



# **Expectations**

**Criteria for assessing the treatment of and conditions for women in prison**

**Version 2, 2021 (updated March 2024)**

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## Introduction

This is the second edition of our Expectations which are specific to the treatment and conditions experienced by women in custody. The first version was published in 2014. This edition aims to focus more clearly on key outcomes for women in prison, while acknowledging important findings from recent reviews and reports and drawing on current thinking about what constitutes good practice. The underpinning ethos is that they should no longer be held in custody which was designed for men and merely adapted slightly to accommodate women. Our starting point in setting out specific outcomes for women in custody is that their needs and vulnerabilities are different from those of men in many ways. In achieving this we expect to see a fundamentally different approach to imprisoning women which is safe, decent and purposeful.

A small proportion of women in custody represent a high risk of harm to others. Women in prison will have distinct risks and needs, and they may offend for different reasons than men. Some women may have individual personal vulnerabilities that need to be safeguarded against in prison. Many will have experienced chaotic lifestyles involving substance misuse, mental health problems and homelessness. These are often the product of a life of abuse, victimisation and trauma (see Appendix I, note i). The specific vulnerabilities of women may contribute not only to their offending behaviour, but also to how they engage and respond to subsequent interventions (see Appendix I, note ii).

These factors influenced our approach to this review of Expectations. Our aim has been to set out more demanding and bespoke standards for women's prisons. We hope that they support establishments in continuing to improve outcomes for women in their care.

We completed a review of a range of literature to inform our work. We found that much of the evidence about what is effective in reducing women's reoffending is based on small-scale studies that, for a variety of reasons, are often not comparable. Nevertheless, our review identified some key themes which have been incorporated into these revised Expectations.

After much deliberation we have chosen to retain our four basic tests of a healthy prison. However, significant changes have been made to the content of each test to reflect the differing risks and needs of women and promote a new and sharper focus. For example, we have emphasised the role of safe and healthy relationships in underpinning women's safety, while recognising the role that formal mechanisms such as reward schemes and adjudications have in encouraging positive behaviour. We have also reflected the cross-cutting influence of some issues. Therefore, relationships with children, families and others significant to women are prominent in the 'Respect' section, but also feature in other sections such as 'Early days in custody'. It is important to note that the need to recognise and support women in dealing with the effects of trauma is included in all four of our tests. The impact of trauma on all aspects of many vulnerable women's lives is now being recognised, and we wanted to reflect this in our approach.

These Expectations were drawn up after extensive consultation, including focus groups with women in custody, and are based on and referenced against international and regional human rights standards. This edition aims to bring Expectations up to date so that we can continue to fulfil our responsibility to deliver independent and objective assessments of outcomes for women in prison. This focus is 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.

Each healthy prison test sets out the standards of treatment and conditions we expect an establishment to achieve. Each expectation is underpinned by a series of 'indicators', which describe the evidence that will help inspectors reach a judgement about whether the outcome is likely to have been achieved. The lists of indicators are not exhaustive, and they do not exclude an establishment demonstrating that expectations have been met in other ways. We hope they will not be seen as constraining or prescriptive checklists, but as informative and supportive guides to help achieve the desired outcomes.

**Charlie Taylor**  
**Chief Inspector of Prisons**

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## Healthy prison tests

Expectations are organised under HM Inspectorate of Prisons' four tests of a healthy prison. For women these are:

### **Safety**

Women, particularly the most vulnerable, are held safely.

### **Respect**

Women's relationships with children, family and their support networks are central to their care in custody. A positive community ethos is evident, and all needs are met.

### **Purposeful activity**

Women are able and expected to engage in activity that is likely to benefit them, including a positive range of recreational and social activities.

### **Preparation for release**

Preparation for release is understood as a core function of the prison. Women are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Women are prepared for their release back into the community.

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

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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. Lists of indicators are not exhaustive and they do not exclude an establishment demonstrating an expectation has been met in other ways.

## Section 1: Leadership

**Leaders provide the direction, encouragement and resources to enable good outcomes for women in prison.** (See Appendix I, note iii.)

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### Expectations

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

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

- 2. Engagement: Leaders create a culture in which staff and other stakeholders willingly engage in activities to improve outcomes for women in prison.**

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 women 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 women 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 women.
- Effective practice is recognised and shared.
- The organisational culture encourages staff to reflect on and learn from their mistakes.

**3. Enabling: Leaders provide the necessary resources to enable good outcomes for women in prison.**

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 prison.
- Staff have the knowledge, skills and attitudes necessary to meet the needs of women.
- 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 women.
- Line managers support their staff, challenge where necessary and provide suitable professional development opportunities.
- ICT systems support effective working practices.

**4. Continuous improvement: Leaders focus on delivering priorities that support good outcomes for women in prison. 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 women, 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 policy teams and colleagues in other prisons or partner organisations supports improvement.



## **Section 2: Safety**

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

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## Early days in custody

**Women are safe at all times throughout their transfer and early days in prison. They are treated with respect and well cared for. Individual risks and needs are identified and addressed, including care of any dependants. Women are given additional support on their first night and induction is comprehensive.**

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### Expectations

#### **5. Women are transferred safely and in accordance with their individual needs.**

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

- Subject to well-evidenced security reasons women are given advance notice of their transfer and are able to inform someone of their move to the prison.
- Women can make direct contact with their dependants or those who care for their dependants to make suitable arrangements for them prior to their transfer to the prison (see Appendix I, note iv).
- Women are given information about the prison they are going to and understand where it is in relation to their home area.
- Escort staff are aware of women's individual needs. All necessary information identifying any issues relating to risk, including self-harm, is recorded in the person escort record which accompanies women on their journey to the prison.
- Women who are pregnant or have recently given birth, including those who will be separated from their child or have already been separated, are given information at court which is specific to their needs. This includes detailed information about the process for applying to a mother and baby unit and support in applying.
- Women are transported in suitable escort vehicles to meet individual needs, including for:
  - pregnant women and women with babies
  - women with disabilities
  - those who have experienced previous trauma which makes use of cellular vehicles inappropriate.
- Women are transported in separate vehicles to men and with a female escort.
- Escort vehicles are safe, clean and meet the needs of individual women, including the provision of sanitary and other hygiene products.
- Women are offered comfort breaks. The frequency of stops considers individual circumstances and needs, for example health, disabilities, and breastfeeding.

- Women understand how to make a complaint about their treatment during escort and are supported in doing so.

**6. Women feel and are safe on their arrival at the prison and throughout their early days.**

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

- Women are offered the opportunity to speak to a female officer while in reception and on their first night. Wherever possible this is in a language they understand, using translation if necessary.
- Women are not locked in holding rooms in reception unless it is necessary.
- Women have free access to peer workers on arrival.
- Women receive food and drink while waiting in reception.
- The reception and first night units provide an environment that is safe. They are designed and operate to minimise the risk of contributing to or causing trauma.
- All searches are undertaken by staff of the same sex as the prisoner.
- Searches are undertaken with respect and in private.
- Women are not routinely strip-searched. The use of strip searching is based on credible intelligence and is properly authorised. Operational policy and practice are reviewed at regular intervals.
- Strip searches never take place within sight of staff of a different sex to the prisoner.
- Women have a comprehensive safety interview in reception with a clear focus on risks, including self-harm and suicide. All necessary steps are taken to minimise risks.
- Women receive a health screening by health care staff as part of the reception process.
- Women receive all the basic equipment and supplies they need for their first days in the prison, in good condition.
- Women who want to apply to a mother and baby unit are provided with information which is easy to understand and which explains the application, admission and separation process. They are supported in their application.

**7. Women are helped and supported to address their individual concerns, needs and risks in reception and during their early days in the prison.**

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

- Women can make immediate contact with their children, families and other people who are significant to them to put in place appropriate care arrangements. More than one telephone call is allowed if needed.

- Women who are or may be pregnant, or have been pregnant recently, are provided with information and support.
- Women who have been recently separated from a child or have dependant children in the community are provided with information to allow them to access support services and resources.
- All potential child safeguarding concerns are relayed to the prison safeguarding lead. Contact is made with children's services as necessary, action is followed up and information is promptly shared with women.
- Women understand what is going to happen to them during reception processes and can access a range of support, for example Listeners and dedicated peer workers.
- Women receive essential reception and first night procedures regardless of their arrival time at the prison.
- Women know about the help and support available to manage previous life experiences, for example domestic abuse, forced marriage, female genital mutilation (FGM) and traumatic events in childhood.
- Women who may have been trafficked are identified by staff and a referral is made using the National Referral Mechanism (NRM). Referrals to the NRM are made with informed consent whenever possible.
- Women who have been detained for their own protection are identified during reception processes and a plan is put in place to provide them with support and care. This involves a multidisciplinary team, including health representatives, with the aim of rapidly assessing the individual to make sure an appropriate placement in a suitable facility is found.

**8. Women are well supported throughout their first night and complete a comprehensive programme of induction.**

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

- Women receive their property before moving to the first night unit.
- Women are supported in moving from the reception area to the first night unit and then on to the main wing.
- Women have unlimited access to in-cell telephones on the first night unit.
- Women can have a shower before being locked up for their first night.
- Women receive regular welfare checks during their first night.
- Women complete a comprehensive induction programme that includes sessions with peer workers and starts promptly.
- Staff involved in the induction programme are trained in understanding the impact of trauma and show a good understanding of effective practice when working with women in prison.
- Women know where the prison is and how their visitors can get to it. They are helped to arrange their first visits.
- Women have access to a range of community agencies to prepare for release. Technology, such as video calling, is used to promote ongoing contact.

## **Promoting positive relationships and support within the prison**

**Safe and healthy working relationships within the prison community foster positive behaviour and women are free from violence, bullying and victimisation. Women are safeguarded, are treated with care and respect and are encouraged to develop skills and strengths which aim to enhance their self-belief and well-being.**

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### **Expectations**

#### Safe and healthy relationships

**9. All staff actively engage with women, know them as individuals and develop positive working relationships with them.**

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

- Staff understand the impact of life experiences, such as trauma and abuse, on behaviour and this is reflected in how they work with women, for example, respecting personal space and avoiding loud noises.
- Staff know the women in their care well, understand how to promote their well-being and are alert to triggers for personal crisis.
- Staff are fair and courteous to women, for example using their preferred name.
- Leaders and staff lead by example and regularly engage with women on wings, setting clear boundaries and motivating women to progress in their sentence plan.
- When staff need to relay sensitive or unwelcome news to women, this is done in private and with compassion and is managed in partnership with relevant support agencies.
- Staff treat women's cells and possessions with respect.
- The majority of staff and leaders who work directly with women in the prison are female. There is always a female member of staff in living areas.

**10. Women have a dedicated member of staff who supports their personal well-being and helps them develop skills for the future.**

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

- All women have a dedicated member of staff who knows them well and holds structured and well-documented support meetings with them on a regular basis.
- The dedicated member of staff knows what is in the woman's sentence plan and uses this to promote rehabilitation and release planning and reward success.

