EXPECTATIONS

Criteria for assessing the treatment and conditions for children and young people held in prison custody
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Glossary of acronyms
In 2005, this Inspectorate published the first set of inspection criteria specifically for children and young people in prison: *Juvenile Expectations*. They reflected the body of best practice developed by our specialist juvenile inspection team, embodying both domestic and international human rights standards.

This is the first revised edition. It is the product of detailed and in-depth consultation and discussion within the Inspectorate and with key experts and stakeholders. It incorporates learning from inspections and Inspectorate reviews since 2005, as well as changes in law, policy and procedure. Like its predecessor, these *Expectations* do not precisely mirror the standards set out in Prison Service orders or Youth Justice Board service level agreements. They look for outcomes that reflect best practice in the care and treatment of children and young people held in young offender institutions, and which are deliverable, even in those settings.

There are fewer expectations, and they focus on high-level criteria and outcomes. They are accompanied by a much more detailed description of the evidence that will be required to satisfy each criterion. This will not only assist our inspectors, but, we hope, those running and working in juvenile establishments, clearly setting out the standards that we expect to find.

There are over 2,000 children and young people growing up in our prisons. That number, and the size and type of establishments where most of them are held, are rightly matters of concern. However, while they are there, they need to be held in settings that offer care, support, challenge and change. These *Expectations* set out the building blocks that are necessary to create those environments.

**Anne Owers**  
July 2009
Courts, escorts and transfers

Children and young people travel in safe, decent conditions and in a timely way to and from court and between establishments. During travel the individual needs of young people are recognised and given proper attention. Children and young people travel separately from adults.

Expectations

1. **Children and young people are sufficiently prepared for a trip to court, on escort or transfer.**

   **Evidence**
   
   **Observation:** ask at the beginning of the inspection to be notified of any escorts and planned transfers taking place during the course of the inspection. Check that:
   
   - young people are leaving in appropriate, clean clothing for a court appearance
   - all relevant documentation, finances and other belongings are transferred with the young person to court or on transfer.

   **Staff:** ask reception staff:
   
   - to describe policy and normal procedures to prepare young people for escort in general and transfer in particular
   - what arrangements are in place to ensure that young people are given a meal before they leave the establishment.

   Ask residential staff:
   
   - how they prepare young people for escort and how they manage those who have concerns about court appearances or transfer
   - if YOT workers and parents/carers, or the local authority in the case of looked-after children, are informed of transfers at the earliest possible opportunity. Telephone calls should be documented.

   **Children and young people:** speak to young people before they depart and check that:
   
   - they have been offered breakfast
   - they have been given clean, appropriate clothing
   - they are clear about where they are going. For those being transferred check that they were given adequate notice to prepare for their departure, including the opportunity to make a telephone call and check their property for onward transfer.

References

<table>
<thead>
<tr>
<th>Evidence</th>
<th>ERJO 13, 58, 66.4, 99.1</th>
</tr>
</thead>
<tbody>
<tr>
<td>ERJO 13, 58, 66.4, 99.1</td>
<td>YOIR 45 (3)</td>
</tr>
</tbody>
</table>
2. **Children and young people are treated in a dignified, respectful manner and their individual and diverse needs are met. They are escorted in vehicles that are safe, secure, clean and comfortable, and never with adult prisoners. Young men and women are transported separately.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td><strong>Questionnaire</strong></td>
<td><strong>References</strong></td>
</tr>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>ERJO 99.2, 99.3</td>
</tr>
<tr>
<td>• a sample of PER forms to see if they have been completed appropriately and thoroughly</td>
<td></td>
</tr>
<tr>
<td>• that there is evidence that young people are treated according to their individual needs, which have been properly assessed</td>
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<tr>
<td>• that there are risk assessments supporting the need to use handcuffs</td>
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<tr>
<td>• that there are arrangements in place for health services staff to accompany young people with severe mental illness and other health needs.</td>
<td></td>
</tr>
<tr>
<td><strong>Observation:</strong> observe arrival and departure and check that:</td>
<td></td>
</tr>
<tr>
<td>• young men and young women are not travelling together or with adult prisoners</td>
<td></td>
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<tr>
<td>• escort staff consistently use respectful language when speaking to, and about, children and young people</td>
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</tr>
<tr>
<td>• vans are clean and the temperature is comfortable, there is adequate storage for property and safety is properly addressed</td>
<td></td>
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<tr>
<td>• travel arrangements made for young women who are pregnant, young people with a disability and those with specific health needs are adequate to meet their individual needs</td>
<td></td>
</tr>
<tr>
<td>• young people are not handcuffed during escort unless a risk assessment indicates that it is necessary.</td>
<td></td>
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<tr>
<td><strong>Escort staff:</strong> ask:</td>
<td></td>
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<tr>
<td>• them to describe local procedures for cleaning and carrying out safety checks</td>
<td></td>
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<tr>
<td>• how frequently young people are given refreshments and opportunities for toilet stops</td>
<td></td>
</tr>
<tr>
<td>• what arrangements are made for young people with different needs</td>
<td></td>
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<tr>
<td>• whether children and young people have travelled with adults and whether young men and young women have travelled together in the last three months</td>
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<tr>
<td>• whether young people are monitored during the journey for signs of anxiety and how they are dealt with</td>
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<tr>
<td>• whether they are aware of those who are experiencing custody for the first time.</td>
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</table>
Section 1 – arrival in custody

Staff: ask reception staff:
- whether escort staff provide them with the information they require
- what arrangements are in place to transport young people with specific needs and how these needs are identified
- what happens if they observe examples of poor practice, such as poor treatment by escort staff or children and young people mixing with adult prisoners. Ask what the procedure is to ensure that this information is passed to the YJB, senior managers and the escort contractor.

Children and young people: ask whether:
- they felt safe and were treated respectfully and if they found the transport to be clean and comfortable
- they were able to eat before they left the establishment and were given adequate refreshment at all meal times during their time away
- they were offered comfort breaks or were allowed to use a toilet when they needed to.

Cross-reference with diversity, health services, application and complaints, behaviour management and use of force, safeguarding and child protection inspectors.

3. Children and young people are always transported in a timely way.

Evidence

Questionnaire

Documentation: look at a sample of PER forms and check that children and young people:
- are produced at court on time
- are held at court and in cellular vehicles for the minimum possible period of time
- are held in the closest establishment for court appearances
- have not experienced circuitous journeys to deliver other young people or adult prisoners to different establishments.

Staff: ask escort staff and reception staff:
- whether there are transport delays and what the reasons are.
  Ask reception staff:
- whether all children and young people arrive at the establishment in time to receive full reception and first night procedures
- what arrangements are in place for late arrivals.

HMIP: Expectations
Children and young people: ask:

- if they have ever been late or missed their hearings due to transport delays
- how long they were held at court following the completion of their proceedings
- if they knew who they were travelling with, where they stopped on the way and how long they were in the escort vehicle.

4. **Children and young people have access to video link facilities and they are actively promoted, unless a child or young person has a preference for attending court.**

   **Evidence**

   **Observation/documentation:** check for facilities and usage over the last three months, including the purpose of usage, e.g. an inter-prison visit. Reasons for not using video links should be investigated.

   **Staff:** check whether opportunities have been made for usage and whether it has been offered.

   **Children and young people:** ask whether they have been given the opportunity to use video facilities as an alternative to visiting court.

   **References**

   ERJO 83, 85.1, 85.2

   YOIR 42

5. **Children and young people are given information at court about what is going to happen to them, in a language and format they can understand.**

   **Evidence**

   **Questionnaire**

   **Documentation:** check local court liaison protocols and see if there is a system in place to ensure that children and young people have access to material produced by the establishment for this purpose, either at court or via the escort staff. Check that the material is age-appropriate and easy to understand.

   **Escort staff:** ask if they have been given material to provide to young people at court.

   **Children and young people:** ask if they were given any information, while at court or in transit, about where they were going or what would happen when they arrived at the establishment.

   *Cross-reference with the diversity inspector.*
Section 1 – arrival in custody

6. Children and young people can influence their experiences while under escort, through a well-publicised comments or complaints procedure.

<table>
<thead>
<tr>
<th>Evidence</th>
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<tbody>
<tr>
<td><strong>Documentation:</strong> check that:</td>
<td>ERJO 13, 122.1</td>
</tr>
<tr>
<td>• written information given to young people includes details of the feedback and complaints procedure</td>
<td>YOIR 8</td>
</tr>
<tr>
<td>• at least quarterly meetings take place between escort staff, prison staff and court managers to promote improvements in escorting procedures</td>
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<tr>
<td>• feedback from children and young people is considered and acted on</td>
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<tr>
<td>• safeguarding and child protection concerns are properly identified and passed on appropriately.</td>
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<tr>
<td><strong>Observation:</strong> check that there is a comments book available in reception or that feedback/complaint forms are offered either by reception or escort staff.</td>
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<tr>
<td><strong>Staff:</strong> ask reception staff:</td>
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<tr>
<td>• whether young people are routinely asked about their journey and if they have any complaints</td>
<td></td>
</tr>
<tr>
<td>• if there is a procedure in place to deal with such complaints</td>
<td></td>
</tr>
<tr>
<td>• whether they have been given instructions concerning identifying and passing on safeguarding issues.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• if they were asked about their journey on arrival and if they had any complaints</td>
<td></td>
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<tr>
<td>• those who have complained if they are aware of any action taken.</td>
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</tbody>
</table>

*Cross-reference with applications and complaints, safeguarding and child protection inspectors.*
HMIP: Expectations
First days in custody

Children and young people feel and are safe on their reception and introduction to the establishment. Their individual needs, both during and on release from custody, are identified and effective plans developed to meet these needs. During induction into the establishment young people are helped to understand establishment routines, are told how to access available services, are given a clear idea of what is expected of them and are helped to cope with imprisonment.

