measures should make sure that all incidents of violence are investigated swiftly, and that victims and perpetrators are challenged and supported appropriately. (1.39)

- 3.4 Levels of violence were still high and higher than at the 2021 inspection. Most incidents involved prisoner-on-prisoner violence with assaults on staff remaining low. Some incidents were very serious. More than half of violent incidents were fights. Inexperienced staff sometimes allowed prisoners who were clearly in conflict to encounter each other. Managers had identified these mistakes. Very limited time out of cell contributed to prisoners' frustration and levels of violence. Staff shortages meant that violence was not always easy to manage. For example, leaders had not yet reintroduced a regular, well-staffed route for prisoners to move safely from the wings to activities.
- 3.5 Since the 2021 inspection, managers had prioritised their response to violent incidents, staff had a better understanding of what to do following conflicts and oversight had improved. All incidents of violence were now investigated under CSIPs and reviewed at the weekly safety interventions meeting. Prisoners received a debrief from staff after incidents, but these were sometimes late and it was not always clear how staff then dealt with the issues they raised.
- 3.6 Wing staff knew the prisoners subject to CSIP. In the previous six months, 81 CSIPs had been opened but only five had been used to support victims. During our visit, most prisoners on CSIPs knew they were being monitored, and the plans to address their violent behaviour showed signs of improvement, but this was not consistent. Prisoners were not always involved in CSIP reviews.
- 3.7 Perpetrators of violence were no longer routinely locked behind their cell door, as at the 2021 inspection. They received some time out of cell while staff managed their ongoing conflicts. There were delays in resolving conflicts between prisoners because only two staff were trained in mediation, although more were due to be trained.

- 3.8 Other interventions designed to reduce violence, such as Choices and Changes and Kinetic Youth (see Glossary), had been recently introduced and showed promise.
- 3.9 We considered that the prison had made reasonable progress against this recommendation.

Use of force

Concern: Despite some improvements in governance, weaknesses in use of force practice were not always identified by the prison or referred subsequently to the governor for further investigation. Due to poor recording and accountability, some footage of incidents from body-worn cameras was now unavailable. Special accommodation had been used six times in the last six months, and prison records did not demonstrate that there had been adequate justification or that it had been necessarily used as a last resort.

Recommendation: Use of force and use of special accommodation should be more accountable with concerning incidents promptly and properly investigated and opportunities for learning and improvement usefully exploited. (1.40)

- 3.10 The number of incidents involving force was high. In the previous six months, approximately 190 incidents had been reported. About half involved lower level force, such as guiding holds, rather than full control and restraint techniques. Most incidents were spontaneous and unplanned.
- 3.11 Despite the high use of force, governance had improved. A duty governor now reviewed all incidents within 24 hours, with concerning practice referred to the deputy governor. We saw evidence of concerns being escalated and managers taking appropriate action.
- 3.12 Staff now used body-worn video cameras more regularly and the footage was saved for review, allowing more effective and robust scrutiny. We saw good examples of staff attempting de-escalation in very volatile situations.
- 3.13 In the previous six months, batons had been drawn 17 times and used at four separate incidents. Where batons had been used, we were assured by the video footage we reviewed that this had been appropriate during some very challenging and violent incidents. However, there were occasions when the drawing of a baton was not always necessary and, although this was monitored in the monthly use of force committee, continuous scrutiny was needed to make sure batons were only drawn and used as a last resort.
- 3.14 It was positive that use of special accommodation had reduced since the 2021 inspection, with just two uses in the previous six months. But the documentation to authorise its use did not assure us that it was still employed as a last resort or for the shortest time possible.

3.15 We considered that the prison had made reasonable progress against this recommendation.

Segregation

Concern: The segregation unit was bleak. Cells, showers and exercise yards were in poor condition and there was no in-cell electricity. It required urgent refurbishment. Apart from a basic regime entitlement of a daily shower, telephone call and half an hour's outdoor exercise, there was little to engage, stimulate or encourage positive behaviour. Multi-unlock staffing levels were routine, without documented authority or daily reviews to check if they remained appropriate.