- Staff support women to access the support of their choice.
- Staff supporting women have an in-depth understanding of their trauma history as well as any caring responsibilities and other significant relationships. They understand the impact these can have on women's well-being and current behaviour.
- Staff understand women's wider support networks and help them to foster and develop their supportive relationships.
- Staff providing support are consulted on matters relating to the women in their care and involve other agencies where appropriate.
- Staff are aware of services available in the prison and in the community and help women to access them.

**11. Women are supported to develop positive relationships with one another.**

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

- Women are supported to maintain positive relationships and set appropriate boundaries.
- Women can access support services to improve relationship skills.
- Staff are aware of relationships which may break down or which are having a negative impact on women, and support women to manage them.
- When relationships break down, care is provided to make sure both parties are safe and supported.
- Staff respond to intimate relationships between women constructively, setting out clear rules and boundaries.

Reducing self-harm and preventing suicide

**12. The well-being of women is promoted through an effective strategy to reduce self-harm and prevent suicide.**

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

- Regular analysis of all incidents of self-harm is used to understand trends over time and any specific, local causes.
- The analysis underpins a clear self-harm reduction and suicide prevention strategy and robust action plan. This requires action from the whole prison.
- Women help to improve the strategy and action plan by participating in a regular and well-attended multidisciplinary committee.
- Staff are trained to identify women at risk of self-harm and support them.
- The strategy helps women develop positive coping strategies to reduce self-harm.
- Uniformed staff carry anti-ligature knives at all times.

- Staff are clear about their responsibility to preserve life, when to enter a locked cell and what to do in an emergency.
- Appropriate first aid equipment is readily available and sufficient staff working on the residential units are trained to use it.

**13. Women receive individualised care from a multidisciplinary team to reduce their likelihood 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.

- Friends, family and others involved in supporting women know how to raise concerns about their risk of self-harm or suicide and women can access these sources of support to assist their recovery.
- Women are actively involved in the development, implementation and review of individualised care and support plans which identify and deliver the actions needed to reduce their risk of suicide or self-harm and promote effective coping skills.
- Information about women at risk of suicide or self-harm is shared effectively with all staff and relevant multidisciplinary support services involved in their care.
- The quality and consistency of care provided is assured by leaders and action is taken to rectify weaknesses.
- Arrangements are in place to check on women after a care and support plan has been closed.
- Constant supervision is only used when less restrictive measures would not be effective. Any use of constant supervision is engaging, meaningful and gives access to a purposeful regime.
- All women retain their personal possessions unless there are documented exceptional circumstances evidenced by a multidisciplinary review.
- Women can receive listening support from enough suitably trained and supported peer workers.
- Women can contact the Samaritans at any time, free of charge.
- Women have access to chaplaincy, counsellors, key workers and other specialists as needed.
- Special accommodation/anti-rip clothing is only used as a last resort and attention is given to maintaining women's health, privacy and dignity.

## Learning from self-inflicted deaths and attempts by women to take their own lives

### **14. Self-inflicted deaths and attempts by women to take their own lives are independently investigated and opportunities for improved care are rigorously pursued.**

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

- Investigations of any attempts by women to take their own lives are thorough, appropriately independent and identify opportunities for improvements in care which are rigorously pursued and evidenced.
- Leaders are responsible for implementing learning from deaths and attempts by women to take their own lives.
- Women's safety is promoted by a rigorous and sustained response to recommendations resulting from all Prisons and Probation Ombudsman (PPO) investigations into deaths in custody and coroner's inquests.
- Progress against all recommendations is regularly reviewed by leaders to confirm ongoing compliance.
- Any deaths of women while in prison are reported.

## Protecting women, including those at risk of abuse or neglect

### **15. Women at risk of harm, abuse or neglect are identified and protected.**

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

- There are internal arrangements to respond to safeguarding concerns and a senior leader is actively involved in the local safeguarding adults board.
- Women at risk of abuse or neglect in or outside the prison are protected by staff who take appropriate action. Staff recognise the full range of abuse and harm and know what action to take.
- The prison has a clear understanding of when the local safeguarding adults board should be consulted.
- Where harm, abuse or neglect is alleged or suspected, prompt action is taken to protect the individual and to investigate the concerns.
- Women can access a range of support services and staff encourage women to involve their family, friends or others who may support them in their care.
- Women whose physical and mental health is likely to be adversely affected by their imprisonment are safeguarded while in prison (see Appendix I, note v).
- Women can access advocates to help them understand and give informed consent to their care.
- Women who are remanded into custody for their own protection are identified, assessed, supported and moved to a more appropriate placement as soon as possible.



- Appropriate safeguards are put in place for women sent to prison for their own protection and advice is sought from the local safeguarding adults board as required.

## **Promoting positive behaviour**

**Women live in a safe, well-ordered and supportive community where their positive behaviour is promoted and rewarded. Antisocial behaviour is dealt with fairly.**

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### **Expectations**

#### Supporting women's positive behaviour

#### **16. Women's positive behaviour is encouraged and they are involved in promoting a healthy and safe prison community.**

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

- Staff model positive behaviour and encourage women to manage their own behaviour and actions.
- There is a local policy and action plan to incentivise positive behaviour.
- There is a coherent approach to promoting positive behaviour in all areas of the establishment that emphasises acknowledgement and reward.
- Women are able to benefit from a reward scheme that motivates them to engage with the prison regime and work towards their sentence plan objectives.
- Women are actively involved in developing and reviewing the reward schemes.
- Where necessary women are supported to understand fully the issues underpinning any negative behaviour and are provided with support to behave differently.
- Contact, including family days, with children, families and other people significant to women is not dependent on women's current privileges and behaviour.
- Women know they can appeal against reward scheme decisions and are helped to do so.
- Conflict between women is managed well. Staff are alert to conflict and know when to intervene to prevent it escalating. Staff investigate incidents of conflict thoroughly and speak sensitively to the women involved. Mediation is used appropriately.
- Women are encouraged to work together to resolve problems and difficulties without the need to resort to formal sanctions.
- When rules are breached, staff take time to explain how and why to women and work with women to put in place steps to improve behaviour.
- Women are never subject to unofficial punishments.

**17. Women who need additional support to manage harmful behaviour have a detailed care plan that includes consideration about their location within the prison and the support they need.**

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

- Staff understand the underlying reasons for harmful behaviour.
- There is an effective strategy and action plan to provide additional support to women who need it.
- Behaviour support plans are regularly reviewed in conjunction with women and targets are updated depending on changes in behaviour.
- Women who need additional support to manage their behaviour are not located in the segregation unit unless in exceptional circumstances. Any move to the segregation unit is made in close liaison with the mental health team and, where relevant, psychology services.
- Specialist behavioural management units have a clear purpose, are subject to rigorous governance and provide clear rationale for ongoing separation.
- Women living in specialist behavioural management units can easily access the support they need alongside access to a full regime.
- Care plans are multidisciplinary and focus on the reintegration of women to the general population at the earliest opportunity.

**18. Women feel and are safe from bullying, violence and other antisocial behaviour from others.**

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

- The strategy and action plan to reduce bullying, violence and antisocial behaviour are kept under review by a well-attended multidisciplinary group that meets regularly. This includes meaningful consultation with women.
- Staff challenge antisocial behaviour robustly and promptly.
- All incidents of violence and antisocial behaviour are reported and investigated thoroughly.
- Formal systems used to promote good behaviour and address bullying and violence are effective.
- Perpetrators of violence and antisocial behaviour are helped to change their behaviour and victims are well supported.
- Women who are self-isolating due to the fear of violence or bullying are identified, receive a daily regime that is equivalent to other prisoners and have a comprehensive reintegration plan.
- The number of women self-isolating and the reasons for this are understood and action is taken to support them.

## Adjudications

### **19. Adjudications are used as a last resort. Hearings are fair and proportionate and follow due process.**

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

- To make sure adjudications are used as a last resort, women are not charged with an offence unless staff investigate what triggered their behaviour and consider their capacity to understand the adjudication process and the reasons for it, their mental health and their well-being.
- Adjudications are clearly underpinned by restorative justice principles; for example, women are involved in identifying what they need to do differently.
- The cumulative impact of punishments, together with other measures in place, are considered. This includes making sure women are never subject to a regime that amounts to solitary confinement.
- Punishments do not interfere with women's contact with their family or people significant to them.
- Adjudication hearings are not conducted in the segregation unit and are held in a calm and non-threatening environment.
- Women have the option to be supported at an adjudication hearing by a person of their choice. This can include another prisoner, a member of staff or a person who is significant to them within the prison.
- Hearings include multidisciplinary input from others who are supporting women to ensure any underlying factors that may influence women's behaviour are understood and that punishments do not interfere with rehabilitative work.
- Women subject to disciplinary procedures understand the charges and procedures they face and their level of understanding is explored.
- Women are routinely offered legal advice, understand why it may help them and are provided with time and support to apply for it.
- Following adjudication hearings staff provide ongoing support to women to motivate them to make positive changes to their behaviour.
- Leaders routinely quality assure adjudication procedures and outcomes, including through data analysis, to make sure there is ongoing appropriateness and fairness.
- Leaders use adjudication data to identify and understand causes and themes in underlying behaviour. They put in place plans to address these across the prison.

## Segregation

### **20. Women are only separated as a last resort with the proper authorisation. Separation is carried out safely, in line with women's individual needs and never as punishment.**

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

- Women are only separated for justifiable reasons and as a last resort.
- When women are separated this is for the shortest possible time and subject to proper authorisation and review.
- Women are not separated as a punishment.
- Women on an open ACCT (see Appendix I, note vi) are only separated in exceptional circumstances, with oversight from the mental health team and a senior leader.
- Separation as a punishment should not be used for women who are pregnant, with infants or breastfeeding.
- Women are informed of the reasons for their separation in a format and language they understand and are made aware of how to challenge it.
- A multidisciplinary staff group monitors women in segregation units, those who are separated on normal location and those in specialist units to ensure they are held there as a last resort and that it has been appropriately authorised. There is analysis of patterns and trends about who is being separated and the reasons for it.
- Transfers of women between segregation units in different prisons are exceptional, carefully monitored to prevent prolonged segregation and properly authorised.
- Separated women have daily access to a senior leader, chaplain and a health services professional, in private if requested, and a record of these visits is maintained. A member of the Independent Monitoring Board (IMB) team visits them at least once a week.
- Medical staff report to the governor/director at any time when the effect of segregation on a woman's mental health becomes a concern (see 'Health and social care' section).

### **21. Women are kept safe at all times while separated and individual well-being is fully recognised and promoted.**

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

- Staff make every effort to understand the behaviour leading to separation and women are supported to address this.
- Staff receive support and training in how to work with separated people, which includes the particular effects of separation on women.
- Separated women have their individual needs met and are involved in the development and delivery of their reintegration plan.

- Health care staff promptly assess all women who have been separated and make sure action is taken when women are assessed as not coping with separation.
- Women who are separated are not strip-searched unless there is sufficient specific intelligence and proper authorisation.
- Women are never subjected to a regime which amounts to solitary confinement (see Appendix I, note vii).
- Women held in separation have meaningful conversations with a range of staff every day, including the opportunity to speak in confidence with a senior leader, a health care professional and a chaplain.
- The number of staff necessary to unlock individual women who are separated is decided on the basis of a daily risk assessment, which is properly authorised and recorded.
- Staff are vigilant in detecting and acting on signs of decline in the emotional and mental well-being of women who are separated. Women who are separated retain their personal possessions unless there are documented exceptional circumstances evidenced by a multidisciplinary review.