Expectations – reception

1. **All information/essential documentation is received by reception staff before or at the time of the young person’s arrival.**

   **Evidence**

   **Documentation:** check that:
   - the information received is up to date and includes details of the offence and previous convictions, a full ASSET, YJB vulnerability alerts if appropriate, a pre-sentence report, a post-sentence report, public protection status, police reports, etc
   - the quality of the information provided is adequate to inform initial assessments and that information collected is reflected in good quality vulnerability assessments
   - missing information is recorded and the YJB is immediately notified through the YJB ‘hotline’ system.

   **Staff:** check that staff know how to use the ‘hotline’ system.

   **References**

   - RPJDL 19, 20, 21
   - ERJO 62

2. **Children and young people are greeted and dealt with by reassuring staff in a safe, clean and welcoming environment.**

   **Evidence**

   **Questionnaire**

   **Observation:** on arrival check that:
   - staff routinely ask if this is the young person’s first time in custody and there is a system that alerts all staff of this
   - staff explain what the reception process involves, in a reassuring manner, paying particular attention to children and young people with no custodial experience

   **References**

   - RPJDL 32
   - ERJO 1, 18, 88.3
Section 1 – arrival in custody

First days in custody: reception

- staff are aware of children and young people who have been identified as vulnerable (through a YJB vulnerability alert or through ASSET)
- young people are properly supervised when waiting in reception
- new receptions and those whose legal status has just changed are given appropriate attention
- there are age-appropriate and easy-to-read posters or displays in waiting areas, providing useful and reassuring information.

Children and young people: speak to a number of new arrivals about their experience of initial reception procedures and their early treatment in general. Speak to those experiencing custody for the first time.

Cross-reference with the safeguarding inspector.

3. The immediate individual needs and concerns of the child or young person are identified quickly on arrival in reception through a private interview and their individual circumstances are dealt with sensitively.

Evidence

<table>
<thead>
<tr>
<th>Documentation: check that:</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>• personal information and the action taken to meet any special needs is recorded</td>
<td>RPJDL 21, 23, 27, 28</td>
</tr>
<tr>
<td>• ACCT documentation is completed, if appropriate.</td>
<td>ERJO 62.2, 62.6</td>
</tr>
</tbody>
</table>

Observation: observe an initial interview and check:

- whether it is conducted sensitively. Young people should not be asked unnecessarily to repeat personal information, which they might find distressing
- if there is a suitably private area for staff to deal with a child or young person in distress
- if young people are asked if they have any worries or concerns and if efforts are made to reassure them
- if young people are offered a telephone call in private or told when they can make one (this should take place within two hours of arrival)
- if an appropriate translation service is used for young people who do not speak or understand English well
- if the interview is used appropriately to talk to the young person to assess their needs and supplement existing information
- if ASSET information is interrogated and whether children and young people are asked if they are primary carers for their own children or any other family members, have any disabilities or health needs, or are pregnant
- if safeguarding or child protection concerns are picked up.
Section 1 – arrival in custody

First days in custody: reception

Staff: check that:
- staff use ASSET and other pre- and post-court information as well as interviews with young people to identify their immediate needs
- showers are available for young people who request one before they are taken to the residential unit and for late arrivals
- peer support is available and offered to young people as part of the reception process.

Children and young people: ask if:
- staff were understanding
- their concerns were listened to and dealt with
- they were helped to understand what was happening and how their worries and concerns would be addressed.

Speak to peer supporters. Ask if they have had training and how they are supported in their work.

Cross-reference with safeguarding, child protection, diversity and health services inspectors.

4. Children and young people entering custody are searched sensitively and in accordance with the security risk they pose. Strip-searching does not form part of routine reception procedures but is carried out only when a risk assessment indicates that this is necessary to protect the young person or others from serious harm.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td>Questionnaire</td>
<td>ERJO 89</td>
</tr>
<tr>
<td>Documentation: check that the local searching policy has been adapted to take account of the needs and vulnerabilities of children and young people. Specifically check that strip-searching on reception is not undertaken routinely and is only carried out based on a risk assessment.</td>
<td>YOIR 46</td>
</tr>
<tr>
<td>Observation: check:</td>
<td></td>
</tr>
<tr>
<td>• how staff make efforts to reassure young people and carry out searching procedures as sensitively as possible</td>
<td></td>
</tr>
<tr>
<td>• that searching is carried out in a private area fit for purpose, in the presence of at least two staff, and that the young person is not in view of anyone other than the staff searching them.</td>
<td></td>
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</tbody>
</table>
**Section 1 – arrival in custody**

**First days in custody: reception**

**Staff:** check:
- the extent of staff knowledge of the local searching policy
- whether staff familiarise themselves with and take account of available information about individual young people before they undertake a strip-search
- whether they have had any guidance or training to alert them to religious/cultural sensitivities and the particular concerns relating to strip-searching children and young people who may have suffered abuse
- what guidance has been issued to search young people who refuse to cooperate with a search.

**Children and young people:** ask them about their experience of searching on arrival, specifically:
- whether the need for a search and the level of search was explained to them
- if they agreed to the search and, if not, whether force was used
- whether the search was conducted as sensitively as possible.

*Cross-reference with diversity and behavioural management inspectors.*

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5. **Children and young people are held in reception for as short a period of time as possible. During their time in reception they are offered refreshments and activities to keep them occupied.**

**Evidence**

**Questionnaire**
- check a sample of records to ascertain the average length of time spent in reception.

**Observation:** check:
- the time spent in reception and that all proper procedures are undertaken before children and young people are moved to their first night accommodation
- that staff are proactive in engaging with children and young people
- that children and young people are provided with appropriate activities while they wait in reception, including information about the establishment
- that children and young people are closely supervised by staff at all times
- that children and young people have access to peer support in reception
- that children and young people are offered appropriate refreshments in reception.

**References**

- RPJDL 27, 31
- ERJO 49.1, 52.1
Section 1 – arrival in custody

Staff: check what arrangements are in place to ensure that new arrivals have a drink and a hot meal on the residential unit if they have not been offered a meal in reception due to late arrival.

Children and young people: ask how long they were held in reception and what they were offered in terms of refreshments and to occupy themselves while waiting.

Cross-reference with the safeguarding inspector.

6. Comprehensive vulnerability and risk assessments, based on all necessary information, are completed for each new arrival before children and young people are locked up for the first night and are regularly reviewed.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check what training staff have been given to identify vulnerability via training records. Check a sample of vulnerability assessments. They should demonstrate that:</td>
<td>RPJDL 27, ERJO 62.5, 62.6</td>
</tr>
<tr>
<td>• the vulnerability assessment and cell sharing risk assessments were completed on the day of the young person’s arrival</td>
<td></td>
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<tr>
<td>• staff use ASSET, the YJB alert information and other pre- and post-court information as well as information obtained from young people to complete the assessments</td>
<td></td>
</tr>
<tr>
<td>• a care plan is produced for young people who are assessed as vulnerable or who pose a risk to others</td>
<td></td>
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<tr>
<td>• there is a system of quality assurance and review</td>
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<tr>
<td><strong>Observation:</strong> check that:</td>
<td></td>
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<tr>
<td>• handover arrangements are thorough and include reference to vulnerability and risk assessments</td>
<td></td>
</tr>
<tr>
<td>• comments in the observation book show that staff engage with new arrivals and pass on concerns about vulnerability and risk</td>
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<tr>
<td>• children and young people are allocated to a cell taking full account of the vulnerability and risk assessment</td>
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<tr>
<td><strong>Staff:</strong> ask:</td>
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</tr>
<tr>
<td>• staff receiving YJB vulnerability alerts and completing initial vulnerability assessments if they have an understanding of the process, can make connections with child protection, feel competent and confident to complete this task and feel able to identify those at risk at any point during custody</td>
<td></td>
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<tr>
<td>• what might trigger a child protection referral</td>
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<tr>
<td>• residential staff, and particularly first night staff, if they have easy access to vulnerability assessments and use them to help new arrivals to settle in and keep them safe.</td>
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</table>

Cross-reference with safeguarding, residential units, diversity and substance use inspectors.

HMIP: Expectations
7. Children and young people are given a pack on arrival containing a telephone card or PIN phone credits and other basic items. They are told how long it is expected to last.

Evidence

Observation: check that the reception pack contains all essential items to sustain the child or young person until they are able to make their own purchase from the shop.

Staff: ask to see a pack.

Children and young people: ask:
- if they were given a reception pack
- if they were told how long the pack was expected to last
- if they were told how the PIN system works.

References

RPJDL 24
ERJO 62.3, 83, 85.1

8. Property held in storage is secure. Volumetric control of property takes account of individual needs.

Evidence

Documentation: check the arrangements for the following groups against the national standard of two boxes per young person: for example, those on indeterminate or long sentences, children and young people with disabilities, children and young people from different cultural groups and foreign nationals, those on distance learning courses.