Recommendation: The purpose of segregation, and the regime and environment that support it, should be to prioritise meeting the specific needs of individuals, provide support to improve their behaviour and develop an approach that encourages and incentivises their re-engagement with the prison regime. (1.41)

3.16 There had been improvements to the segregation unit. These included the installation of two new showers, a refurbished library room and a key worker room. There were plans to introduce in-cell electricity, refurbish the worst cells and improve the exercise yard in the following weeks. The recent addition of a basketball hoop on the yard had given prisoners some welcomed relief from boredom. Although it was positive that prisoners now had access to in-cell telephones for six hours during the day, these were removed unnecessarily for much of the day and evening (see paragraph 3.66).



Segregation unit library

- 3.17 The segregation regime remained limited to a daily shower and half an hour's outdoor exercise. Apart from in-cell workbooks from the education team, little else was provided to engage or stimulate prisoners.
- In the previous six months, the average stay on the segregation unit had been around eight days. Reintegration plans had improved and had a better focus on the specific needs of prisoners. They included interventions from mental health staff and the programmes team, who supported some prisoners to complete the Choices and Changes intervention (see paragraph 3.8 and Glossary).
- 3.19 The use of an increased number of staff to unlock prisoners was more proportionate as it was now based on a risk assessment that was authorised and reviewed by a duty governor.
- 3.20 We considered that the prison had made good progress against this recommendation.

Staff-prisoner relationships

Concern: The key work scheme was not functioning at the time of the inspection. This lack of regular meaningful interaction was of concern, given the potential impact of continuing restrictions on prisoners' well-being and progression.

Recommendation: Managers should make sure that every prisoner has regular contact with a key worker who can address their welfare needs and progression goals. (1.42)

- 3.21 The reintroduction of key work was in its very early days. Most prisoners still did not have any reliable, regular contact with a key worker to help them address their welfare and progression. Despite the prison's aim to provide fortnightly key work sessions, in January 2022 only 5% of prisoners received these and in February 35%, and only then thanks to the introduction of overtime payments for prison staff. This was not sustainable in the long term. Major staff shortages meant that key work sessions were sometimes cancelled as staff were required to run wings and unlock prisoners for showers and exercise.
- 3.22 Much more work was needed to embed and deliver quality key work sessions for prisoners. Recent sessions had tended to be well-being checks without the depth and quality that key work required, and too often were delivered by staff unfamiliar with the prisoner's individual circumstances.
- 3.23 We considered that the prison had made no meaningful progress against this recommendation.

Prisoner consultation

Concern: Consultation arrangements were poor and the resolution of issues was very slow. Prisoners had become disengaged from the consultative process as they felt that they were not taken seriously, and that the prison failed to act on the concerns they raised.

Recommendation: There should be ongoing, meaningful consultation with prisoners, with their issues and concerns addressed and resolved in an accountable way. (1.43)

- 3.24 There had been improvements in prisoner consultation. Monthly forums had recently been introduced on each wing to discuss issues such as safety, cleanliness and prison shop choices. These showed promise but they did not always result in clearly documented actions. There was no clear means of escalating any wider concerns raised to the prison-wide prisoner consultative council (PCC), made up of prisoner representatives from each wing and supposed to meet monthly. The PCC had not met because of COVID-19 restrictions, but the head of residence met individual representatives monthly to seek their views. Managers planned to reinstate PCC meetings soon.
- 3.25 Prisoner consultation had led to some positive outcomes, including more healthy food options on the menu and the installation of benches on the exercise yards, although these changes were not well communicated to prisoners. Many still believed that consultation arrangements were ineffective and did not adequately address persistent, recurring problems, such as prison shop options.
- 3.26 Prisoner representatives did not receive any training to help them perform their roles and had no job descriptions. They did not always receive an agenda in advance of forums to help them prepare adequately, or minutes that set out steps that would follow from consultation. Representatives were allowed time to consult with their peers, but some felt this was too limited.
- 3.27 We considered that the prison had made reasonable progress against this recommendation.