**22. Women in the segregation unit or who are separated live in decent conditions and have a regime that is equivalent to the rest of the prison.**

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

- Segregation units are decent, clean and meet the needs of women.
- Women are not denied contact with their children, families and others significant to them.
- Women are not routinely locked in a cell and are able to associate with others and undertake purposeful activities.
- Subject to risk assessment, women can access the same facilities and privileges as elsewhere in the prison, including regime activities and the support of peer workers.
- Women who are segregated have at least one hour of exercise outdoors every day. This is in association with other women unless there is a defensible and authorised risk assessment evidencing the reason not to allow this.

## Use of force

### **23. Force is only used as a last resort and never as a punishment. If force is used on women it is justified, 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.

- There is a use of force minimisation strategy in place that involves all departments and includes the dissemination of good practice in avoiding the use of force.
- Women contribute to local policy on use of force, including advising on what is helpful when they are in distress.
- All staff are trained in and use de-escalation techniques.
- Body-worn video cameras are always used to film spontaneous and planned use of force incidents and as a de-escalation tool.
- A use of force plan is in place to safeguard pregnant and postpartum women and those with a relevant medical condition who may be adversely affected by restraint.
- All staff are aware of the information in the plan and use it during restraint.
- Planned use of force is properly authorised and force is only ever used once all other avenues of persuasion have been exhausted. Staff interact with women clearly.
- Health staff recognise risks associated with restraint, attend all planned use of force situations and brief staff appropriately. They comprehensively assess women's well-being during and after the incident and initiate all required treatment and interventions promptly.
- Where needed women have care plans which highlight risk factors and set out alternative management protocols to reduce the likelihood of restraint techniques becoming necessary.
- All women subjected to force are given the opportunity to talk about their experience with someone not involved in the incident as soon as possible after it has happened.
- The use of personal protection equipment by staff is proportionate to the risks posed by the use of force and is reviewed regularly by leaders.
- Batons and PAVA spray are never used or carried.
- Use of force data is monitored. Emerging patterns and evidence of disproportionality for protected and minority characteristics are acted on effectively.
- Use of force documentation is completed promptly.
- Use of force documentation and associated CCTV or video footage is retained appropriately and is scrutinised by leaders to identify good practice, disproportionate behaviour, opportunities for improvement and possible ill-treatment.
- Women know that they can ask to see CCTV footage following a use of force incident and requests are processed appropriately and efficiently.
- Staff are always identifiable during a use of force incident.

**24. Women are only ever located in special or unfurnished accommodation, or placed in mechanical restraints or strip clothing, as a last resort and when measures are put in place to protect their dignity.**

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

- The use of special or unfurnished accommodation is regularly monitored by leaders and others to make sure it is appropriate and defensible.
- The use of special or unfurnished accommodation, mechanical restraints or anti-rip clothing is properly authorised by a senior leader. It is only used when strictly necessary and proportionate and for the shortest possible time.
- Women are treated with dignity at all times.
- The use of any cell from which normal furniture, bedding or sanitation has been removed or in which a woman is held in anti-rip clothing is authorised and recorded as a use of special or unfurnished accommodation.
- Women are not strip-searched or deprived of their normal clothing in special or unfurnished accommodation unless properly authorised and on the basis of specific intelligence.
- Women with severe mental illness and women 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 a governor, and in direct consultation with the mental health team.
- Women who are pregnant and mothers with babies are never located in special or unfurnished accommodation.
- Staff regularly and actively engage with women and encourage them to return to a normal cell at the earliest opportunity.

## **Security**

**Security measures are proportionate to risk and are underpinned by positive relationships between staff and women. Effective measures are in place to reduce drug supply and demand.**

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## **Expectations**

**25. Women live in a safe prison community where the security measures applied are proportionate and the minimum necessary to achieve their secure custody.**

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

- The supervision of women by staff and the quality of staff-prisoner relationships promote a safe and secure environment.

- Security is proportionate and the prison strives to provide living conditions that are as near as possible to normal life in the community.
- Women's freedom of movement is limited only by the requirements of safety and good order.
- Security restrictions for individual women are only applied when necessary and are based on a clear and up-to-date justification of the risks presented.
- There are no weaknesses in the physical and procedural security of the establishment.
- The risk of escape or abscond is well managed, including while women are being escorted.
- The use of strip searching is regularly monitored to make sure it is always necessary and proportionate. Women are never squat-searched.
- Restraints are only ever used as a last resort during escorts, following a robust assessment of the risk posed.
- Restraints are never used while women are giving birth or undergoing intimate examination.
- The approach to security respects gender, ethnic, racial and religious diversity and actively promotes tolerance and acceptance of diversity.

**26. The prison community and women's well-being are safeguarded by effective security procedures, including drug supply reduction measures.**

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

- A strategic, whole prison, multidisciplinary approach to reducing drug and alcohol supply reflects emerging trends and links effectively with the substance misuse demand reduction strategy.
- Effective technology is in place to detect contraband.
- Drug testing takes place as required to reduce drug use. It is conducted in a suitable environment and in line with protocols which ensure validity of procedures.
- All drug tests are undertaken by staff of the same sex as the prisoner.
- Women who test positive, refuse to be tested or are involved in suspected drug-related incidents are referred to substance misuse services.
- 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 mental health or other risk factors, in particular those linked to risk of self-harm or suicide.
- Searching of cells is intelligence-led. Women are made aware that their cells or personal property are being searched and can request that searches are carried out by a staff member of the same sex. Cells and property are left in the same condition they were found in.



**27. Effective processes are in place to protect women 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.

- Women know how to, and are supported to make, confidential complaints about staff. Women are confident that the complaints system works effectively and understand the limits of confidentiality.
- Women and staff know the identity of the local corruption prevention manager.
- Women who report abuse are provided with immediate protection, support and counselling.
- Reports of misconduct and ill-treatment are investigated by a competent and appropriately independent authority, who should be at least governor grade from another prison.
- Where inappropriate or abusive practice is found, staff are held to account.
- Staff understand the importance of whistleblowing, know how to do it and feel confident to do so.
- The use of whistleblowing processes is monitored and reviewed.

## Section 3: Respect

**Women's relationships with children, family and support networks are central to their care in custody. A positive community ethos is evident, and all needs are met.**

### Contents

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- Living in the prison community
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- Health and social care
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  - Promoting health and well-being
  - Sexual and reproductive health (including mother and baby units)
  - Primary care and enhanced care units (inpatients and well-being units)
  - Mental health
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  - Medicines and pharmacy services
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- Fair treatment and inclusion
  - Faith and religion
- Leadership and management of respect

## **Relationships with children, families and other people significant to women**

**Women are able to develop and maintain relationships with people significant to them, including children and other family members. The prison has a well-developed strategy to promote relationships and make sure women can fulfil any caring responsibilities.**

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### **Expectations**

#### **28. Women maintain and develop positive relationships with children, family members and other people significant to them.**

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

- Women have the support of an on-site social worker or family engagement worker who is dedicated to promoting positive relationships and contact with children, family and other people who are significant to them.
- Staff regularly and comprehensively assess the needs of the prison population when promoting positive and healthy relationships with children, family members and other people significant to women.
- The identified needs are met through a comprehensive strategy and action plan that sets out a wide and creative range of provision and support. Provision is regularly reviewed to evidence effectiveness, including consultation with visitors.
- Systems are in place for women's family members and others who are significant to them to share their concerns about women in prison.
- There are clear opportunities for families and other people significant to women to be involved in providing support, particularly to those at risk of self-harm.
- Women can access an imaginative range of methods for developing and maintaining positive relationships with family members and friends, including counselling and relationship skills courses.
- Women are held as close to home as possible and practical steps are taken to make sure those living further away from children, families and others who are significant to them can still have regular and meaningful contact.
- Women who are not in contact with family, friends and others significant to them are identified and receive individual support and help.
- Women can exchange unused visiting orders for phone or video calling credit.

**29. Women are supported in fulfilling their caring roles and responsibilities.**

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

- Women can access a range of release on temporary licence (ROTL) opportunities subject to risk assessment, aimed at promoting family contact and accessing relevant support networks in the community.
- Women receive advice on how to emotionally and financially support their dependants, including children, during their period of imprisonment.
- Women are able to regularly monitor and confirm the care arrangements for their dependants, including children.
- Women are involved in meetings about their dependants, such as care planning for elderly relatives or school reviews.
- Women have detailed and individualised support plans to help them maintain or regain contact with children, family and others who are significant to them.
- Women undergoing separation and/or child protection procedures, and those seeking to re-establish contact with family members, are provided with effective support.
- Women have access to legal advice relating to the care of their children and other dependants.
- Women can access final contact visits with children which are thoroughly planned and held in a clean and comfortable environment with appropriate support.
- Women can contact community-based agencies to receive support for themselves and their families during their time in custody and in preparation for release.
- Women who have caring responsibilities in the community are helped to express concerns they may have about their dependants to the most appropriate professional in the community.
- Women are supported to obtain documents for their dependants and register them for services as needed (for example, birth certificates and NHS registration).

**30. Mothers and their babies have access to a specialist unit that is clean, comfortable, suited to the care of babies and children and provides appropriate care and support.**

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, effective and fair admissions policy to the unit.
- Admission, review, separation, childcare and child protection arrangements are implemented in line with policy.
- Mother and baby units are always supervised by appropriately trained staff.

- The needs of mothers and babies are assessed, and enhanced care is provided where necessary.
- Prison officers working on the units do not wear formal prison uniforms.
- All staff working with babies and children have undergone specific recognised training, including child protection issues, post-partum complications and infant resuscitation, and have been subject to appropriate Disclosure and Barring Service (DBS) checks.
- Mothers are supported in returning to work in line with statutory maternity leave standards.
- Nursery staff are appropriately qualified and provide a good and creative service.
- Babies and children have opportunities to experience community activities and are prepared to leave the prison in accordance with their development needs and best interests.
- The unit is clean, comfortable and safe, and is stimulating for both mother and child.
- Mothers are able to leave their rooms at night and can access facilities in the unit.
- Mothers are able to cook for their babies and children and receive support to do so.
- Mothers living on the mother and baby unit can receive extended visits from family members and their other children in a homely environment.
- Women living on the unit have access to the full regime of the main prison and arrangements for childcare respond to this.
- Women can move to the unit before giving birth, subject to risk assessment, and access specialist care and support.

**31. The prison supports children to visit their family member in prison, subject to an assessment about potential risks.**

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

- Women are allowed to see all their children together in a visit, regardless of the number or age, provided this is in the best interests of the children.
- Women can access family engagement workers during the visits session to gain help and advice as needed.
- Women are helped to prepare their children for visits and to understand the prison environment.
- Staff are trained in child safeguarding arrangements and visits staff are aware of children with particular safeguarding needs.
- Children can have physical contact with their mother in prison and can enjoy age-appropriate activities during visits, including access to a supervised play area.
- Women can attend a range of visits, including family days with their children. Access is not determined by reward scheme status.
- The reasons why women do not receive visits from their children are monitored to understand the barriers and action is taken to address them.