Observation: check storage arrangements.

Cross-reference with the diversity inspector.

References

RPJDL 35

9. Children and young people can access their locally-held property within 24 hours of making an application and are fairly compensated for any losses.

Evidence

Documentation: check:
- the procedure for making applications to access property
- that property record cards and relevant forms are properly maintained
- the outcome of any complaints about losses.

Staff: ask how applications for property held in storage are dealt with.

References

RPJDL 35
Children and young people: ask them if they were told about the procedure for accessing property held in storage when they arrived and if the system works efficiently.  
*Cross-reference with residential units and applications and complaints inspectors.*

Expected – first night

10. **Immediate needs identified in reception are dealt with before new arrivals are locked up for the night. Essential information is provided in a variety of accessible formats (written, oral, video) so children and young people know what to expect within the first 24 hours of custody.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation/documentation:</strong> information provided by a member of staff on first night duty always includes:</td>
<td>RPJD 24, 25, 27</td>
</tr>
<tr>
<td>• essential details of what will happen to them in the first 24 hours</td>
<td>ERJO 62.3, 62.6</td>
</tr>
<tr>
<td>• their entitlement to visits (specifically that they are entitled to a reception visit within two days of their arrival)</td>
<td>YOIR 7</td>
</tr>
<tr>
<td>• telephone and mail arrangements, including that they may be monitored, but also that staff are available to facilitate contact with their family or YOT workers</td>
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<tr>
<td>• times of locking and unlocking</td>
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<td>• the use of cell call bells</td>
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<tr>
<td>• meal times</td>
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<tr>
<td>• hygiene and clothing provision</td>
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<tr>
<td>• what to do and who will be available to help them if they are feeling upset or anxious.</td>
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</table>

**Staff:** ask staff:

- what checking systems are in place to ensure that immediate needs identified in reception have been met
- what information they provide and how they ensure that young people have understood what they have been given or told
- if all new arrivals have been offered a shower, a hot meal and have been able to speak to a member of their family or a carer. Check that continued efforts are made if there was no response when the young person attempted to make telephone contact.
Children and young people: check that children and young people understood the information, especially those who do not speak or understand English well, those who have poor concentration, and those with literacy or learning difficulties. 

Cross-reference with residential units and diversity inspectors.

11. All children and young people are given information about the sources of support available, including the chaplaincy team, buddies and Samaritans, in a variety of accessible formats (written, oral, video) and appropriate languages.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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</thead>
<tbody>
<tr>
<td>Observation/documentation: check all information about the sources of help available and whether:</td>
<td>RPJDL 24</td>
</tr>
<tr>
<td>• it is accessible to children and young people who do not speak or understand English well, those who have poor concentration and those with literacy or learning difficulties</td>
<td>ERJO 62.3,</td>
</tr>
<tr>
<td>• there is an up-to-date database on sources of appropriate help available</td>
<td>62.6</td>
</tr>
<tr>
<td>• it includes details of what is available for children and young people who feel distressed during the night</td>
<td>YOIR 7</td>
</tr>
<tr>
<td>Staff: check:</td>
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</tr>
<tr>
<td>• that all young people are explicitly offered the chance to speak to a peer supporter, or access any of the other support systems that are available on their first night</td>
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<tr>
<td>• that support services are readily available if requested by a young person</td>
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<tr>
<td>• what support is available to a child or young person who is distressed during the night – there are procedures which would enable staff to unlock and comfort them</td>
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</table>

Children and young people: check that:

- they understood the information they were given and felt that they could ask staff for help if they needed it.
- they were offered access to the support they were told was available.
- they were clear what they could do if they were distressed during the night.

Cross-reference with residential units and safeguarding inspectors.
12. **Children and young people are supported on their first night in custody by staff who are conversant with a range of key procedures such as suicide prevention and mental health issues and have particular understanding of adolescent behaviour. These officers ensure that any immediate anxieties are addressed before children and young people are locked up for the night.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation/documentation: check that:</td>
<td>RPJDL 50, 51, 81</td>
</tr>
<tr>
<td>• there are arrangements in place for answering enquiries and receiving information from families, friends and youth offending teams</td>
<td>ERJO 70.2</td>
</tr>
<tr>
<td>• there are designated first night officers who have been suitably trained for their role</td>
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<tr>
<td>• there are comprehensive first night procedures and staff guidance that ensures children and young people are carefully monitored and properly cared for on their first night in custody</td>
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<tr>
<td>• first night staff are fully aware of the circumstances of children and young people being monitored on ACCT procedures</td>
<td></td>
</tr>
<tr>
<td>• night staff carry ligature shears and have been trained to use them</td>
<td></td>
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<tr>
<td>• first night staff are conversant with the vulnerability and risk assessments for the children and young people in their care.</td>
<td></td>
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</tbody>
</table>

**Staff:** ask:

- if they are familiar with written first night procedures and guidance
- what training first night staff have been given and whether it includes mental health awareness training, suicide prevention training, and training in emergency procedures such as fire and first aid
- if they spend time with new arrivals before they are locked up for the night to allay initial anxieties
- if they have received a thorough handover from evening duty staff.

**Children and young people:** ask:

- how staff helped them on their first night in custody
- if they felt able to share any initial anxieties with staff
- if they felt confident that they could ask for help during the night.

*Cross-reference with safeguarding and health services inspectors.*
13. **First night accommodation has been prepared and is clean and provides a comfortable environment.**

   **Evidence**
   
   **Observation:** check that:
   - first night cells have been cleaned and prepared
   - there is a range of suitable activities to occupy children and young people in their cell on their first night.

   **Staff:** ask about the procedure for preparing first night cells and whether there are management checks in place to ensure that standards are acceptable.

   **Children and young people:** visit new arrivals in their cell to check that it has been properly prepared. Check that the young person was not asked to clean it and that it is properly equipped.

   *Cross-reference with the residential units inspector.*

   **References**
   - RPJD 31, 32
   - ERJO 63, 64
   - YOIR 22

14. **Staff, preferably the personal officer, spend time with the child or young person as soon as they are unlocked following their first night in custody in order to assess how the young person is coping and, if appropriate, to update the vulnerability assessment.**

   **Evidence**
   
   **Documentation:** check:
   - if first night guidance requires checks to be made with new arrivals after their first night in custody
   - the wing files of new arrivals to see if there is an entry for the first night
   - observation books for comments about new arrivals
   - vulnerability assessments to see if updated comments/reviews have taken place.

   **Staff:** speak to personal officers and first night staff about their role immediately after the first night.

   **Children and young people:** ask if staff checked on them on their first morning and, if so, whether it was their personal officer.

   *Cross-reference with personal officers and safeguarding inspectors.*

   **References**
   - ERJO 49.1, 52.1
   - YOIR 8
Section 1 – arrival in custody

First days in custody: *induction*

Expectations – induction

15. **Children and young people are kept fully occupied through a comprehensive, structured and multi-disciplinary induction programme that starts the day after they arrive. There is an emphasis on motivating children and young people to achieve during their time in custody.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td></td>
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<tr>
<td><strong>Documentation:</strong></td>
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<tr>
<td>check that:</td>
<td></td>
</tr>
<tr>
<td>• children and young people</td>
<td>RPJDL 12,</td>
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<tr>
<td>are provided with information</td>
<td>24, 25</td>
</tr>
<tr>
<td>in accessible formats about</td>
<td>ERJO 50</td>
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<tr>
<td>their entitlements, the</td>
<td>YOIR 37</td>
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<tr>
<td>regime, and how to access it</td>
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<tr>
<td>• children and young people</td>
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<td>are asked for feedback on</td>
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<tr>
<td>the induction process and</td>
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<td>action is taken.</td>
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<td><strong>Observation:</strong></td>
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<tr>
<td>observe induction sessions.</td>
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<tr>
<td>Check that they:</td>
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<td>• take place in an appropriate</td>
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<tr>
<td>designated induction area</td>
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<td>that is quiet, age-appropriate</td>
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<td>and free from interruption</td>
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<td>• cover everything that young</td>
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<td>people need to know and</td>
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<tr>
<td>offer practical help to:</td>
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<td>preserve their accommodation</td>
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<td>and employment or college/</td>
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<tr>
<td>school place; pursue legitimate</td>
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<td>work and social interests</td>
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<td>where appropriate; pursue</td>
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<tr>
<td>their legal rights; obtain</td>
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<td>help with personal problems;</td>
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<td>keep in touch with their</td>
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<td>family and friends; pursue</td>
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<tr>
<td>a healthy lifestyle in custody</td>
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<td>• are multi-disciplinary,</td>
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<td>engaging, stimulating and</td>
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<td>motivating, using multimedia</td>
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<td>• are well-paced and ensure</td>
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<td>that young people understand</td>
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<td>the information</td>
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<td>• are not frequently cancelled</td>
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<td>• are timetabled to provide</td>
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<td>a full and active day and</td>
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<td>allow young people to take</td>
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<td>part the day after their</td>
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<td>arrival</td>
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<td>• take account of language</td>
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<tr>
<td>and literacy needs</td>
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<td>• offer an appropriate</td>
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<td>induction for children and</td>
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<td>young people who arrive</td>
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<td>just before the weekend and</td>
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<td>also those who have</td>
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<td>recently experienced</td>
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<td>induction at the establishment</td>
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<td>and do not require a full</td>
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<tr>
<td>repetition.</td>
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<td><strong>Staff:</strong></td>
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<tr>
<td>ask if:</td>
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<tr>
<td>• all children and young</td>
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<tr>
<td>people start their induction</td>
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<td>the day after their arrival</td>
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<td>• all children and young</td>
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<tr>
<td>people new to the</td>
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<tr>
<td>establishment receive a</td>
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<td>full induction, including</td>
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<td>those whose status has</td>
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<td>changed after a court</td>
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<tr>
<td>appearance.</td>
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</tbody>
</table>

**HMIP: Expectations**
**Section 1 – arrival in custody**

**First days in custody: induction**

Children and young people: ask:
- when they received their induction
- if it covered everything they needed to know.