Equality and diversity

Concern: There had been no consultation with prisoners in protected groups, which undermined the DEMT [diversity equalities monitoring team]'s effectiveness, and there was little work with prisoners to promote protected characteristic groups. Black and minority ethnic prisoners reported more negatively than their counterparts in our survey. There was little analysis of data relating to the treatment and experience of those with protected characteristics. Actions from the DEMT meeting often took too long to resolve.

Recommendation: There should be consultation with prisoners in protected groups, and detailed analysis of the data relating to the treatment and experience of these prisoners. This should be used to identify and address any differences in treatment leading to more equitable outcomes. (1.44)

- 3.28 Managers had increased consultation with prisoners in protected groups and there was a renewed commitment to understanding their needs. Prisoners had been chosen to act as new 'strand leads' for each of the protected characteristics. These prisoners were given time to consult with their peers and worked alongside a senior manager, but there was a risk of confusion and overlap with the role of the existing equality representatives.
- 3.29 Prisoners from minority ethnic backgrounds had met to discuss their experiences of discrimination and made recommendations to prison managers, although this process was still in its early days. Useful awareness-raising sessions had been held, sometimes involving outside speakers, but these had involved only a small number of prisoners and staff.
- 3.30 Issues emerging from consultation were reported to the monthly equality meeting, which was chaired by the deputy governor. The meeting was starting to receive and discuss some detailed data on outcomes for protected groups in areas such as work allocations and use of force. Managers' understanding of the data was improving, but this had not yet led to effective action to advance outcomes for protected groups.
- 3.31 We considered that the prison had made reasonable progress against this recommendation

Health

Concern: Prisoners needing a transfer to hospital under the Mental Health Act waited far too long for a bed.

Recommendation: The local delivery board, in conjunction with NHS England and Improvement, should make sure that transfers to secure mental health inpatient units under the Mental Health Act take place within national timescales. (1.45)

- 3.32 There had been no transfers to secure mental health inpatient units under the Mental Health Act (MHA) since the 2021 inspection.
- 3.33 The local delivery board had reworked the protocol for arranging transfers to accommodate recently revised national guidelines that had changed the timescale from 14 to 28 days. Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV), the mental health services provider, would monitor the progress of all future prisoner transfers under the MHA for timeliness. It would also update families of prisoners awaiting transfer under the MHA and discuss their concerns, which was a compassionate development.
- 3.34 We found no evidence that these measures were likely to reduce delays in transfers. The three transfers cited in our 2021 inspection report had all exceeded the new revised target of 28 days.
- 3.35 Without evidence of any transfers since the 2021 inspection, we have not made a judgement against this recommendation.

Concern: Continuing integration of the work of the substance misuse team with physical health, clinical management and mental health teams and the efficiency of joint care delivery were being hampered by lack of access to SystmOne, the inability to co-locate mental health and drug and alcohol recovery teams, and lost appointments due to regime and allocations challenges.

Recommendation: Challenges to the continuing integration of the work of Spectrum, Tees, Esk and Wear Valleys, and Humankind staff should be resolved by the local delivery board. (1.46)

- 3.36 The local delivery board had made some advances in co-locating the TEWV mental health team next to the Spectrum physical health care and clinical management teams. But the Humankind substance misuse team remained separate from their colleagues due to lack of available space.
- 3.37 Access to SystmOne (electronic clinical record) had been improved with more terminals available to the TEWV mental health team. Access remained limited for the Humankind substance misuse team. They could use SystmOne terminals in the health care centre, but it was

- impractical to go there to make entries and ate into appointment time. NHS commissioners had purchased laptops installed with SystmOne for them, but these had not yet arrived.
- 3.38 There were still not enough prison staff to make sure that patients could reliably be brought to the health centre for appointments. Spectrum, TEWV and Humankind teams tried to compensate for this by offering one-to-one sessions to patients on the wings but even this was problematic, due to prisoners being unavailable at the appointed times or meeting rooms being double booked. Health staff sometimes then called prisoners on their in-cell phones, but this lacked privacy.
- 3.39 We considered that the prison had made insufficient progress against this recommendation.

Concern: Medicine queues were not sufficiently well supervised and health care staff's observation of compliance was poor.