### **32. Women have 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.

- Women who are new to the prison can arrange and receive a visit to help them settle in their first week of custody.
- The visits booking system is easily accessible and can deal with the number and diverse requirements of visitors.
- Visitors are given information about how to get to the prison, the visiting hours, what to expect and how to complain.
- Where the availability of public transport is poor, the prison provides free transport to the prison from local stations.
- There are enough visit spaces available each day and unconvicted women can receive as many visits as they wish, including at weekends.
- Sentenced women are able to receive at least one visit a week for a minimum of one hour, including at weekends.
- Based on a risk assessment, women can spend time with their visitors in a more private setting when sensitive or personal issues need to be addressed.
- Women can access a range of extended visits and family days, and access to them is not determined by their reward scheme status.
- Women can visit family members, including partners, in other prisons, and these visits are only restricted when necessary and proportionate. Video link or telephone calls are used if face-to-face visits are not available.
- Women without outside contact and support are able to access approved schemes in which trained volunteers provide support through visits or other forms of communication (such as letters).
- Women with children and other dependants can have additional visits to oversee the arrangements for their care.
- Women can have additional visits during family and personal emergencies (for example, following a bereavement).
- Visitors can book their next visit before leaving the prison.
- Closed and no contact visits are authorised only when there is a significant risk justified by security intelligence. Decisions are reviewed after each visit and closed visits are stopped at the earliest opportunity.
- Accumulated, extended or consecutive visits are provided to meet the needs of visitors who travel long distances.

### **33. Women and their visitors attend visits in a clean, safe and welcoming 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 women in the prison.

- Searching is respectful and proportionate and takes account of the needs of women and visitors with protected and minority characteristics. Visitors are never strip-searched.
- Visits areas are comfortable, friendly and welcoming.
- Visitors can buy a range of refreshments and food during visits.
- Women and visitors always have access to toilet facilities during visits.
- Visitors arriving late are allowed to continue with their visit.
- Security arrangements and restrictions on physical contact with visitors are not excessive.
- Women do not have to wear prison clothing or identification bibs during visits.

**34. Women have frequent and easy access to all forms of communication, subject to a risk assessment for public protection concerns.**

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

- Women have a phone in their cell and there are no restrictions on the times of day or night it can be used.
- Women have easy and regular access to video calling systems which are free of charge. These are used in addition to and never as a substitute for actual visits and phone calls.
- Women have access to an email system to keep in contact with the outside world and are able to receive emails without delay.
- Women are allowed the time and facilities, including free phone calls, to make and oversee arrangements for the care of their dependants.
- Telephone numbers are added to women's PIN accounts within 24 hours of arrival at the prison, subject to a risk assessment and public protection concerns.
- Women are provided with additional free letters and phone calls as needed and can receive regular incoming calls from their dependants or those looking after them.
- Outgoing mail is posted within 24 hours (48 hours when received on Saturday) and incoming mail is received within 24 hours of arrival at the prison, including registered and recorded mail.
- Foreign national women receive additional help and resources to keep in touch with family abroad, including video calling.

## Living in the prison community

**Women live in a prison which promotes a community ethos. They can access all the necessary support to address day-to-day needs and understand their legal rights. Consultation with women is paramount to the prison community and a good range of peer support is used effectively.**

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### Expectations

#### Consultation and support within the prison community

**35. Women live together in a prison community that is mutually supportive and recognises and responds 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.

- Women understand the rules and routines of the prison community and these are applied fairly and consistently, without discrimination.
- Women are able to take an active role in influencing decisions about services, routines and facilities in the prison community and in managing their own day-to-day life.
- Women are regularly consulted about living in the prison community and are given the opportunity to present areas of grievance or dissatisfaction directly to leaders.
- Women are informed of the outcome of consultation, can challenge decisions made and are confident that their views are taken seriously.
- The selection of women to take part in more formal consultation events or to represent the wider population is fair and transparent.
- Ongoing feedback mechanisms such as comments books are readily available, regularly checked and responded to appropriately.

**36. Women can gain additional support through peer mentoring schemes and self-help groups.**

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

- There is an organised and structured peer support scheme, which encourages 'active citizenship' within the prison community.
- Women are given the opportunity to become peer workers, develop their mentoring skills and support the well-being of others in the prison.
- Peer workers are in place across all key functions in the prison, such as early days or self-harm prevention.
- Peer worker roles are clearly defined, and peer workers receive appropriate training and supervision in the role.
- Women know how to access help and support from staff, family and peer workers.



- Women can access a range of self-help groups and activities that promote well-being and seek to reduce the impact of previous trauma.
- Women are involved in developing and delivering self-help groups and activities.
- The peer worker group is involved in consultation activities.

### Applications

#### **37. Women and staff are encouraged to resolve requests informally. Where this is not possible women are able to complete an application easily and the process is effective.**

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

- Staff encourage women to resolve requests informally, before making a formal, written application.
- Women know how to make applications and can do so confidentially.
- Women can make applications without delay.
- Staff and peer workers help women to make applications, as required.
- Women do not have to make repeated applications for services they access or receive on a regular basis.
- Women receive responses to their applications within agreed timescales. Responses are respectful, easy to understand and address the issues raised.
- There are effective and thorough monitoring and quality assurance arrangements in place to make sure the applications process is effective and reliable.
- Women have confidence in the applications system and actions are taken to address any concerns.

### Complaints

#### **38. Women have confidence in the complaints process, which is 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.

- Women know how to make a complaint and have access to information about the procedure in a range of formats and languages.
- Women have easy access to complaint forms, can submit them confidentially and are given confirmation that their complaint has been received.
- Mediation services are available and used effectively.
- Responses to complaints are received within agreed timeframes, easy to understand, comprehensive, respectful and address the issues raised.
- Women can ask for help from prison staff, family, friends or legal advisers to make their complaint.

- There is an effective quality assurance process for complaints responses, with external oversight.
- Women 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.
- Prison staff respond quickly and comprehensively to Prisons and Probation Ombudsman (PPO) complaint investigations and implement PPO recommendations promptly.
- Complaints about staff are investigated by an appropriately senior and independent person.

**39. Women feel safe from repercussions when using the complaints process and can appeal against decisions easily.**

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

- Women feel able to make complaints and are supported in doing so.
- Women and visitors who make complaints against staff and/or other women are protected from possible recriminations.
- Women who report allegations of abuse are given immediate protection, including access to health care support, counselling and legal advice.
- Women know how to appeal against decisions made about their complaint and can access the necessary processes to do this.
- Women have access to recognised external organisations offering support in pursuing a complaint. Women can contact the Independent Monitoring Board (IMB) and the Prisons and Probation Ombudsman in confidence.
- Women are helped to pursue complaints and grievances beyond the prison or with external bodies, if they need to do so. They receive help in contacting legal advisers or making direct applications to the courts.

Legal rights

**40. Women's legal needs are met, and they are enabled to exercise their legal rights.**

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

- Staff actively enable women to pursue their legal rights.
- Staff support women going to court who may be experiencing high levels of stress or are at risk of re-traumatisation.
- Women are provided with information, in a variety of languages and formats, about the legal advice and representation available to them and are supported to find a legal representative if necessary.
- Women know what resources are available in the prison to help meet their legal needs.

- Women can telephone the community legal advice helpline, free of charge.
- Women can confidentially communicate with their legal and political representatives by telephone, fax and letter. Women who do not have the means to contact their legal representatives are provided with help to do so.
- Private and confidential legal visits are supported and accommodated without delay, in suitable facilities.
- Legally privileged correspondence is not opened by staff in the absence of the woman it concerns, unless there are documented exceptional circumstances.
- Facilities are available for legal representatives to review CCTV evidence with women.
- Video link is available for eligible court cases and for other legal consultations, and facilities are fit for purpose.
- Information to explain how the court system functions and the meaning of key legal terms is available in a variety of formats and languages.
- Women are provided with information in a range of languages and formats about legal matters relating to family and dependants.
- Women have access to stamps, writing materials and a computer and printer to prepare legal correspondence and documents, and can review their digital evidence.
- Women requiring help with reading or writing legal correspondence are offered it, including the option of accessing help from outside the establishment.
- Women who are eligible to vote are on the electoral register if they wish to be, can receive electoral campaigning material and can freely exercise their right to vote.

## **Living conditions**

**Women live in a clean, decent and comfortable community environment. They are provided with all the essential basic items.**

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### **Expectations**

#### **41. Women live in a clean, decent and comfortable environment.**

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

- Women live in an environment that promotes their well-being and helps to reduce behaviour that is harmful to them or others.
- Women are not held in crowded conditions. They have their own cell/room unless they wish to share, and there is enough space for the number of women held in the cell/room.
- Residential units are as quiet as possible at night with appropriate lighting for rest and sleep.
- Outside areas are well maintained and clean.
- Cells and communal areas are clean, free of graffiti and offensive displays, well lit (including by natural light), properly ventilated and in good decorative order.
- Women have the use of properly equipped areas for association and outdoor areas for daily physical activity.
- Women have privacy keys to their cells/rooms.
- Women can switch their cell/room lights on and off.
- As a minimum, women have their own chair, table and lockable cupboard and enough space to store personal belongings.
- All in-cell toilets are screened, have lids and are not, under any circumstances, in view of the observation panel.
- Women are able to personalise their cells/rooms without unnecessary restrictions.
- Women have access in their cell/rooms to drinking water, a toilet and washing facilities at all times.
- All staff recognise and adhere to the need for privacy and decency, particularly where women are using a bathroom in their cell or any other private areas.

#### **42. Women can keep themselves, their cells 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.

- Women can shower or bathe in private every day, immediately following physical exercise or work, and before court appearances, health care appointments or visits.

- Women are provided with enough sanitary and menstrual items without having to ask for them.
- Women have access to sanitary and washing facilities and the means of disposing of sanitary and menstrual items discretely.
- Clean bedding is provided for each woman on arrival and can be replaced or laundered weekly or whenever needed.
- Mattresses are replaced when needed.
- Women have access to sufficient cleaning materials to keep their cells and communal areas clean.

**43. Women 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.

- Women are able to wear their own clothes.
- Where needed, prison issue clothing, including sportswear, is designed for women, clean, in good repair, and provided in a full range of sizes.
- Maternity clothing is provided.
- Women are provided with enough clean underwear and socks to be able to change them daily.
- Women are issued with enough warm, weatherproof clothing and shoes to go outside in all weather conditions.
- Women can access laundry facilities at least weekly, and whenever their clothing is soiled, to wash and iron clothes.
- Women going out on release on temporary licence (ROTL) are provided with suitable clothing, including coats, if they do not already have their own.

**44. Women are appropriately and safely located on residential units.**

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

- Women only share cells following a suitable risk assessment. Unconvicted women do not share accommodation with those who are serving a sentence.
- Young adults do not share cells with adults.
- Staff are aware of the emotional triggers for individual women in their care and take active steps to help women manage them on a day-to-day basis.
- Specific residential units or wings are available for women who are progressing towards moving to open conditions or undertaking release on temporary licence (ROTL).
- Women are always able to contact staff in an emergency, and this is responded to promptly.
- Observation panels in cell doors are free from obstruction.