16. During the induction process and as part of ongoing consultation meetings with children and young people they are informed about the establishment’s procedures to protect them from bullying, peer pressure, and/or any form of abuse or neglect. Specifically they are informed about how they will be protected in cases where harm has occurred or has been threatened.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that the minutes of consultation meetings include reference to safeguarding issues.</td>
<td>RPJDL 23, 28</td>
</tr>
<tr>
<td><strong>Observation:</strong> check that there are notices on the residential units and around the establishment giving appropriate information.</td>
<td>ERJO 62.3, 52, 88</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask how staff ensure that children and young people understand the various procedures aimed to keep them safe from harm and that they know how to use them.</td>
<td></td>
</tr>
</tbody>
</table>

Children and young people: ask if:
- information given to them helped them to feel safe
- they feel that they will be listened to and responded to
- they know how to raise issues about staff or other young people.

Cross-reference with child protection, bullying, residential units and applications and complaints inspectors.

17. During the induction programme, children and young people have the opportunity for individual interviews with induction staff, which is recorded in individual records.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check individual wing records to ensure that by the end of induction children and young people have met relevant staff from different departments.</td>
<td>ERJO 50, 62.6</td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask if they have:</td>
<td>YOIR 8</td>
</tr>
</tbody>
</table>
- completed a range of assessments to be allocated to an appropriate activity
- met a range of staff and had the opportunity to get information about what is available to help them make the best of their time in custody and prepare for their release
- spoken to relevant staff to help with their personal problems.
18. **All assessments completed during the induction period are available at the child or young person’s initial training planning meeting.**

**Evidence**

- **Documentation:** check a sample of training plans to see whether they include a written report from the induction unit.
- **Staff:** speak to induction staff and staff who chair training planning meetings.

*Cross-reference with the training planning inspector.*

**References**

ERJO 21, 27, 62.2
Children and young people live in a safe, clean, decent and stimulating environment within which they are encouraged to develop independent living skills and learn to live in, and participate positively to, the community.

Expectations

1. **Cells and communal areas are comfortable, light, properly equipped and in a good state of repair.**

   **Evidence**
   
   **Documentation:** check that:
   
   - cells have been properly certified as suitable (particularly the suitability of any double occupancy cells)
   - there is a standard list detailing the possessions that young people are allowed to keep and that this is adequate to meet the needs of children and young people
   - there is an ongoing programme of redecoration
   - minor works are carried out without undue delay.

   **Observation:** look at all residential wings and communal areas. Check that:
   
   - cells are ventilated and have sufficient daylight
   - there is enough to occupy children and young people while they are locked up, including televisions for those on standard or enhanced levels of the incentives and earned privileges scheme, or a radio for young people temporarily on the basic level
   - children and young people are allowed to personalise their cells subject to a proportionately risk-assessed approach, e.g. display of photographs, certificates of achievement, work produced in the establishment
   - children and young people have their own pillow, bedding and duvet, curtains, pin board, lockable cupboard with storage for clothes and the use of a table and chair
   - accommodation is suitable to meet the diverse needs of children and young people, e.g. those with a disability
   - ASSET documents are checked to ascertain whether new receptions require any form of special accommodation or equipment and children and young people with medical conditions are provided with appropriate facilities, e.g. low beds, bed boards or special mattresses

   **References**
   
   RPJDL 31, 32, 33, 34
   ERJO 63
   YOIR 22
Section 2 – environment and relationships

- children and young people have access to drinking water, toilet and washing facilities at all times
- all cells have screened toilets
- there is a clear policy prohibiting offensive displays and it is applied consistently
- staff regulate noise levels at night (to be checked on the night visit).

**Children and young people:** ask:
- whether cells are sufficiently warm in winter and cool in summer
- whether they have the things they need in their cells to meet their basic needs
- if residential units are as calm and quiet as possible to enable rest and sleep, especially at night.

*Cross-reference with the diversity inspector.*

2. **Children and young people are expected, encouraged and enabled to keep their cells and communal areas clean. Children and young people are given practical help to carry out these tasks to help them develop independent living skills.**

**Evidence**

**Observation:** check:
- the cleanliness of cells and communal areas on all residential units
- that children and young people are not employed as full-time cleaners.

**Staff:** ask:
- how good standards of cleanliness are actively encouraged. Are there incentives for young people to maintain good standards of cleanliness?
- what cleaning materials are available and how they are distributed.

**Children and young people:** ask:
- if they have everything they need to keep their unit and their cells as clean and tidy as they would like to, and as they are told to
- what help they get from staff.

*Cross-reference with the learning and skills inspector.*

**References**

ERJO 65.4
3. **All children and young people have access to a working in-cell emergency call bell that is responded to within five minutes.**

**Evidence**

**Questionnaire**
- there is an auditable system in place to monitor the response to cell call bells
- quality assurance checks are carried out by managers.

**Observation:** press a call bell and see what happens.

**Staff:** ask:
- what information is given to young people about the use of their cell call bell
- whether young people complain to them about response times
- whether they have any difficulty in responding within five minutes.

**Children and young people:** ask:
- what instructions they have been given with regard to the use of the cell call bell
- whether it is permissible to use the bell at night if they are distressed or wish to speak to a member of staff
- about their experiences of responses to cell call bells.

*Cross-reference with safeguarding, suicide and self-harm, health services and applications and complaints inspectors.*

**References**

RPJDL 32, ERJO 64, YOIR 22 (1)

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4. **Children and young people feel safe in their cells and in communal areas, and the design and size of the residential units supports this.**

**Evidence**

**Questionnaire**
- risk assessment procedures and records, especially cell sharing risk assessments
- records of injuries taking place on the residential units, whether there is any analysis to inform staff of problem areas and whether this is monitored by the safeguarding committee.

**References**

RPJDL 32, ERJO 53, 63, 64, YOIR 22
Section 2 – environment and relationships

Observation: check that:
- the design and size of residential units promotes safety of all children and young people
- staffing ratios are sufficient to ensure the safety and wellbeing of all
- good staff supervision ensures the safety of young people, particularly in showers and bathrooms, and that staff do not resort to locking young people in the showers
- staff control levels of noise while young people are locked in their rooms
- children and young people have privacy keys for their cells
- observation panels in doors are free from obstruction.

Staff: ask:
- how familiar they are with risk assessment procedures
- what training they have had to complete cell sharing risk assessments
- if they think the ratio between staff and children and young people is sufficient to ensure safety
- how they pay attention to difficulties associated with verbal abuse while young people are locked in their cells
- where they think high risk areas are and how they ensure good supervision of these areas
- how they supervise showering arrangements, ensuring that there is an appropriate level of privacy.

Children and young people: ask:
- about shouting through windows at night or other times when they are locked up
- whether they feel comfortable and safe in their cells and communal areas
- where they consider the most high risk areas to be and whether they are regularly asked about safety on the wings.

Cross-reference with safeguarding, bullying and health services inspectors.

5. Children and young people receive information from a variety of sources and in multiple formats covering everything they need to know about the daily routines and life on the unit.

Evidence

Documentation: check that children and young people have been asked if they have understood all the information with which they have been provided.

References

RPJDL 24, 25
ERJO 62
YOIR 7

HMIP: Expectations
Observation: look at all residential units. Check that:
• any notices are graphically set out in a variety of ways so that the message is clear
• information is provided in a range of formats and languages and the information provided is up to date and relevant.
Staff: ask staff how they ensure that children and young people have understood the information they have been given and the notices that are on display.
Children and young people: ask:
• if they are able to understand all the information displayed around the units
• in what other formats information is provided, especially for those who cannot read and write well or who do not understand English.

Cross-reference with first days in custody and diversity inspectors.

6. Children and young people have the opportunity to use the telephone every day. Conversations can be conducted in private.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td>Questionnaire</td>
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</table>
Observation: check that there is a sufficient number of working telephones on all residential units (minimum ratio of 1:20) and that conversations can take place with a reasonable degree of privacy.
Staff: ask them:
• to describe how they ensure that access to the telephone is fair
• what arrangements are in place to ensure that all young people are able to access the telephone every day, including those on the lowest level of the rewards and sanctions scheme or on loss of association
• what happens when association for the general population is not available or is cancelled.
Children and young people: ask:
• if there are enough telephones to ensure daily access for everyone
• how long they have to queue to use the phone and how long they get to spend on the phone
• if the phones are sufficiently private
• what happens when there is no evening association.

Cross-reference with the contact with the outside world inspector.
7. Children and young people can influence and participate in the development of life on their unit.