Recommendation: Officers and health care staff should supervise the administration of medicines, to reduce the risk of bullying and diversion. (3.82)

- 3.40 Spectrum had introduced a standard operating procedure (SOP) for the administration of medicines at patients' cells if they were unable to attend the health care centre during COVID-19 restrictions. We observed nurses using this SOP efficiently.
- 3.41 The prison had provided guidance to officers about how to minimise the potential for bullying and diversion when prisoners queued for medication. The guidance was clearly displayed on the wall by each medicines administration hatch, and officers we spoke to said it was helpful.
- 3.42 Officers were consistently present whenever and wherever medication was administered, which was an improvement since the 2021 inspection. We observed safe practices, with officers supervising patients as they visited the medicines hatches one-by-one with no queue behind them. This was effective in minimising the likelihood of diversion and bullying.
- 3.43 We considered that the prison had made good progress against this recommendation.

Time out of cell

Concern: Many prisoners spent up to 23 hours in their cells each day with too little to do. Progress to improve the poor regime had been slow. We were concerned about the impact on the well-being and progression of young prisoners, who had limited opportunities to talk to staff, socialise with peers or maintain their relationships with loved ones; were not kept physically or mentally active; and spent only 30 minutes each day in the fresh air.

Recommendation: Time out of cell and access to activity should be improved and increased. (1.47)

- The prison was emerging from COVID-19 restrictions when we visited and its outbreak status had ended a month earlier on 7 February.
- In our roll checks, we found that 61% of prisoners were locked up during the core day, which was worse than the 55% found at the 2021 inspection. Only 16% were engaged in purposeful activity in education or workshops.
- 3.46 A small number of prisoners (28) had full-time work on the wings as cleaners and servery workers, and had about six hours a day out of their cells. Prisoners in part-time work or education could get about 3.5 hours a day out of cell. Unemployed or unallocated prisoners still spent around 23 hours a day in their cells. Prisoners could reliably go to the gym twice a week.
- 3.47 Managers planned to give most prisoners part-time work or education, resulting in a maximum of 3.5 hours a day out of cell, which was too limited for a training prison with a very young population. Even this part-time regime was so far proving unreliable because it relied on just two officers taking prisoners to and from each wing for their activity.
- 3.48 Staff attrition rates were high; 24 frontline staff had resigned over the last year. Additionally, too few staff were available to run wings and take prisoners to activities for reasons that included sickness. At the time of our visit, there was no realistic prospect of the prison being able to deliver access to full-time work or education safely and routinely, even for the currently much reduced population.
- 3.49 During our visit, many prisoners reported that they were bored and frustrated at the lack of activity. One young adult commented:
 - 'There's nothing to do here for long termers... I want to do courses that would benefit me and reduce my risk level.'
- 3.50 We considered that the prison had made no meaningful progress against this recommendation.

Education, skills and work



This part of the report is written by Ofsted inspectors. Ofsted's thematic approach reflects the monitoring visit methodology used for further education and skills providers. The themes set out the main areas for improvement in the prison's previous inspection report or progress monitoring visit letter.

Theme 1: What progress had leaders and managers made to ensure that wing and classroom-based learning sessions, supported by ready access to relevant information technology resources and enough mentoring provision, met prisoners' needs?

- 3.51 Classroom-based provision did not meet the needs of prisoners adequately. Almost all activity places were part time and sufficient in number for the current population, but were not being fully utilised.
- 3.52 Attendance was low and punctuality was poor. There were significant delays escorting prisoners to education. Too many prisoners were not collected from their accommodation to attend classes and those who were often did not attend on time because of delays in escorting them. On occasion, prisoners arrived at classes only half an hour before they were due to finish. Planned attendance patterns varied and some prisoners on functional skills English and mathematics courses only attended every other week for one session, which was insufficient to learn and practise their understanding and knowledge. Plans were in place to increase capacity on all courses. However, the number of prison staff currently available to escort prisoners to education, training and work was too low to make this an achievable option.
- 3.53 Leaders and managers had made some progress in moving from workbook delivery to providing accredited courses in classrooms. Most education classes were available, accommodating small numbers of three to four prisoners. The construction academy was closed and learners on construction crafts courses had no access to practical training. Most prisoners did receive support with their workbooks on their accommodation units from education staff.
- 3.54 Access to information technology resources had improved. The virtual campus (giving prisoners internet access to community education, training and employment opportunities) provided good resources and was available in most classrooms. It was particularly well used during functional skills English and mathematics sessions, adding variety to teaching and learning through using video and other learning resources that motivated prisoners. Enabling technologies, such as DVD players and reader pens, were used to support learning for prisoners with additional leaning needs.