- Women's safety is promoted through a good understanding of the rules and routines of the establishment, which are applied openly, fairly and consistently, without discrimination.

**45. Women's property held in storage is secure, and women 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.

- Women can receive parcels that are sent to the prison.
- The amount of property held in possession and storage takes account of individual needs.
- The list of possessions that women are allowed to keep meets the needs of the population.
- Women's valuable property is always security-marked before it is issued.
- All property is returned to women on release or transfer.
- Women are fairly compensated for clothing and possessions which are lost or damaged in storage.

**46. Women have a varied, healthy and balanced 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 and breakfast is served when it is intended to be eaten.
- Women can eat out of their cells, with others.
- Menus are agreed following advice from dieticians and nutritionists and meet the needs of the population.
- Women have a choice of meals and can make lifestyle choices about diet.
- Women are consulted about the menu and their feedback about food is routinely considered.
- Women can access help to manage their diet, either by attending group meetings or through individual support.
- Catering staff provide meals that meet medical dietary requirements.
- Pregnant women and nursing mothers receive extra food that meets their nutritional needs.
- Women returning from court or release on temporary licence (ROTL) are still able to access a main meal.
- Women can make a hot drink whenever they are locked up.
- Women can cater for themselves and staff support them in doing this.

**47. 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.

- Relevant food and safety hygiene regulations are adhered to in all areas where food is stored, prepared or served.
- Catering staff meet religious, cultural or other specific dietary needs.
- Women and staff who work with food are trained, wear proper clothing and have received health screening.
- Staff supervise the serving of food to prevent tampering and to ensure there is appropriate portion control.

**48. Women 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.

- Women are able to obtain a range of essential items within 24 hours of arrival and can place canteen orders at least once a week.
- Women arriving at reception without their own money are offered a monetary advance to use for purchases, with repayment made over an agreed period of time.
- Prison canteen prices are broadly equivalent to those in the community.
- Women do not have to buy sanitary items because they are freely and readily available.
- The prison provides an in-house shop for women to buy discounted clothes for themselves, their children or significant others.
- The list of products available to buy meets the diverse needs of the population and is reviewed regularly in consultation with women.
- Women can order and pay for newspapers and magazines and place catalogue orders. This includes items for their children.
- Women can purchase a wide range of approved hobby or recreational items.

## Health and social care

**Women are cared for by services that assess and meet their health, social care and substance misuse needs and promote continuity of health and social care on release. The standard of health service provided is equivalent to that which women could expect to receive elsewhere in the community.**

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### Expectations

#### Strategy, clinical governance and partnerships

**49. Women are cared for by services that accurately assess and meet their health, social care and substance misuse needs while in detention and prior to release.**

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

- Effective partnerships between the prison, commissioners and providers ensure that health, social care and substance misuse services meet the assessed needs of the prison population.
- Co-commissioning agreements inform strategic oversight, including joint risk management, monitoring of effectiveness and progress against improvement plans.
- Effective leadership and local governance systems lead to good health outcomes.
- Health, substance misuse and social care provision meet the required regulatory standards.
- Improvements to service delivery are informed by effective consultation.
- Every woman has a single clinical record which meets record-keeping standards and is managed in line with appropriate information governance.
- Information is shared within the bounds of medical confidentiality to promote continuity of care and maintain patient safety.
- All clinical equipment is logged, appropriately maintained and serviced.
- There are comprehensive clinical audit programmes in place. Audit action plans are monitored within agreed timelines.
- Local and serious incidents (including unexpected births and still births) are reported and investigated within national patient safety guidelines. Duty of candour is applied, and lessons are learned and shared with staff, partner organisations and commissioners for national oversight.



**50. Women receive timely treatment, which is sensitive to their 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 women have equal access to health and social care services, including those with protected and minority characteristics.
- Staff are professional and treat all women with dignity, respect and compassion.
- Health care staff are easily recognisable, appropriately trained and supported; this includes regular reflective practice and managerial supervision.
- Staffing levels and skill mix meet patient need throughout the 24-hour day.
- There are sufficient and appropriately maintained rooms to enable health and social care delivery. All clinical areas comply with infection prevention and control standards.
- Women are able to elect to see a female GP and are seen in private, except in clearly documented exceptional circumstances.
- Women are able to attend all health appointments within a reasonable time in line with community waiting times.
- Joint emergency response plans are in place to respond to medical emergencies. Competent health staff respond promptly to medical emergencies with appropriate emergency equipment.
- Consent is acquired in line with national guidance. When patients lack mental capacity to make a decision, health professionals make 'best interests' decisions in accordance with legislation.
- Women are kept safe, are safeguarded from abuse and have access to independent advocacy services if required.
- Women can complain about their treatment in confidence without recrimination. Responses are received within agreed timeframes, easy to understand, address all the issues raised and are respectful.

Promoting health and well-being

**51. Women are supported and encouraged to improve 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 whole-prison approach to improving the health and well-being of women, based on their needs.
- There are robust systems to prevent, identify and manage communicable diseases.
- Reception screening processes include women being signposted to health services.

- Information about available health services and current national health campaigns is easily accessible in all required formats and languages.
- Well-trained and supervised peer workers and health trainers offer information and support to women in all areas of health and well-being. Dietetic advice is available for women with more complex needs.
- Women can easily access health checks, disease prevention, screening programmes and mental health services.
- Older women receive care from competent staff who understand their specific needs.
- Women can access support to stop smoking.
- Women receive individual harm minimisation and health promotion advice on release.

### Sexual and reproductive health (including mother and baby units)

#### **52. Women's 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.

- Women are offered screening for sexual health and reproductive needs on arrival and referred for follow-up advice and appointments as appropriate.
- Screening is carried out sensitively and takes account of protected and minority characteristics.
- Women can confidentially access contraception and sexual health services provided by suitably qualified staff. Barrier protection and related health advice is freely available, including on release.
- Women can access pregnancy testing and emergency contraception within 24 hours of arrival, if required.
- Pregnant women in prison have access to community-equivalent antenatal care in line with national standards, including access to midwifery advice by phone whenever they need it.
- Pregnant women in prison are able to prepare for childbirth and parenting in line with national standards.
- All staff are able to recognise the signs of the onset of labour and premature labour and know what steps to take.
- Women experiencing a miscarriage have access to the appropriate physical and emotional care.
- Women considering termination can access appropriate services and follow-up care.
- Postnatal care is equivalent to that available in the community.
- Where a child is separated from its mother before the mother's discharge date the mother is fully supported, both emotionally and practically, in making the arrangements for separation.

- Counselling services are available for those who have experienced loss or bereavement, including post-adoption.
- All staff are competent in recognising the signs of actual or suspected female genital mutilation (FGM) in women and their babies. Staff make the appropriate onward referrals to specialist health and safeguarding services.
- Women experiencing the menopause have the same level of care and support as women in the community.

**53. Mothers of babies and infants receive health services equivalent to those in the community.**

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

- Women who are breastfeeding are supported to express, store and transport their breast milk safely, if they are separated from their baby.
- Patient-centred birth plans are in place in advance. These include identifying a birthing partner, risks, midwifery input and hospital care and monitoring arrangements. The health of mothers and babies is monitored by health professionals to the same standard as in the community. Mandated child development is monitored and arrangements are in place to access relevant services and specialists if issues arise.
- Maternal and child nutrition is managed under national guidelines. Mothers are encouraged and supported by mother and baby unit (MBU) staff in their chosen method of feeding and have regular access to specialist breastfeeding information and support if required.
- Mothers who are formula-feeding have 24-hour access to appropriate equipment and facilities to make up bottles and sterilise equipment.
- All MBU staff have additional training to work on the unit, including adult and child safeguarding, recognising child maltreatment and premature labour. Mothers and staff have the knowledge and training to deal with child emergencies, including resuscitation and choking.

Primary care and enhanced care units (inpatients and well-being units)

**54. Women's 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 women on the day they arrive to identify their immediate risks and make appropriate onward referrals.
- Screening includes neurodiversity issues and how these will need to be managed where necessary.
- Relevant risk and care planning information is shared between prison and health teams on reception and throughout custody.

- With consent women's clinical records are obtained from the community GP if they are not available through the electronic NHS system.
- Immediate substance misuse needs are identified and managed, including overnight monitoring.
- Immediate social care needs are managed through local protocols and urgent referral processes. Existing care packages for new arrivals are continued.
- Medicines are reconciled and prescribed to provide continuity of care. The needs of women arriving without expected medicines are managed through emergency or out-of-hours prescriptions.
- Women arriving with acute mental health problems or who are at risk of self-harm are managed through a multidisciplinary care plan.
- All women receive a secondary health screening by a competent registered professional in line with current national guidance.

**55. Women's individual ongoing health care needs are addressed through an appropriate range of care services. Continuity of care is maintained on transfer and release.**

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

- Women can access all necessary primary care services, including pain management, memory/dementia support services and effective out-of-hours GP services, within community-equivalent waiting times.
- There is a confidential and effective health appointment system.
- Women with long-term conditions and complex health needs receive appropriate joined-up care in line with national standards. Up-to-date care plans demonstrate patient involvement and continuity of care.
- The prison, health provider and community services deliver palliative and end-of-life care to women in line with national standards and in a safe and decent environment.
- Women receive secondary care services either in the prison or at hospital within community-equivalent waiting times. Care is not disrupted by prison transfers or lack of escort staff.
- Security measures during hospital escorts are proportionate and are based on an individual risk assessment which includes a detailed contribution from health staff.
- All partners involved in the planning, access and treatment of health care work collaboratively to make sure continuity of care is maintained during custody and on release.
- Women receive relevant pre-release assessments and interventions and are supported to register with community health services.

**56. Patients requiring 24-hour nursing care within the prison are supported by a regime, facilities and health staff to meet their individual needs.**

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

- Inpatient admission and discharge are based on an agreed clinical criterion. Staffing numbers and skills mix meet patients' needs.
- Patients receive a comprehensive assessment of their care needs and, wherever possible, are involved in developing their own care plans.
- Patients have safe and decent living conditions and access to a normal prison regime, alongside therapeutic and constructive activities, to maintain well-being and encourage recovery.
- Patients' ongoing care needs are met following discharge from the inpatient/well-being unit.

Mental health

**57. Women with mental health needs are identified promptly and are supported to improve their mental well-being, including 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.

- Women's immediate mental health and learning disability needs are assessed during their reception health screening and appropriate onward referrals are made.
- Prison officers are trained to recognise when a woman requires referral for mental health assessment, and there is a clear referral pathway.
- Referrals are reviewed promptly, and appointments are allocated on clinical need and risk.
- There are enough skilled mental health practitioners to meet the mental health needs of the population and deliver psychologically informed, evidence-based provision.
- Specialist support for those who have been sexually assaulted, bereaved or require additional antenatal and postnatal 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 take place in line with national guidelines, particularly for pregnant women prescribed mental health medication.
- Patients are assessed using a standardised approach and additional information is obtained from other sources as required.
- Patients have comprehensive written assessments, care plans and risk assessments which are regularly reviewed with their mental health practitioners.