**Evidence**
- Documentation: check:
  - the frequency and regularity of wing meetings
  - the minutes of the meetings for discussion items and for evidence of representation
  - that the views of children and young people are collected by various methods, including questionnaires and whole wing meetings when appropriate
  - that there are action points arising out of the meetings and whether they are followed through.

**Staff:** ask how they ensure continuous dialogue with children and young people.

**Children and young people:** ask how they are able to raise issues and receive feedback about life on the unit and if this is effective. If consultation is through wing representatives, speak to the representatives on each wing and ask how they carry out their role. In particular, ask how they ensure that they collect the views of the young people on the wing they represent and if they feel supported by staff to carry out their role properly. Ask young people on the wing if they feel that the wing representatives do a good job and if they are given feedback about the issues they raise.

8. Children and young people are permitted to wear their own clothes and are able and helped to launder them regularly. For those who do not have sufficient for their needs or if the quality is inadequate there is enough clean establishment clothing of the right size, quality and design to meet their individual needs, including an outdoor jacket.

**Evidence**
- Documentation: check how often children and young people are able to have a change of clothing.

**Observation:** check that:
- children and young people are wearing clean, good quality and well-fitting clothing and have an outdoor jacket
- children and young people have at least weekly access to laundry facilities to wash and iron their personal clothing and are given practical support by staff to assist them in these domestic tasks.

References:
- RPJDL 25
- ERJO 13, 50.3
- RPJDL 36
- ERJO 65.4, 66
Staff: ask:
- if there is a procedure for what should be done if a young person does not have sufficient or has poor quality clothing
- about access to laundry facilities and what help they give to young people to encourage them to undertake these tasks
- if children and young people are able to launder clothes that have been in storage for long periods prior to their discharge

Children and young people: ask:
- whether the clothes meet their gender, age, employment, length of sentence and religious/cultural needs
- whether they have weekly access to laundry facilities and whether staff help and encourage them to do their laundry.

Cross-reference with first days in custody and diversity inspectors.

9. Freshly laundered bedding, which is changed weekly, and a clean mattress is provided for each new child or young person on arrival.

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<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td>Observation:</td>
<td></td>
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<tr>
<td>check:</td>
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<tr>
<td>that a monitoring system is in place which results in the efficient replacement of soiled mattresses</td>
<td>RPJDL 33</td>
</tr>
<tr>
<td>that clean pillows are available for newly admitted children and young people, as well as other bedding</td>
<td>ERJO 67</td>
</tr>
<tr>
<td>clothing exchange stores, condition of bedding, etc.</td>
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<tr>
<td>Staff: ask about the system for mattress exchange and what arrangements are in place for young people who are enuretic.</td>
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</tbody>
</table>

Cross-reference with the first days in custody inspector.

10. Children and young people have access to necessary supplies of their own personal hygiene and sanitary products and are encouraged and enabled to shower or bath daily, and immediately following physical activity, before court appearances and before visits.

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<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td>Questionnaire</td>
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<tr>
<td>Documentation:</td>
<td></td>
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<tr>
<td>check the policy on distribution of stock and replacement.</td>
<td>RPJDL 34</td>
</tr>
</tbody>
</table>

| Documentation:    | ERJO 65    |
| check the policy on distribution of stock and replacement. | |
Observation: check the arrangements for showers during association, in reception and after PE.

Staff: ask:
- if they are alert to bullying around hygiene products bought from the canteen and how they monitor excess supplies
- if access is available to all children and young people, irrespective of their incentive level
- how they deal with children and young people who have poor personal hygiene
- how they ensure that the needs of children and young people from different cultures or nationalities are met.

Children and young people: ask:
- if they have access to showers every day and, in particular, if they are able to shower immediately following physical activity, before court appearances and before visits
- what happens if they refuse to take a shower
- if they have access to necessary supplies of their own personal hygiene items and sanitary products.

*Cross-reference with first days in custody, prison shop, safeguarding, bullying, diversity, PE and contact with the outside world inspectors.*
Children and young people are treated with care and fairness by all staff, and are expected, encouraged and enabled to take responsibility for their own actions and decisions. Staff have high expectations of all children and young people and have a role in setting appropriate boundaries. They listen, give time and are genuine in their approach.

Expectations

1. **Staff behave in a fair and consistent way, care for children and young people as individuals and respond to their different needs.**

   **Evidence**
   
   **Documentation:** check that:
   - wing file entries demonstrate good interaction between staff and young people
   - wing files contain clear individual assessments
   - targets in training plans and care plans reflect individual needs.

   **Observation:** observe interactions between young people and staff in a variety of settings, in particular during meal times, movements and association. Check that staff:
   - approach children to chat or ask how they are/how their day has been
   - adopt a kind, respectful approach to children and young people.

   **Staff:** ask:
   - staff to describe their role in caring for the children and young people they are responsible for
   - how they access information and gain knowledge of individual young people in their care.

   **Children and young people:** ask:
   - about relationships with staff
   - if there are any members of staff who they would feel able to go to for help or advice
   - if they feel cared for by staff
   - if staff routinely ask them how they are and how they spend their time.

   *Cross-reference with the diversity inspector.*
2. **Staff are professional in their conduct at all times. They engage positively with children and young people and one another and set clear boundaries which support good behaviour.**

   **Evidence**

   **Questionnaire**

   **Observation:** throughout inspection, and especially during evening association and meal times and movements, check that staff:

   - set a personal example, through pro-social modelling, in the way they carry out their duties
   - demonstrate an appropriate level of tolerance of normal adolescent behaviour
   - knock routinely before entering rooms
   - address children and young people courteously, for example using their first or preferred names
   - intervene in the way children and young people talk to and interact with each other.

   **Staff:** ask if senior management encourage positive engagement between staff and children and young people. Ask staff if they feel they have been appropriately trained for their role and if they feel confident in challenging how children and young people talk to and interact with each other.

   **Children and young people:** ask:

   - whether staff make requests of them politely
   - whether there is consistent behaviour/response from different staff in relation to the same issues.

   *Cross-reference with diversity, residential units and time out of cell inspectors.*

   **References**

   - RPJDL 81, 83, 84
   - ERJO 18, 128, 129

3. **Staff maintain regular informal contact with all children and young people.**

   **Evidence**

   **Observation:** check that:

   - children and young people have the time to speak to staff informally
   - staff eat with children and young people and associate with them freely
   - staff spend time with all children and young people and show no favouritism.

   **References**

   - RPJDL 81, 83, 84
   - ERJO 18, 128, 129
Staff: ask what their normal practice is during meal times and association.

Children and young people: ask how much time staff spend with them informally.

Cross-reference with diversity and time out of cell inspectors.

4. In establishments that operate a separate case worker/manager scheme (for training plans) these relationships complement rather than undermine those between children and young people and other staff.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: look for evidence of coordination of case management, including the contribution of different members of staff, including residential staff, advocates, social workers, healthcare staff and mental health workers.</td>
<td>RPJDL 81, 83, 84</td>
</tr>
<tr>
<td>ERJO 18, 132</td>
<td></td>
</tr>
</tbody>
</table>

Staff: ask:
- about the system of communication between different staff groups
- if there is ever any duplication or inconsistency.

Children and young people: ask if they are clear about the different roles of members of staff.

Cross-reference with training planning and personal officers inspectors.
A designated officer is the central point of contact and support for each child and young person. This officer takes responsibility for their care and wellbeing by engaging with the child or young person and their network regularly.

**Expectations**

1. **Within 24 hours of arrival in custody, every child/young person is:**
   - allocated a personal officer/key worker and introduced to them, as well as their named substitute personal officer
   - given information about the personal officer scheme, and what they can expect from their personal officer.

**Evidence**

**Questionnaire**

Documentation: check:
- that information distributed in reception or in first night information packs explains the support available from personal officers
- a sample of individual records for evidence of initial contact with personal officers.

Observation: check:
- the publicising of personal officers on residential units, e.g. white boards outside cells stating who the personal officer is and how they can be contacted
- that the role is explained through displays of posters and other information throughout the establishment.

**Staff:** ask how they ensure that they meet the young person they have been allocated responsibility for within 24 hours of arrival.

**Children and young people:** ask:
- whether they know who their personal officer is
- when they met him/her
- what they know about their role.