- 3.55 Peer mentors were not used in education to support learners who needed help in lessons, although plans to introduce them were being considered.
- 3.56 Ofsted considered that the prison had made insufficient progress against this theme.

Theme 2: What progress had leaders and managers made to ensure that all prisoners participated in an effective induction process, including the comprehensive collection of their starting points that are used to plan and review prisoners' participation in relevant education, skills or work, which meets their needs fully?

- 3.57 The induction process was new and had improved, but many prisoners who had been at the prison a number of years were only recently benefiting from it. Until very recently, tutors were reliant on prisoners returning limited paper-based induction information provided to them on their wings. Many did not return the information, or it was returned incomplete. As a result, approximately 30% of prisoners were not allocated to an activity. Other prisoners were in activities that did not match their skills needs or career aspirations. Nearly 25% of the population had not had an initial assessment of their English or mathematical skills at induction to establish their starting points and skill development needs. Some of these prisoners had been at the prison for over three years.
- 3.58 Leaders and managers had made beneficial changes to the structure of the induction processes. New arrivals received helpful and relevant information from a number of sources, such as in-cell television, welcome letters and post cards, followed by a well-structured, face-to-face induction session. The prisoners' starting points in English and mathematics were assessed and they completed a self-assessment of their strengths and weaknesses.
- 3.59 Tutors collected information on the skills prisoners had developed prior to entering the prison, but this was not used to inform their education, training or skills development plans. The allocation team considered the capacity of places available, what the prisoner stated that they would enjoy and any security concerns carefully before making the allocation. They did not place enough focus on the skills needs or career aspirations of prisoners when allocating them to education classes, vocational training or work.
- 3.60 Ofsted considered that the prison had made insufficient progress against this theme.

Theme 3: What progress had leaders and managers made to ensure that effective careers information, advice and guidance arrangements were implemented so that all prisoners make informed and realistic career decisions?

- 3.61 The careers information and guidance that prisoners had received since the 2021 inspection had been limited. Information, advice and guidance workers endeavoured to visit prisoners on their wings but access to them was often difficult. Recent changes now included careers advice and guidance as part of the new face-to-face induction processes. This enabled new prisoners to discuss any career aspirations at an early point in their sentence and provided them with an overview of the support available on release. However, processes to identify prisoners who were in the last six months of their sentence were not rigorous enough. There was an over-reliance on the guidance worker working with staff such as prison instructors to identify these prisoners.
- 3.62 Guidance workers worked well with internal prison departments to gain an understanding of any prisoner release constraints. For example, where there was a change in the location of the prisoner's release, guidance workers provided information of the local labour market in their prospective destination. When their next steps were identified, most prisoners were supported with access to appropriate opportunities, such as local college courses. This process was relatively new and not all prisoners due for release had benefited from this support.
- 3.63 The opportunities to undertake employability training when nearing release were not available to all prisoners. Those attending prison workshops completed an activities booklet that helped them to identify and develop wider skills linked to employment, such as teamworking and timekeeping. Those who undertook wing cleaning roles had the opportunity to gain additional employability training. However, this training was not extended to those who attended education or who were unemployed. Managers had recognised this and planned to include it into next year's curriculum plan.
- 3.64 Ofsted considered that the prison had made insufficient progress against this theme.

Children and families and contact with the outside world

Concern: Most prisoners had limited access to the telephone, with only 10 minutes allowed each day. There was no availability on some wings for prisoners to make telephone calls in the evenings, when their families were most accessible.