- Liaison and joint working with other prison departments and health providers, including substance misuse treatment services, is effective.
- Patients with severe and enduring mental illness are supported within the Care Programme Approach (England) or Mental Health Measure (Wales).
- Patients who require assessment or treatment under the Mental Health Act are assessed and transferred promptly.
- Effective discharge planning and liaison with offender managers, probation services and community mental health services provides continuity of care following release.

### Social care

#### **58. Women with social care and support needs are identified and receive assessment, care packages, adaptations and advocacy services that continue on release or transfer.**

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

- There is an up-to-date memorandum of understanding between the prison and the relevant local authority on the local provision of social care.
- Access to, waiting times and quality assurance processes for social care assessment and services are monitored.
- There is a published referral pathway, complaints and advocacy process for social care support.
- Registered providers of care have sufficient trained, supervised and screened social care staff. Agreed care plans are applied consistently with privacy and dignity.
- Required equipment and adaptations are provided promptly and maintained correctly, following appropriate individual assessments.
- Peer workers supporting the health and social care needs of other women do not provide intimate care. They are appropriately selected, risk-assessed, trained, supported and supervised.
- Women with severely restricted mobility or impaired communication can easily summon assistance in an emergency.
- Effective joined-up planning allows agreed packages of care to be continued on transfer within the prison estate and on release by a registered provider.

### Substance misuse and dependency

#### **59. An effective whole-prison strategic approach reduces the demand for drugs and alcohol.**

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

- A regular and comprehensive needs assessment informs a drug strategy and action plan.

- A dynamic, whole-prison drug and alcohol strategy is embedded through effective joint working between prison departments, treatment providers and other relevant stakeholders.
- Prison officers receive training to recognise when a woman requires referral to substance misuse services, and there is a clear referral pathway.
- Psychosocial and clinical services meet the needs of the population.
- Service delivery is informed by women's feedback and health outcomes.
- Psychosocial and clinical substance misuse treatment services are well integrated with each other, the prison and all health services.
- Competent staff provide effective evidence-based psychosocial and clinical services.
- Women have personalised recovery plans which are regularly quality-assured.
- Patients with both mental health and substance-related problems have prompt access to joined-up, comprehensive support.

**60. Women 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.

- Drug and/or alcohol-dependent women who have recently arrived from the community receive appropriate first night treatment, and regular monitoring until they are stable. A competent prescriber is always available and treatment is not delayed.
- Women (including those who develop substance-related problems in prison) 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 and nursing mothers are managed through multidisciplinary specialist teams, such as psychiatry, midwifery and addiction specialists.
- Women are involved in decisions about their care. Care plans are flexible, meet individual needs and are reviewed regularly.
- Women who have recently arrived receive harm reduction information on illicit substance use in prison and substance misuse treatment services.
- Where drug recovery wings are in place, suitably informed operational staff encourage purposeful activity, help women with their recovery and make sure women can access therapies and interventions.
- Women have easy access to family support services, self-help and mutual aid, including well-trained and supervised peer supporters.
- Interventions are gender-informed, evidence-based and cover both brief- and medium-intensity intervention. They are suitable for those in crisis, stabilisation or recovery.

- Effective discharge planning with relevant internal and community services creates continuity of support following women's release, including from court.
- Women receive information on how to avoid drug- or alcohol-related overdose, injuries and death before they are released. Where clinically indicated they receive an emergency reversal agent to prevent overdose on release.
- Continuity of care and clinical treatments are transferred appropriately to the receiving substance misuse services or GP on release or transfer.

### Medicines and pharmacy services

#### **61. Women receive medicines and pharmacy services that meet their individual needs and are equivalent to that in the community.**

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

- Women's 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.
- Women 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.
- Robust governance processes are in place to make sure medicines management is safe and effective, including monitoring of medication incidents and prescribing trends.
- Women's medicines are prescribed safely in line with evidence-based practice and formularies, reviewed regularly and administered at clinically appropriate times.
- Women's adherence to taking medication is monitored. Women are promptly reviewed when adherence is poor and/or diversion is suspected.
- Subject to a regularly reviewed in-possession risk assessment, women can store their medicines securely and self-administer them.
- Women can access basic self-care medicines safely and easily, including out of hours.
- Medicines are administered from a secure environment.
- Prison officers manage medication administration queues effectively, including allowing only one patient at the hatch at a time and reducing opportunities for bullying and diversion.
- Women receive information about their medicines in a format they can understand and have regular clinical prescribing reviews.
- Women going to court or being released/transferred receive supplies of medication or a community prescription to meet their needs.



## Dental and oral health

### **62. Women receive timely dental services, including oral health promotion, that are equivalent to those in the community.**

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

- Governance and quality assurance arrangements provide good dental outcomes for women.
- All women have timely access to emergency dental services based on clinical need, complemented with through-the-gate treatment plans.
- Women have timely access to the full range of NHS-equivalent treatment.
- Dental care and clinical rooms meet national governance and professional standards.
- Equipment is maintained to national standards and care is not delayed by defective equipment.
- Women receive effective oral health and disease prevention advice.
- Women have prompt access to required medicines following dental interventions.

## **Fair treatment and inclusion**

**There is a clear approach to promoting equality of opportunity, eliminating unlawful discrimination and fostering good relationships. The distinct needs of prisoners with protected characteristics, or those who may be at risk of discrimination or unequal treatment, are recognised and addressed. Women are able to practise their religion and the chaplaincy plays a full part in prison life, contributing to women's overall care, support and rehabilitation.**

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## **Expectations**

### **63. Leaders take the experiences and views of prisoners with protected characteristics seriously, communicate with them effectively, and use information about equality and diversity to drive improvement.**

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

- Leaders are aware of the experiences and feelings of those in protected groups and consider factors affecting their well-being.
- Specialist resources are used to improve communication with protected groups.
- Leaders confidently collect, analyse and communicate data on equality and diversity across a range of indicators of prison life. They use it to effect change, and monitor, maintain and share progress.
- A named person of appropriate seniority has overall responsibility for equality and diversity.

**64. Women feel safe and are able to share their experiences, including with prison leaders. Procedures are in place and action is taken to identify and address discrimination and disparities.**

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

- Leaders have put processes and structures in place to improve communication, for example through competently facilitated forums, reverse mentoring, and activities centred around food or the arts.
- Leaders have put processes and structures in place to improve fairness, for example through equality monitoring, discrimination incident reporting forms (DIRFs), adaptations and adjustments.
- Women and staff know what is acceptable in terms of behaviour and language.
- Potential or actual discrimination is effectively identified.
- Prison leaders and staff respond to all identified concerns proactively, comprehensively and respectfully.

**65. Women interact with staff who have the skills and knowledge to implement inclusive and culturally competent practices.**

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

- Leaders strive to recruit and retain staff who represent the diverse backgrounds and needs of the prison population.
- Leaders seek out advice and collaboration with specialist organisations and groups to help promote fair treatment and enable them to work effectively with staff and prisoners.
- Staff and prisoners are encouraged to develop mutual understanding of each other's perspectives and experiences.
- Women from Wales are able to live their lives through the medium of the Welsh language if they choose to do so.
- The prison's culture helps it to foster good relationships and improve equality and diversity outcomes for all women and staff.

**66. Fair treatment is effectively promoted, developed and protected in the prison.**

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

- Awareness of the needs of people with protected characteristics is promoted by educational and celebratory events.
- Leaders work effectively to understand, communicate, and discuss issues of ethnic and racial identity with staff and prisoners.
- The specific needs of foreign national women are met, including understanding and participating in every aspect of prison life.

- Women with disabilities of all kinds have fair access to every aspect of prison life and can participate in them safely and constructively.
- Staff are aware of the needs of women with neurodivergent conditions and learning disabilities, and adjustments are made to meet them.
- Whatever their gender identity, all prisoners receive fair, equal and respectful treatment.
- LGBT+ prisoners can play a full, open and equal part in the life of the prison.
- The well-being and maturation of young women (age 18–24), including those who have transitioned from the children's estate or have been in local authority care, is supported through fair and age-appropriate treatment.
- Older women have access to a regime and facilities that enable them to make constructive use of their time in prison.
- The specific needs of pregnant women and those who have recently given birth are met.
- Women of all faiths and belief systems receive equitable treatment.
- All other minority groups are recognised and their specific needs are met, including any additional support required to make sure they receive equal and inclusive treatment.

### Faith and religion

In this section, religion includes 'religion and belief' as they are understood in the context of the Equality Act 2010 and related case law.

#### **67. Women are enabled to practice 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.

- Women know about the chaplaincy services and have easy access to corporate worship and faith-based classes and groups.
- The make up of the chaplaincy team is commensurate with the prison's faith populations.
- Staff supervision of faith services is respectful and proportionate.
- Women and staff know chaplaincy members well.
- Faith areas are accessible and permit contemplation, reflection and prayer.
- The use of segregation does not unreasonably prevent the easy access of women to corporate worship and faith-based classes and groups.
- Alternative or additional provisions are made when individual women are excluded from corporate worship.
- Women can obtain, keep and use artefacts that have religious significance.
- Women can fulfil religious lifestyle requirements.

**68. 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, women and their property are conducted in a religiously and culturally sensitive manner.
- Women can learn about different faiths. They are free to change or abandon their religion.
- Women are able to celebrate all major religious festivals.
- Monitoring of the different religions in the prison population is comprehensive, accurate and reviewed regularly to shape service provision.

**69. Women are fully supported by the chaplaincy, which 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.

- Chaplains meet all new women within 24 hours of their arrival in the prison and have a meaningful and private conversation.
- A member of the chaplaincy team visits women in the inpatients unit and those who are segregated every day.
- Chaplains are involved immediately when a woman is near to death or has died, to support the dying person, relatives, other women and staff.
- Chaplains are able to provide support to women who have experienced bereavement or loss.
- Chaplains contribute to multidisciplinary teams across the prison, and attend individual case reviews where appropriate.
- Chaplains establish and maintain links with faith communities outside the prison.
- Chaplains support the role of faith in promoting desistance from crime and help women to meet their faith needs on release.
- The chaplaincy team has a role in identifying and challenging extremist ideologies that purport to be based on religious belief.
- Women of no faith can receive support from the chaplaincy team and are not less favourably treated than those of faith.

## **Section 4: Purposeful activity**

**Women are able and expected to engage in activity that is likely to benefit them, including a positive range of recreational and social activities.**

### Contents

- Time out of cell, recreational and social activities
- Education, skills and work activities (Ofsted)
- Leadership and management of purposeful activity

## **Time out of cell, recreational and social activities**

**All women have sufficient time out of cell and are encouraged to engage in recreational and social activities which support their well-being and promote effective rehabilitation.**

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### **Expectations**

**70. Women have regular and predictable time out of cell which is sufficient to promote their rehabilitation and overall well-being.**

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

- Women are allowed as much time as possible out of their cell every day. At a minimum this should be at least 10 hours, including time in the evening for association.
- Daily routines for women, including association and exercise, are publicised on every residential unit, and adhered to.
- Wherever they are located, women are never subjected to a regime which amounts to solitary confinement (see Appendix I, note vii).
- If a woman is segregated on one of the main residential wings, all other women on that unit continue to have access to the full daily regime.
- There is sufficient time for women to complete domestic tasks, such as showering, collecting medication, cell cleaning and telephone calls, as well as employment and education regime activities.
- Women unable to attend learning or work activities are unlocked during the day and are provided with suitable activities.
- Women have the opportunity to telephone or video call their children, families and significant others at a time convenient to them and their family.