*Cross-reference with the first days in custody inspector.*
### Section 2 – environment and relationships

#### Personal officers

2. **Personal officers are proactive in maintaining at least weekly contact with the children and young people for whom they have responsibility to check on them generally and discuss their progress overall.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that:</td>
<td></td>
</tr>
<tr>
<td>• wing files contain regular (at least weekly) recordings of personal</td>
<td>RPJDL 12, 84</td>
</tr>
<tr>
<td>officer contact and that the entries are comprehensive, insightful</td>
<td></td>
</tr>
<tr>
<td>and balanced, and record significant events that might be</td>
<td>ERJO 18,</td>
</tr>
<tr>
<td>affecting the child or young person</td>
<td>50.3, 52.1,</td>
</tr>
<tr>
<td>• there is management oversight of personal officer work.</td>
<td>129.3</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• if they have formal key work sessions with young people to ensure that</td>
<td></td>
</tr>
<tr>
<td>they are coping</td>
<td></td>
</tr>
<tr>
<td>• how they advise and support young people regarding problematic</td>
<td></td>
</tr>
<tr>
<td>behaviour, complaints or other discipline matters</td>
<td></td>
</tr>
<tr>
<td>• if they regularly speak to children and young people during association</td>
<td></td>
</tr>
<tr>
<td>or at other times</td>
<td></td>
</tr>
<tr>
<td>• how requests from young people to see their personal officer are dealt</td>
<td></td>
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<tr>
<td>with</td>
<td></td>
</tr>
<tr>
<td>• managers how they deploy substitute personal officers and what</td>
<td></td>
</tr>
<tr>
<td>expectations are required of them</td>
<td></td>
</tr>
<tr>
<td>• substitute personal officers how often they meet with young people.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• how they make a request to see their personal officer</td>
<td></td>
</tr>
<tr>
<td>• how often personal officers check on their wellbeing and whether they</td>
<td></td>
</tr>
<tr>
<td>respond to any changes in their circumstances</td>
<td></td>
</tr>
<tr>
<td>• whether they have regular and timely access to their personal officer</td>
<td></td>
</tr>
<tr>
<td>or their substitute if they need to speak to them urgently</td>
<td></td>
</tr>
<tr>
<td>• how often personal officers discuss their care plan and their training</td>
<td></td>
</tr>
<tr>
<td>plan targets with them.</td>
<td></td>
</tr>
</tbody>
</table>
3. **Personal officers identify the individual needs of the children and young people they are responsible for and actively help them to access the services they require or respond to any matters they raise.**

**Evidence**

**Questionnaire**

**Documentation:** check care and training planning records. Check that all personal officers have undertaken JASP, child-protection, anti-bullying, suicide and self-harm and diversity training.

**Staff:** ask personal officers and their substitutes:
- what training they have been given to enable them to fulfil this role
- whether ASSET and all other background information (including care and training planning documentation) relating to the child or young person they are responsible for is available to them and if it is useful
- if they are aware of the contents of the care plan and training planning objectives of the young people they are responsible for
- if they discuss the young person’s care plan and their training plan targets with them to motivate and encourage them to achieve.

**Children and young people:** ask:
- who they would speak to if they had a problem
- how easy it is to speak to their personal officer
- about their relationship with their personal officer.

**References**

RPJDL 12, 84, 85  
ERJO 18, 50.3, 52.1, 129.3

4. **Personal officers make regular contact with other key staff in the establishment, and establish and maintain links with external agencies (especially YOT teams) and friends, families or carers.**

**Evidence**

**Documentation:** check that:
- wing files show evidence of liaison with YOT workers, parents and other outside agencies
- personal officers are required to make regular contact with parents/carers and others as part of their role
- the personal officer role is clearly coordinated with the role of other staff such as caseworkers and advocates, and healthcare staff.

**References**

RPJDL 84  
ERJO 14, 15
Section 2 – environment and relationships

Personal officers

Staff: ask personal officers:
• whether they routinely make use of sources of information, both within and external to the establishment, as part of their role
• how they cooperate with other support staff such as caseworkers and advocates
• if they have regular discussions with teachers within the establishment, YOT workers and parents/carers.

Children and young people: ask for an example of an occasion when their personal officer has worked with others to help them with a problem.

Families/carers and YOT workers: during visits or training planning meetings ask:
• if the personal officer is accessible and approachable
• if they are able to speak to the personal officer at times other than scheduled training planning meetings
• what contact they have had
• if they are permitted to go on the wings.

Cross-reference with residential, health services and training planning inspectors.

5. Personal officers attend all meetings and reviews relating to the care and management of the young people for whom they are responsible and share information appropriately.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: check:</td>
<td>RPJDL 84, 85</td>
</tr>
<tr>
<td>that personal officers advocate for children and young people at care plan and training planning meetings, adjudications and other meetings to support young people</td>
<td>ERJO 14, 15, 18</td>
</tr>
<tr>
<td>the extent of the advocacy and support provided by personal officers.</td>
<td></td>
</tr>
<tr>
<td>Documentation: check that:</td>
<td></td>
</tr>
<tr>
<td>arrangements are in place to enable personal officers to attend meetings</td>
<td></td>
</tr>
<tr>
<td>there is an information sharing policy that personal officers are aware of and adhere to</td>
<td></td>
</tr>
<tr>
<td>reviews of the rewards and sanctions scheme take place regularly.</td>
<td></td>
</tr>
</tbody>
</table>
Check the minutes of the following for attendance of personal officers:

- care plan meetings
- training planning meetings
- suicide and self-harm review meetings
- child protection case conference and strategy meetings.

**Staff:** ask:

- which meetings they contribute to and how often they are able to attend
- what help they give children and young people in preparing for the meetings
- if they encourage young people to complete consultation forms for care plan and training planning meetings and other forms of consultation and help them to prepare and make a useful contribution
- if the personal officer role and the advocate role are clear and check that there is no conflict of interest
- how personal officers and advocates work together in the best interests of young people.

**Children and young people:** ask:

- how often their personal officer attends their meetings
- what help they provide in preparing for the meetings.

*Cross-reference with safeguarding, child protection, suicide and self-harm, rewards and sanctions, behaviour management and training planning inspectors.*
The establishment provides a safe and secure environment, which promotes the welfare of all children and young people, protects them from all kinds of harm or neglect, and provides services that seek to ensure safe and effective care. The establishment is open to external agencies and independent scrutiny, including consultation with and involvement from children and young people and their families and the wider community.

Expectations

1. There is a comprehensive safeguarding children policy in place which has been agreed by the Local Safeguarding Children Board and is regularly jointly reviewed.

**Evidence**

**Documentation:** check whether the safeguarding policy:
- has been agreed with the LSCB
- includes arrangements for joint annual review
- effectively coordinates the relevant core policies of child protection, suicide and self-harm prevention, anti-bullying and violence reduction
- includes detailed guidance on information sharing.

**Staff:** ask staff in all areas:
- if they have a working knowledge of the safeguarding policy
- if they were given any staff guidance such as on information sharing
- how the policy is disseminated to staff
- what training they have had and how effective it was.

**References**

RPJDL 12, 28, 84, 87
ERJO 15, 52.1, 74.2, 88
2. **The implementation of the safeguarding children policy is efficiently monitored by a children’s safeguards committee. The committee includes a representative of the Local Safeguarding Children Board and senior staff from all departments in the establishment.**

<table>
<thead>
<tr>
<th>Documentation: check that:</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>• the safeguarding committee meets with sufficient frequency and regularity to adequately carry out its various monitoring functions and drive the safeguarding strategy</td>
<td>RPJDL 12, 28, 84, 87</td>
</tr>
<tr>
<td>• the safeguarding committee is chaired by a senior manager and the terms of reference, together with a clear and coherent structure of meetings, provide for the effective monitoring of all safeguarding areas</td>
<td>ERJO 15, 52.1, 74.2, 88</td>
</tr>
<tr>
<td>• all departments and relevant external statutory and voluntary agencies and partners (including escort contractors and the local LSCB) are routinely represented. Attendance is closely monitored and any absenteeism is acted on appropriately</td>
<td></td>
</tr>
<tr>
<td>• regular reports are submitted to the safeguarding committee by coordinators for each safeguarding area, setting out an analysis of each area which identifies patterns and trends. This includes bullying and others forms of violence, use of force, incidents of strip-searching, use of separation, incidents of suicide and self-harm (including the use of strip clothing) all injuries sustained by young people and child protection referrals and analysis of complaints</td>
<td></td>
</tr>
<tr>
<td>• the safeguarding committee has oversight of other related safeguarding areas such as public protection, staff recruitment, vetting and training and information sharing</td>
<td></td>
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<tr>
<td>• there is evidence in the minutes of the safeguarding committee meetings that all aspects of safeguarding are adequately addressed.</td>
<td></td>
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</tbody>
</table>

**Staff:** ask staff representatives and a representative of the LSCB if they value and support the work carried out by the safeguarding committee and are able to attend regularly.

*Cross-reference with behaviour management, resettlement, applications and complaints, diversity and health services inspectors.*
3. The governor is a member of the main committee of the Local Safeguarding Children Board (LSCB) and attends and contributes to this and there is appropriate representation at the relevant sub-committees.

Evidence

Documentation: check the minutes of the LSCB meetings to see whether:
- the governor regularly attends
- a senior member of staff attends the LSCB meetings when the governor is unable to attend
- issues relating to children in custody are adequately covered.

LSCB: speak to the chair of the LSCB. Check:
- whether children in custody are part of the LSCB agenda and the establishment is included in the local Children and Young People’s Plan
- what the level of understanding and involvement is in issues concerning children in the establishment
- what they think they contribute to the establishment’s safeguarding agenda
- how the LSCB evaluates effectiveness of safeguarding activity in the establishment
- what the arrangements are for working together to provide appropriate staff training
- what the arrangements are for working together to develop policy and practice
- what they think the governor contributes to the work of the LSCB.

Governor and safeguarding manager: speak to the governor and safeguarding manager. Ask:
- what the LSCB contributes to the establishment’s safeguarding agenda
- whether the arrangements for working together to provide appropriate staff training are satisfactory
- if the arrangements for working together to develop policy and practice are satisfactory
- which sub-committees are attended and who by.

References

RPJDL 12, 28, 84, 87
ERJO 15, 52.1, 74.2, 88.1
4. All staff who work with children and young people under the age of 18 are subject to up-to-date enhanced criminal records bureau (CRB) checks.