Recommendation: All prisoners should have access to the telephone at least once a day, for a duration and at a time that supports meaningful family contact. (1.49)

- 3.65 In-cell telephones had now been installed on all but one wing. This was a major improvement that was valued by prisoners.
- 3.66 It had not been possible to install telephones on I wing so far. Prisoners here were unlocked to use the phone kiosks during the day and also allowed to make one call a week in the evenings. On the segregation unit, telephones were removed unnecessarily from prisoners' cells for much of the day and evening (see paragraph 3.16).
- 3.67 We considered that the prison had made good progress against this recommendation.

Section 4 Summary of judgements

A list of the HMI Prisons recommendations and Ofsted themes followed up at this visit and the judgements made.

HMI Prisons recommendations

Managers should review the prison's approach to incentives in all aspects of prison life. Rewards and incentives that are meaningful to prisoners and which recognise and support those who engage with the regime and behave well should be introduced. (1.38)

No meaningful progress

Oversight of violence reduction measures should make sure that all incidents of violence are investigated swiftly, and that victims and perpetrators are challenged and supported appropriately. (1.39)

Reasonable progress

Use of force and use of special accommodation should be more accountable with concerning incidents promptly and properly investigated and opportunities for learning and improvement usefully exploited. (1.40)

Reasonable progress

The purpose of segregation, and the regime and environment that support it, should be to prioritise meeting the specific needs of individuals, provide support to improve their behaviour and develop an approach that encourages and incentivises their re-engagement with the prison regime. (1.41)

Good progress

Managers should make sure that every prisoner has regular contact with a key worker who can address their welfare needs and progression goals. (1.42) **No meaningful progress**

There should be ongoing, meaningful consultation with prisoners, with their issues and concerns addressed and resolved in an accountable way. (1.43) **Reasonable progress**

There should be consultation with prisoners in protected groups, and detailed analysis of the data relating to the treatment and experience of these prisoners. This should be used to identify and address any differences in treatment leading to more equitable outcomes. (1.44)

Reasonable progress

The local delivery board, in conjunction with NHS England and Improvement, should make sure that transfers to secure mental health inpatient units under the Mental Health Act take place within the national timescale of 28 days. (1.45) **Insufficient evidence to make a judgement**

Challenges to the continuing integration of the work of Spectrum, Tees, Esk and Wear Valleys, and Humankind staff should be resolved by the local delivery board. (1.46)

Insufficient progress

Officers and health care staff should supervise the administration of medicines, to reduce the risk of bullying and diversion. (3.82)

Good progress

Time out of cell and access to activity should be improved and increased. (1.47) **No meaningful progress**

All prisoners should have access to the telephone at least once a day, for a duration and at a time that supports meaningful family contact. (1.49) **Good progress**

Ofsted themes

What progress had leaders and managers made to ensure that wing and classroom-based learning sessions, supported by ready access to relevant information technology resources and enough mentoring provision, met prisoners' needs?

Insufficient progress

What progress had leaders and managers made to ensure that all prisoners participated in an effective induction process, including the comprehensive collection of their starting points that are used to plan and review prisoners' participation in relevant education, skills or work, which meets their needs fully? **Insufficient progress**

What progress had leaders and managers made to ensure that effective careers information, advice and guidance arrangements were implemented so that all prisoners' make informed and realistic career decisions?

Insufficient progress

Appendix I About this report

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

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

Independent reviews of progress (IRPs) are designed to improve accountability to ministers about the progress prisons make towards achieving HM Inspectorate of Prisons' recommendations in between inspections. IRPs take place at the discretion of the Chief Inspector when a full inspection suggests the prison would benefit from additional scrutiny and focus on a limited number of the recommendations made at the inspection. IRPs do not therefore result in assessments against our healthy prison tests. HM Inspectorate of Prisons' healthy prison tests are safety, respect, purposeful activity and rehabilitation and release planning. For more information see our website: https://www.justiceinspectorates.gov.uk/hmiprisons/our-expectations/

The aims of IRPs are to:

- assess progress against selected key recommendations
- support improvement
- identify any emerging difficulties or lack of progress at an early stage
- assess the sufficiency of the leadership and management response to our main concerns at the full inspection.