**71. Women, including inpatients, those on a restricted regime and in segregation, can spend as much time as possible in the open air every day, and at a minimum one hour.**

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

- Exercise areas are clean, spacious and inviting, and include enough seating and equipment.
- Women do not have to choose between access to the open air and other important regime activities.
- Women are encouraged by staff to spend time in the open air to benefit mental and physical well-being.
- Outside exercise is only cancelled in extreme weather conditions and waterproof clothing and footwear is available.

**72. Women use their time out of cell constructively and feel safe to do so.**

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

- Out of cell activities, including association and exercise, are supervised effectively by staff, and women feel safe.
- Women who are not engaging in activities, and those who may be at risk of self-harm or bullying, are provided with extra support from staff and peer mentors.
- Women engage in a variety of activities throughout the day that meet their diverse needs.
- Women have the option of at least one rest day a week away from work.
- Staff actively engage with women during association and exercise time and contribute to the quality of their free time.
- Women are consulted about the activities provided.
- Out of cell activities happen on time and are not cancelled unnecessarily.
- Timetabling arrangements maximise the use of resources and staff time and allow work, training and education activities to take place on time with minimal interruptions.
- All women have suitably equipped areas for group social activities and exercise.
- Women are encouraged to give their time to benefit others, for example in peer support roles.

**73. Women can access a good range of creative recreational and social activities which promote learning, well-being and rehabilitation.**

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

- Activities focus on building positive relationships, self-esteem, confidence and assertiveness.
- Women help to develop the range of recreational activities on offer and are, with staff oversight, involved in delivery and review.
- Women have access to a positive range of activities, including those that are not gender stereotypical.
- All women are actively encouraged to take part in recreational activities, including in cell provision.
- Art and cultural experiences are used to enhance the prison community environment, making it more conducive to rehabilitation.
- Community-based organisations are involved in delivery where appropriate.

**74. Women benefit from regular access to a well-equipped library which has direct links to libraries in the community, 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 women receive a timely and effective library induction.
- The quantity and quality of library materials meets the needs of the prison population.
- Library materials reflect the diverse needs of the women held and include a range of formats and languages.
- Relevant, comprehensive and up-to-date legal textbooks, including prison legislation and policies, are readily available to women.
- Women have suitable time to access materials if they are unable to take them away from the library.
- Women have appropriate access to a range of additional learning resources.
- Women have access to internet and IT services.
- The library promotes healthy living, for example by supplying books recommended by the health team or physical education staff.
- The library runs a range of programmes which are educational or allow women to associate.
- Services provided by the library actively promote contact with children, families and other people who are significant to women.

**75. Women 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.

- Staff encourage women to engage in healthy living and personal fitness.
- Women can regularly use the physical education facilities for recreation.
- There is appropriate provision for women who have little or no previous experience of formal physical education or exercise classes.
- Pregnant women and new mothers are able to benefit from safe, appropriate physical education and fitness provision.
- Women receive an appropriate and timely induction into physical education and fitness activities which focuses on healthy living.
- Women engage safely in a range of physical education, fitness and associated activities, based on an effective assessment of their needs and capabilities.
- Physical education and fitness staff have appropriate qualifications and expertise.
- Women can safely shower in good quality facilities after each session.
- The physical education and fitness provision is effective in improving and maintaining the physical fitness of women.



- The physical education facilities are in good condition and are well supervised.
- The range of activities caters for all levels of ability and fitness.
- Women's views on physical education are sought and acted on.
- Physical education staff are involved in decisions with health services, substance misuse services and other departments and agencies involved in the care and resettlement of women.

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

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

In England, this part of the inspection will be conducted by Ofsted. To ensure that prisons 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. For prisons in Northern Ireland, which we inspect only by invitation, we will use the Education and Training Inspectorate Northern Ireland's inspection and self-evaluation framework, which can be found at

<https://www.etini.gov.uk/publications/inspection-and-self-evaluation-framework-isef-effective-practice-and-self-evaluation-4> and is reproduced here:  
<https://www.justiceinspectors.gov.uk/hmiprisons/our-expectations/prison-expectations/purposeful-activity/education-skills-and-work-activities/education-skills-and-work-activities-education-and-training-inspectorate/>.

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## **Expectations**

### **85.1 Women 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 which includes some specific indicators for women. In making this judgement, inspectors will consider the following factors:

- All women receive timely and accurate initial assessment, that takes into account any records of prior learning and achievement, to provide a clear understanding and record of their education. This includes additional learning and special education, skills and work needs, social and life skills, literacy, numeracy and language support, employability and vocational training.
- The curriculum is based on an effective analysis of the needs of the population, relevant research and local and national labour market need.
- Leaders have selected and developed a curriculum that develops the knowledge, skills and behaviours (including English, mathematics and information and communication technology) that women need to take

advantage of the opportunities, responsibilities and experiences that prepare them for their next stage in education, training or employment within the establishment or on release.

- It is clear what the curriculum is preparing women for and what women will know and be able to do at the end of their learning or training programmes.
- Leaders, managers and teachers have planned and sequenced the curriculum so that women can build on previous teaching and learning and develop the new knowledge and skills they need.
- The curriculum considers the needs of women and offers them the knowledge and skills that reflect the needs of the local and regional context where they are likely to be released.
- The curriculum is diverse and not based on gender stereotyping perceptions.
- Teachers, trainers and instructors have expert knowledge of the subjects that they teach.
- Teachers enable women to understand key concepts, presenting information clearly and promoting discussion.
- Teachers check women's understanding effectively and identify and correct misunderstandings.
- Trained peers are deployed as mentors to work closely with staff to provide focused individual guidance and help.
- The curriculum is sequenced so that new knowledge and skills build on what women know and can do and women can work towards defined end points.
- Women access a curriculum based on identified needs that promotes their successful resettlement and enables them to lead autonomous and independent lives.
- Women are able to combine work and study. Work environments are appropriate, representative of those outside of prison and improve their employability.
- The design and delivery of the curriculum, including the use of assessment, ensure women embed key concepts and knowledge to long-term memory and are able to apply these consistently and easily.
- Women's employment-related skills are recognised and recorded.
- Release on temporary licence (ROTL) is used to enhance women's employment or training skills and prepare them for release.
- Pay rates encourage self-improvement and women are paid fairly, accurately and on time.
- Women make progress from their starting points, attaining skills, behaviours and, where appropriate, qualifications.
- Staff are aware of and plan for individual women's diverse needs in teaching, training and work sessions and provide effective support, including for women with English as a second language. Staff make reasonable adjustments for women with disabilities or with additional educational needs.
- Women 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 progress to employment.

- Examinations are used as useful indicators of women's outcomes, but it is recognised that they only represent a sample of what they learn.
- Learning takes account of women's sentence plans.
- All learning builds towards an end point. Women are prepared and are ready for their next stage of education, training or employment, in the prison or on release, at each stage of their learning.
- Provision reduces reoffending and promotes employability skills so that women are well-prepared for the next stage of their education, training or employment in the prison or on release.

## **85.2 Provision successfully promotes positive behaviour and attitudes.**

Ofsted's EIF sets out the main criteria for judging behaviour and attitudes which includes some specific indicators for women. In making this judgement, inspectors will consider the following factors:

- Women feel safe and experience a calm and orderly environment in the prison's classroom, workshop and workplace.
- Teachers use assessment to develop women's understanding to extend and improve their skills beyond simply memorising disconnected facts. Assessment also checks women's understanding to inform further teaching, training and instruction.
- Staff and women do not accept bullying, harassment or discrimination.
- There are clear expectations for 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 behaviour issues quickly, fairly and effectively.
- Women understand the importance of the skills learnt in the context of their next steps and rehabilitation plans.
- Women are occupied in activities that benefit them, enhance their self-esteem, and improve their well-being and chances of successful resettlement.

### **85.3 Provision successfully promotes personal development.**

Ofsted's EIF sets out the main criteria for judging women's personal development which includes some specific indicators for women. In making this judgement inspectors will consider the following factors:

- Women are encouraged to develop into responsible and respectful individuals who know how to become involved in prison and the wider community when on release on temporary licence (ROTL).
- Women are helped to understand the values of democracy, individual liberty, the rule of law and mutual respect and tolerance.
- 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 woman is promoted.
- Women are supported to reflect carefully, learn eagerly, behave with integrity and cooperate consistently well with others.
- Women are supported to develop their confidence, resilience and knowledge as ways to improve their mental well-being.
- Women develop relevant knowledge, skills and understanding which contribute to their personal development and economic and social well-being.
- Women are given opportunities to use their skills for the benefit of other women, for example, in peer mentoring and support roles.
- Women wishing to be self-employed receive specialist support and encouragement.

### **85.4 The leadership and management of education, skills and work activities effectively improves outcomes for women.**

Ofsted's EIF sets out the overarching criteria for judging the effectiveness of leadership and management of education, skills and work activities which includes some specific indicators for women. In making this judgement, inspectors will consider the following factors:

- Leaders focus their attention on education, skills and work-related activities in a way which leads to better outcomes for women such as reducing reoffending and continued and sustainable improvement.
- Leaders engage with women, their community and employers to plan and support the education and training that they receive.
- The prison has sufficient education, skills and work provision for its population and appropriate learning opportunities are available.
- Allocation and attendance measures ensure women attend the appropriate activity on time with minimal interruptions.
- Continuing professional development for teachers, trainers, instructors and other staff is aligned with the curriculum, and this allows staff to develop subject expertise and teaching/training knowledge over time, so that they deliver high-quality education and training.

- Women benefit from effective teaching/training and high expectations in classrooms, in workshops and at work.
- Leaders consider the workload and well-being of their staff and improve the quality of the workforce to strengthen the quality of the provision.
- Leaders and managers monitor the progression and destinations of women (including whether they enter secure and sustained employment) and use this information to improve provision.

## **Section 5: Preparation for release**

**Preparation for release is understood as a core function of the prison. Women are helped to reduce their likelihood of reoffending and their risk of harm is managed effectively. Women are prepared for their release back into the community.**

### Contents

- Reducing reoffending
- Public protection
- Interventions and support
- Returning to the community

## Reducing reoffending

**Women are helped to change behaviours that contribute to offending. Staff help them to demonstrate their progress.**

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### Expectations

**86. Women have access to well-planned services to reduce the risk of offending.**

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

- Helping women to work towards and prepare for the day of release is understood as a central purpose of the establishment.
- The prison helps women to address offending-related problems and experience personal growth during their time in custody.
- The prison routinely consults women about whether the available services will help them to stop offending and can meet their individual needs.
- A wide range of data relevant to progression and release is systematically collected, broken down by race and other protected characteristics, shared and discussed with women and among all agencies working in prisons.
- There is a local reducing reoffending strategy that outlines how the needs of all groups within the prison will be identified and addressed.
- There is good cooperation and communication between various organisations and departments delivering work to reduce offending.
- Community-based probation services and relevant voluntary and community sector organisations are supported to work with women, including those who are in prisons very far from their home area.
- Leaders gather evidence on longer-term outcomes after release and use it to improve services.