**Evidence**

**Documentation:** check:
- personnel records. Check that part-time and temporary staff and those from external agencies are also subject to CRB checks.
- that staff on split sites who are cross-deployed to work with under 18s have been subject to CRB checking.

*Cross-reference with the learning and skills inspector.*

**References**

RPJDL 87 (0)
ERJO 127.1, 128.1

5. Families and friends, and YOT workers and social workers, are seen as valuable sources of information to help keep children and young people safe. They are encouraged, through local arrangements, to provide sources of information which may help to identify those children and young people likely to be bullied, who have a history of violent or self-harming behaviour or who may struggle to cope.

**Evidence**

**Documentation:** check:
- what arrangements are in place to encourage and facilitate cooperation of family, friends, YOTs and other practitioners who are involved, such as social workers and foster carers, to identify those who are vulnerable
- wing files and training planning documentation for evidence of such information
- whether families and friends are encouraged to come forward if they feel their child is being victimised or bullied or if they are being bullied to bring drugs into an establishment.

**Observation:** check:
- that there are notices in the visits area and the visitors’ centre offering advice
- with some visiting families, friends, social workers or YOT workers to find out if they know about reporting procedures and whether they think that visits staff are approachable.

**References**

RPJDL 56, 81, 84
ERJO 14, 15, 51.1, 52, 74.2
Staff: ask:
• whether families or YOT workers or others have the opportunity after (or during) training planning meetings to speak to staff about any concerns. Check this with families and YOT workers if possible
• what other efforts are made to have good communication with families and YOTs to establish lines of communication
• if there is a confidential reporting line. If so test it for a response
• whether they have ever received information from families or YOT workers and what they did with this information.

Cross-reference with contact with the outside world and training planning inspectors.

6. Designated staff manage the recruitment, vetting, training, work and support of peer supporters (or equivalent), and children and young people are encouraged to volunteer as peer supporters whatever their status or sentence, subject to risk assessments. Peer supporters are supervised and supported.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>RPJDL 12, 84 ERJO 50, 52, 88</td>
</tr>
<tr>
<td>• the arrangements for support, recruitment and vetting policies</td>
<td></td>
</tr>
<tr>
<td>• equality of opportunity: whether there are any foreign national and minority ethnic peer supporters</td>
<td></td>
</tr>
<tr>
<td>• the safeguards around this system.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> speak with staff members who oversee the peer support scheme. Ask:</td>
<td></td>
</tr>
<tr>
<td>• how they ensure they identify the right people to act as peer supporters</td>
<td></td>
</tr>
<tr>
<td>• how young people who act as peer supporters are supported.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> speak to current and previous peer supporters. Ask if they are satisfied with the training and support they receive. Ask other children what their experiences are of the peer mentors.</td>
<td></td>
</tr>
</tbody>
</table>

Cross-reference with the diversity inspector.
Section 3 – duty of care  Safeguarding children

7. **Up-to-date ASSETs and vulnerability assessments are available so that staff are able to access all relevant information about the children and young people in their care in order to protect them and promote their welfare.**

   **Evidence**

   **References**

   **Documentation:** check:

   - that children and young people are subject to initial and ongoing vulnerability assessment
   - that there is a system to update ASSETs frequently and they are accessible to all staff
   - that entries in files show that staff have read the information to inform their own assessments
   - information from other sources, e.g. care plans for looked-after children, CAMHS reports, etc.

   **Staff:** check that staff use the information appropriately and they understand that children and young people can be identified as vulnerable at any stage of their custodial stay.

   *Cross-reference with first days in custody, residential units and learning and skills inspectors.*

8. **Any child or young person who has been identified as being particularly vulnerable, or with different needs, or who has been displaying difficult or challenging behaviour has an individual care plan to meet their assessed needs. The care plan is subject to at least weekly review by a multi-disciplinary team.**

   **Evidence**

   **References**

   **Documentation:** check that:

   - the safeguarding policy covers the identification and management of children and young people who have been identified as particularly vulnerable and children and young people in the care of or looked after by the local authority, or who are entitled to leaving care services, including their appropriate location
   - the policy provides for a designated social worker who is responsible for ensuring the needs of children and young people who are in the care of or looked after by the local authority, or who are entitled to leaving care services, and that the responsible authority is met
   - there is an effective multi-disciplinary system of care planning and evidence of information sharing between staff in different departments
Section 3 – duty of care

- Care plans are of good quality and there is a system of quality assurance
- Parents and carers are asked to contribute to the care plan
- Reviews are multi-disciplinary and involve all relevant staff, for example healthcare staff, education staff and social workers, and parents/carers, where appropriate. Reviews are timely and achieve good outcomes
- There are links between care planning and training planning.

Staff: speak to staff who carry out assessments, draw up care plans and chair and coordinate reviews. Ask:
- If they have been trained for the tasks they carry out
- If they have the resources and support they need to carry out the tasks properly.

Speak to the designated social worker for looked after children and ask:
- How looked-after children are identified and assessed
- How they ensure looked-after children receive their entitlements and that their needs are met
- Whether looked-after children’s statutory reviews take place as required
- How they ensure local authorities cooperate as required to support looked-after children while they are in custody.

Children and young people: speak to those who have care plans. Ask:
- If they felt involved in their own care planning
- If it is helping them.

Cross reference with diversity, bullying, child protection, residential units, health services, learning and skills and training planning inspectors.
Child protection

The establishment protects children and young people from maltreatment by adults or others in a position of power or authority.

Expectations

1. **There is a comprehensive child protection policy which has been agreed by the Local Safeguarding Children Board (LSCB). There are procedures in place to frequently review and revise the policy to take account of up-to-date guidance from the Prison Service, the Youth Justice Board and the Department for Children, Schools and Families.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>RPJDL 12, 28, 84, 87</td>
</tr>
<tr>
<td>• that there is a clear process for review and revision of the policy</td>
<td>ERJO 15, 52.1, 74.2, 88</td>
</tr>
<tr>
<td>• that the policy covers staff training requirements with regard to child protection</td>
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<tr>
<td>• that referral procedures and subsequent arrangements for investigation by the local authority are clearly set out in the policy, with appropriate staff guidance</td>
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<tr>
<td>• that the referral criteria take account of the specific needs of children and young people in custody</td>
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<tr>
<td>• that any allegation of maltreatment of a child or young person by a member of staff is referred to the local authority designated officer (LADO) whose role is clearly described</td>
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<tr>
<td>• for evidence of a robust ‘checks and balances’ system that ensures all allegations of maltreatment are quality assured by more than one senior person who has the expertise and independence to deal with the allegations objectively.</td>
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</table>

**Staff:** speak to the local authority designated officer and other appropriate staff. Ask:

- if all referrals are subject to independent scrutiny by an appropriately trained member of the safeguarding committee
- how referrals made by staff are assessed and decisions made about which will be passed to the local authority for investigation
- what training they have had to ensure accurate processing of referrals
- what the process is to ensure accurate processing of referrals
- if there is independent oversight of those filtered out.
Section 3 – duty of care

Ask staff on residential units and in other departments in the establishment:
- whether they are familiar with the child protection policy and relevant staff guidance and whether it is clear
- how the policy has been disseminated to staff
- what training they have had.

2. The establishment has a code of conduct informing staff of their duty to raise legitimate concerns about the conduct of any member of staff (a whistle-blowing policy) in relation to the treatment and management of children. Staff feel confident and safe to raise concerns.

<table>
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<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>RPJDL 87</td>
</tr>
<tr>
<td>• the details of the code of conduct and that the advice given to staff is comprehensive and sets out how they will be assisted in any follow up action</td>
<td>ERJO 127</td>
</tr>
<tr>
<td>• if any referrals have been made and, if so, how they were dealt with.</td>
<td>YOIR 67, 73</td>
</tr>
</tbody>
</table>

**Staff:** ask if they are aware of a code of conduct and what they would do if they had concerns about a member of staff in relation to their treatment of children.

*Cross-reference with the learning and skills inspector.*

3. Visitors and families/carers are informed of child protection procedures and are able to make a referral directly to the local authority if they are concerned that a child or young person is being, or has been, maltreated while in custody.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>RPJDL 78</td>
</tr>
<tr>
<td>• what information is provided to families and visitors about child protection procedures</td>
<td>ERJO 121, 122.3, 124</td>
</tr>
<tr>
<td>• if they given sufficient information in writing</td>
<td></td>
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<tr>
<td>• if it is clear that referrals can be made directly to the local authority’s child protection services and that the process for doing this is made clear.</td>
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</table>

**Observation:** check for posters around the prison in places which are accessible to visitors and families/carers, particularly in the visits room/centre.
Staff: ask if they would know how to advise parents about how to make a child protection referral if they had concerns, which includes direct notification to the local authority.