This report contains a summary from the Chief Inspector and a brief record of our findings in relation to each recommendation we have followed up. The reader may find it helpful to refer to the report of the full inspection, carried out in July 2021, for further detail on the original findings (available on our website at https://www.justiceinspectorates.gov.uk/hmiprisons/).

IRP methodology

IRPs are announced at least three months in advance and take place eight to 12 months after a full inspection. When we announce an IRP, we identify which recommendations we intend to follow up (usually no more than 15). Depending on the recommendations to be followed up, IRP visits may be conducted jointly with Ofsted (England), Estyn (Wales), the Care Quality Commission and the General Pharmaceutical Council. This joint work ensures expert knowledge is deployed and avoids multiple inspection visits.

During our three-day visit, we collect a range of evidence about the progress in implementing each selected recommendation. Sources of evidence include observation, discussions with prisoners, staff and relevant third parties, documentation and data.

Each recommendation followed up by HMI Prisons during an IRP is given one of four progress judgements:

No meaningful progress

Managers had not yet formulated, resourced or begun to implement a realistic improvement plan for this recommendation.

Insufficient progress

Managers had begun to implement a realistic improvement strategy for this recommendation but the actions taken since our inspection had had not yet resulted in sufficient evidence of progress (for example, better and embedded systems and processes).

Reasonable progress

Managers were implementing a realistic improvement strategy for this recommendation and there was evidence of progress (for example, better and embedded systems and processes) and/or early evidence of some improving outcomes for prisoners.

Good progress

Managers had implemented a realistic improvement strategy for this recommendation and had delivered a clear improvement in outcomes for prisoners.

When Ofsted attends an IRP its methodology replicates the monitoring visits conducted in further education and skills provision. Each theme followed up by Ofsted is given one of three progress judgements.

Insufficient progress

Progress has been either slow or insubstantial or both, and the demonstrable impact on learners has been negligible.

Reasonable progress

Action taken by the provider is already having a beneficial impact on learners and improvements are sustainable and are based on the provider's thorough quality assurance procedures.

Significant progress

Progress has been rapid and is already having considerable beneficial impact on learners.

Ofsted's approach to undertaking monitoring visits and the inspection methodology involved are set out in the *Further education and skills inspection handbook*, available at https://www.gov.uk/government/publications/education-inspection-framework.

Inspection team

This independent review of progress was carried out by:

Charlie Taylor Chief Inspector
Jonathan Tickner Team leader
Steve Oliver-Watts Inspector
Rebecca Stanbury Inspector
Nadia Syed Inspector

Paul Tarbuck Health and social care inspector

Beverly Ramsell Ofsted inspector Sheila Willis Ofsted inspector

Appendix II Glossary of terms

We try to make our reports as clear as possible, and this short glossary should help to explain some of the specialist terms you may find. If you need an explanation of any other terms, please see the longer glossary, available on our website at: http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/

Challenge, support and intervention plan (CSIP)

Used by all adult prisons to manage those prisoners who are violent or pose a heightened risk of being violent. These prisoners are managed and supported on a plan with individualised targets and regular reviews. Not everyone who is violent is case managed on CSIP. Some prisons also use the CSIP framework to support victims of violence.

Choices and Changes

An HMPPS resource pack for key workers or prison offender managers to use in one-to-one sessions with young adults who have been identified as having low psychosocial maturity. The exercises in the pack aim to encourage engagement and help young adults to develop their maturity.

Key worker scheme

The key worker scheme operates across the closed male estate and is one element of the Offender Management in Custody (OMiC) model. All prison officers have a caseload of around six prisoners. The aim is to enable staff to develop constructive, motivational relationships with prisoners, which can support and encourage them to work towards positive rehabilitative goals.

Kinetic Youth

A not-for-profit social enterprise that primarily works with young people in custody to help them gain new skills and understand their world better.

Leader

In this report the term 'leader' refers to anyone with leadership or management responsibility in the prison system. We will direct our narrative at the level of leadership which has the most capacity to influence a particular outcome.

Operational capacity

The total number of prisoners that an establishment can hold without serious risk to good order, security and the proper running of the planned regime.

Protected characteristics

The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

Time out of cell

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

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