**87. The sentence is effectively managed to help reduce the likelihood of reoffending.**

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

- Women are encouraged and helped to take responsibility for changing offending-related behaviours.
- All offender managers in the prison, resettlement staff and key workers are confident in working with women and have been trained in working with trauma and the reasons why women offend.
- The practical resettlement needs of all women, including those on remand, (such as accommodation, employment, finances and debt) are identified on arrival and met, with specific attention given to women with caring responsibilities.

- Recalled women have the implications of recall explained to them and are helped to contact a solicitor.
- There is a timely and competent assessment of the likelihood of reoffending, that considers the links between previous or current abuse and trauma and women's offending behaviour. It is reviewed and updated following a significant event.
- The assessment takes account of individual factors that may affect decision-making, including neurodivergent needs and ill health.
- Convicted women are involved in preparing a sentence plan based on the likelihood of reoffending, the risk of harm to others and their individual strengths, skills and goals.
- With informed consent, families and other people significant to women are involved in the development and delivery of the plan.
- Plans include outcome-focused objectives identifying relevant time-limited and appropriately sequenced interventions and reintegration support. They are regularly reviewed and amended as necessary.
- Women suitable for home detention curfew (HDC) are assessed promptly and released on their earliest eligibility date.

**88. Women receive meaningful support to achieve the targets in their sentence or resettlement 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 woman to make sure key decisions about interventions and activities reflect the plan, in liaison with the key worker.
- The level of contact between the woman and responsible staff member reflects assessed levels of risk and need.
- Women can easily arrange an appointment with their case manager.
- Women understand and are meaningfully engaged in their plan and have opportunities to make choices about their progression and reintegration.
- Staff, especially prison offender managers and key workers, have a good working knowledge of the services available to help women to avoid offending, and they support women to use them.

**89. Women with long or indeterminate sentences receive appropriate advice and support to enable them to 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.

- Women who face an indeterminate sentence are identified on remand, given support and have the elements and implications of an indeterminate sentence explained to them and, where appropriate, to their families.
- Women have realistic opportunities to demonstrate objective progress towards a reduction of the risk they pose throughout their sentence.
- Staff understand the importance of helping to motivate and prepare women for eventual release.



- Knowledgeable staff explain tariffs and Parole Board processes.
- Women are given effective and timely support to progress and prepare for parole hearings.
- Staff make sure that parole paperwork is submitted on time and is of sufficient quality to help the Parole Board make well-informed decisions.
- Parole Board processes happen on time and women understand what happens after a parole hearing. This includes arrangements for release or for the next parole review if the person is not released. Women understand how to challenge a parole decision.
- There are sufficient learning opportunities at an appropriate level for women to be engaged over many years.
- Women serving long sentences can have extended visits with their family or others significant to them.

**90. Women are held in the lowest appropriate security conditions and allocated to prisons in accordance with their individual needs.**

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

- Categorisation documentation (including for restricted status prisoners) contains accurate and detailed information, taking account of the individual needs of women and any medical needs.
- The reasons for restricted status decisions are fully explained in writing, communicated to women and reviewed when there is a significant change in circumstances, and at least annually. Restrictions applied to their regime are proportionate to the associated risks.
- Allocation decisions are based on proximity to home, caring responsibilities and the availability of resettlement interventions to meet need.
- Women serving short sentences have their resettlement needs fully assessed and addressed.
- Categorisation reviews involve the woman and all relevant departments. Women are informed of the outcome in writing and told how to appeal.
- Progressive transfers take place promptly after being decided in principle.

## **Public protection**

**Women's risk of serious harm to others is managed effectively. Women are helped to reduce high risk of harm behaviours.**

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### **Expectations**

#### **91. Women's risk of serious harm to others is identified and minimised.**

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

- Women are involved in assessing the risk of harm they pose to others and, where possible, are engaged in planning how to manage and minimise this risk.
- All women have an accurate and timely screening of the risk of harm to others and (if necessary) a risk management plan which is shared as necessary.
- Reviews are undertaken regularly and always following a significant change or event.
- Prison staff understand and effectively support structures for safeguarding the public, such as multi-agency public protection arrangements (MAPPA).
- In statutory victim contact cases, relevant and accurate information is exchanged in a timely manner.
- The best interests and safety of the child are considered when a woman's access to children is being assessed.
- Women's communications are monitored, in line with the law, to support public protection.
- Restrictions on access to specific activities are proportionate and clearly communicated to women.
- All high-risk cases are overseen by qualified practitioners.

## **Interventions and support**

**Women are able to access support and interventions designed to reduce reoffending and promote effective resettlement.**

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### **Expectations**

#### **92. Women can access a wide range of support aimed at promoting their well-being, and reducing their risk of harm and reoffending.**

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

- Women have timely access to offending behaviour work that meets their needs.

- Women entering specialist units have a clear understanding of the treatment process.
- Changes in attitudes, thinking and behaviour are maintained through ongoing support during and after completion of an intervention.
- Staff undertake offence-related work on a one-to-one basis as necessary, including work to prepare a woman for a structured programme.
- A dedicated member of staff provides meaningful and regular contact with the woman to make sure the targets are being delivered as planned.
- In preparation for release, women especially those on long custodial sentences, have opportunities to develop and practise life skills such as cooking and proficiency in ICT.
- A range of life skills courses are available through the education department, chaplaincy or other departments, including courses about sexual health.
- Where appropriate, release on temporary licence (ROTL) is a key part of any reintegration strategy.

**93. Women are offered advice and help to manage financial commitments while in custody and on release.**

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

- Unconvicted women are able to retain their entitlement to state benefits, including housing and incapacity benefit and retirement pension.
- Newly arrived women, including those on remand, are assisted to make contact with their employer.
- Women have ongoing access to debt advice.
- Women can attend money management courses.
- Women have access to specialist services providing advice and information about benefits/pension entitlements and are helped to make claims in advance of release.
- Women who want to save money for their release are helped to do so.
- Women are helped to apply for recognised identification and can open their own personal bank account before release.

**94. Women are helped to manage their housing at the earliest opportunity and have suitable and sustainable accommodation on release.**

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

- The need for help with housing is identified as soon as possible after arrival in custody.
- Every action is taken to make sure women, including those on remand, have safe and sustainable housing on release.
- Newly arrived women receive help and advice to manage existing rental/housing agreements.

- Newly arrived women are helped to make sure that their property is secure.
- Housing advisors are suitably trained to effectively address the wide range of accommodation issues facing women.
- Women who are at risk of being released homeless are referred to the local authority at least 56 days before release, so that an assessment can be carried out before they leave the prison.
- Leaders effectively monitor women's access to sustainable housing after release and use the data to take remedial action when needed.

**95. Women receive suitable education, training or employment on release or transfer.**

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

- Women are prepared effectively to take up education, training or employment in the community.
- Women are encouraged and able to continue with their learning programmes when transferred to other prisons.
- When transferred, an accurate record of the woman's learning needs and achievements is sent promptly to the receiving prison.
- Leaders monitor education, training or employment outcomes after release and use the data to improve services.

**96. Women who have particular vulnerabilities or who have been abused are supported appropriately.**

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

- Women are supported to disclose any experience of domestic violence, rape or abuse including forced marriage, female genital mutilation (FGM) and other forms of gender-based violence. Disclosure is managed sensitively by appropriately trained staff.
- There are specific interventions to support those who have experienced abuse and they are well-known to staff and women.
- Staff work closely with external organisations that can provide specialist support.
- Women receive information on and are helped to access specific support services in the communities to which they are being released.
- Staff are able to identify and support potential victims of human trafficking.
- Specialist support is available for victims of human trafficking.
- Women who have been involved in the sex industry have easy, confidential access to support from specialist community organisations.

## Returning to the community

**Women's specific reintegration needs are met through good multi-agency working to maximise the likelihood of successful resettlement on release.**

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### Expectations

**97. Women being released have an up-to-date plan for addressing outstanding needs related to reducing reoffending and harm.**

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

- Women have an up-to-date resettlement plan and are meaningfully engaged in their own release planning.
- A designated staff member takes responsibility for tracking progress against identified targets and reviewing them jointly with the woman.
- There is an in-person handover to the person who will be responsible for the prisoner's case, which involves the woman.
- In the lead up to release, women have meaningful contact with their probation officer in the community.
- All necessary work required to support a woman's release is completed early enough to ensure a smooth transition to the community.
- Women understand the requirements of their licence and have the opportunity to discuss their rights and responsibilities prior to release.
- License conditions are sensitive to childcare and other caring responsibilities.
- Requirements for women to report to different services and agencies on the day of release are manageable.

**98. Women are given all necessary support ready 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.

- Women, especially those who have served long sentences, are well prepared for life in modern society and have been able to practice independent living skills.
- Where appropriate, women are released on temporary licence to support their gradual return to the community.
- Women, particularly the most complex and vulnerable, can have a community-based mentor and are able to meet them face-to-face, before they are released.
- Women released from court following a period on remand have access to information and advice.
- Facilities are available before discharge to launder clothes that have been in storage for long periods.

- Remanded women have access to the full range of resettlement help, including advice and information about bail.
- Women receive all of their property.
- Eligible women receive discharge grants and money for travel and can be taken to the nearest public transport hub if it is not within walking distance.
- Women are given detailed travel directions along with the practical support to make the journey. They can receive or be signposted to advice and support once out of the gate.
- Women can access a centre outside of the prison which provides them with the help they need on the day of release.
- Suitable arrangements are made to make sure pregnant prisoners and those with babies can make the journey safely.
- Women are able to make a phone call and charge their mobile phone in advance of release. Women without a mobile phone are issued with one.
- Suitable clothes, bags and other essential supplies are available to discharged women who do not have them.
- Women know about the appointments made for them on the day of release. Those who need additional support are met at the gate and taken to these appointments.

## Appendix I: Notes and references

- i. HM Government (2016) *Ending Violence Against Women and Girls Strategy 2016-2020*, p.8. Available at: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/522166/VAWG\\_Strategy\\_FINAL\\_PUBLICATION\\_MASTER\\_vRB.PDF](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/522166/VAWG_Strategy_FINAL_PUBLICATION_MASTER_vRB.PDF)
- ii. Ministry of Justice (2013) *Gender differences in substance misuse and mental health amongst prisoners*. Available at: <https://www.gov.uk/government/publications/gender-differences-in-substance-misuse-and-mental-health-amongst-prisoners--2>
- iii. In these expectations, 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.
- iv. Dependants refers to a person who relies on another, especially a family member, for financial support.
- v. Prison Rules 1999, Rule 21 (1): A registered medical practitioner working within the prison shall report to the governor on the case of any prisoner whose health is likely to be injuriously affected by continued imprisonment or any conditions of imprisonment. The governor shall send the report to the Secretary of State without delay, together with his own recommendations.
- vi. ACCT refers to assessment, care in custody and teamwork, a case management system for prisoners at risk of suicide and self-harm.
- vii. Solitary confinement is when women 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).