*Cross-reference with the contact with the outside world inspector.*

4. The child protection database records all child protection referrals, the outcomes of investigations and the stage that those that are yet to be completed have reached. It is held securely so that an appropriate level of confidentiality is maintained with access granted to the duty governor as required.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>RPJDL 19</td>
</tr>
<tr>
<td>• that the database is accurate and up to date and that the information is stored securely</td>
<td>ERJO 62.2</td>
</tr>
<tr>
<td>• for evidence that the database is subject to frequent independent quality assurance by a senior manager with child protection expertise and also subject to frequent independent scrutiny by the local authority</td>
<td></td>
</tr>
<tr>
<td>• that there is a system for checking and identifying situations that should have been child protection referrals, e.g. complaints, SIRs, use of force documentation, unexplained injuries and action taken. Check that the learning is disseminated.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask the child protection coordinator about the system for review of the database.</td>
<td></td>
</tr>
</tbody>
</table>

5. All staff are trained in child protection procedures and are knowledgeable about how to implement the establishment’s child protection procedures. Staff receive specific training on how to handle a disclosure of abuse made to them by a child or young person. Staff are offered ongoing supervision and support following their involvement in a disclosure.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>RPJDL 85, 87(o)</td>
</tr>
<tr>
<td>• training records – see what percentage of the workforce is trained in child protection</td>
<td>ERJO 88.2, 127, 129</td>
</tr>
<tr>
<td>• that child protection documentation is readily available in wing offices</td>
<td></td>
</tr>
<tr>
<td>• that the training was delivered by staff with adequate expertise and experience in child protection</td>
<td></td>
</tr>
<tr>
<td>• that training includes how to handle disclosures</td>
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</tbody>
</table>
• that there is an agreement with the LSCB that facilitates joint training and access to relevant local authority-run courses.

**Staff:** ask staff on residential units:

• if they are aware of their statutory duties regarding child protection

• if they are clear about what constitutes a child protection referral and how to use the procedures

• if they feel confident about matters relating to child protection, particularly handling disclosures

• if the training they received was adequate

• if supervision and support systems are in place to help them deal with ongoing concerns following a referral.

*Cross-reference with the learning and skills inspector.*

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6. **Children and young people are enabled to raise concerns with a range of people and services outside the establishment, such as a family member, the young person’s youth offending team or social worker.** They are also told about the help they can receive from independent advocacy services, external mentors and organisations such as Childline.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check that there are notices on residential units and around the establishment about the help available from external services.</td>
<td>RPJDL 78</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask what arrangements are in place to allow children and young people to contact trusted adults or external organisations outside normal scheduled contact periods at times of emergencies or crisis.</td>
<td>ERJO 52, 83</td>
</tr>
<tr>
<td><strong>Advocates and social worker:</strong> find out what their understanding of their role is in relation to child protection in the establishment. In particular check what their policy is in relation to confidentiality.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• if they are able to contact family members or YOT/social workers or other organisations by agreement with staff outside normal permitted contact times, in exceptional circumstances</td>
<td></td>
</tr>
<tr>
<td>• if they are aware of the external agencies that offer support and how to contact them.</td>
<td></td>
</tr>
</tbody>
</table>

*Cross-reference with residential units, contact with the outside world, learning and skills and first days in custody inspectors.*
7. Arrangements are in place to provide appropriate support from trained staff to children and young people during the investigation of allegations of abuse in custody or historic abuse. Staff are able to identify and anticipate the risk of future maltreatment.

**Evidence**

- **Documentation:** check that:
  - procedures for dealing with disclosures/allegations include support for young people and take account of the risk to other children in the community, e.g. siblings and the young person's own children, from the alleged perpetrator
  - staff training includes how to identify risk of future abuse following release and the need to make a child protection referral.

**Staff:** check that staff are clear about the procedures to support young people.

**Child protection coordinator:** ask:
- how procedures are implemented
- what arrangements are in place when there is suspicion that a child or young person will be at risk of abuse once they are released from the establishment into someone else's care
- how referrals are made to ensure that young people receive appropriate specialist support.

*Cross-reference with the applications and complaints inspector.*

8. The establishment provides a range of therapeutic, counselling and advice services, either directly or through external providers, which are available to children and young people who have suffered any form of abuse.

**Evidence**

- **Documentation:** check:
  - the services available and whether they are quality assured
  - how well the services are used and if they are well-advertised/promoted
  - if there is a waiting list and who can make referrals
  - that young people are able to refer themselves or others.

**Staff:** ask if they are aware of the range of services available and if they know how to use the referral system.

**Children and young people:** ask if they are aware of the range of services available and if they know how to access them.
Self-harm and suicide prevention

Children and young people at risk of self-harm or suicide are identified at an early stage, and supported through a care and support plan to meet their individual identified needs. Assessment of risk of self-harm and ongoing vulnerability is a continuous process which is informed by staff and children and young people. Children and young people who have self-harmed or been identified as at risk of self-harm are encouraged to participate in appropriate purposeful activity.

Expectations

1. **There is a comprehensive, up-to-date policy setting out how children and young people who have self-harmed or have been identified as at risk of self-harm will be cared for and this is overseen by the safeguarding committee.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that the policy:</td>
<td>R (98) 7, 58</td>
</tr>
<tr>
<td>• is informed by good quality, regular data collection and analysis and reports from the suicide and self-harm prevention coordinator</td>
<td>RPDJL 21(e), 27, 85</td>
</tr>
<tr>
<td>• forms part of the safeguarding policy and the operational and strategic management of suicide and self-harm prevention and that care is adequately overseen by the safeguarding committee</td>
<td>ERJO 52, 53.2, 70.2</td>
</tr>
<tr>
<td>• is regularly reviewed and revised to take account of analysis of relevant establishment data and national guidance</td>
<td></td>
</tr>
<tr>
<td>• includes clear guidance for staff</td>
<td></td>
</tr>
<tr>
<td>• observation procedures pay due regard to a child or young person’s need for privacy</td>
<td></td>
</tr>
<tr>
<td>• covers staff training requirements with regard to suicide and self-harm prevention and care</td>
<td></td>
</tr>
<tr>
<td>• covers cooperation in accordance with an established protocol between the Prison and Probation Ombudsman and investigators in a Part 8 review in the event of a death of a child in custody</td>
<td></td>
</tr>
<tr>
<td>• covers guidance in relation to investigations of self-inflicted deaths and the resultant action plans to ensure they are analysed to try to understand the underlying causes and trends and that appropriate action is taken.</td>
<td></td>
</tr>
</tbody>
</table>
Section 3 – duty of care

Staff: ask:
- about the extent of their working knowledge of the policy
- how the policy and relevant guidance have been disseminated to staff
- what training they have had and their understanding of suicide and self-harm.

Speak to the suicide and self-harm prevention coordinator about the role. Ask if he/she attends the safeguarding committee meetings regularly.

2. Children and young people are encouraged to express their anxieties in the knowledge that these will be taken seriously and acted upon and that they will be listened to and helped. The role of the personal officer in this respect is explicit.

Evidence

<table>
<thead>
<tr>
<th>Documentation: check:</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>• that attempts are made to deal with the underlying causes of the self-harming behaviour. This includes an interview with the child or young person following each incident, by a member of staff competent to undertake this sensitive task</td>
<td>RPJD L 85</td>
</tr>
<tr>
<td>• initial vulnerability assessments of children and young people who have been subject to self-harm monitoring. Check whether initial anxieties/vulnerabilities were identified and addressed</td>
<td>ERJO 52,</td>
</tr>
<tr>
<td>• training planning documentation to establish whether anxieties/vulnerabilities were identified and addressed within the training planning process.</td>
<td>70.2, 88.2,</td>
</tr>
<tr>
<td></td>
<td>88.4</td>
</tr>
</tbody>
</table>

Observation: check:
- what the system of informal support is and what resources are in place to support children and young people and prevent anxiety and distress
- whether trained counsellors are accessible to children and young people as part of multi-disciplinary teams to deliver educational, therapeutic and other health-promoting aspects of the regime.

Staff: ask:
- how children and young people who need some additional support, but are not deemed to be at risk of self-harm, are supported
- personal officers about their role in low level support and in relation to suicide and self-harm prevention
- staff who have interviewed young people following self-harm what training they have had to undertake the task
Section 3 – duty of care

- social work and in-house YOT staff about their role in supporting vulnerable children and young people who have self-harmed or are at risk of self-harm
- chaplains if they regularly see new arrivals and children and young people who struggle to cope for a variety of reasons, to offer pastoral support
- how it is ensured that information regarding potential vulnerability is passed to and from healthcare.

Children and young people: ask:
- if they feel confident about confiding in staff
- if they are satisfied with the levels of support from personal officers and other staff
- if staff ask them how they are getting on from time to time
- if there are others, e.g. social workers, chaplains or healthcare staff, who they can confide in.

Cross-reference with personal officers, first days in custody, faith, training planning and health services inspectors.

3. **Following an identified risk of self-harm or any incident of self-harm, a detailed multi-disciplinary care and support plan is prepared and procedures are put in place that are proportionate to the risk posed. The care and support plan is reviewed frequently.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check formal suicide and self-harm monitoring documentation to ensure that:</td>
<td>R (98) 7, 58</td>
</tr>
<tr>
<td>- initial assessments are carried out by trained assessors, include consideration of information about the child or young person contained in vulnerability assessments, ASSETs and pre-court/pre-sentence information, and are of good quality</td>
<td>RPJDL 27</td>
</tr>
<tr>
<td>- there is evidence that care and support plans are multi-disciplinary and include input from all relevant staff in the establishment and professionals from outside, e.g. health services staff and community mental health practitioners. The care plan relates to the young person’s particular difficulties (as described in the assessment), rather than following a standard format, and is proportionate to the level of harm or likely level of harm</td>
<td>ERJO 52, 53.2, 70.2</td>
</tr>
<tr>
<td>- all sources of help and support have been explored, including family and community involvement. There is unhindered access to sources of help, such as counsellors, YOT workers, family and friends, chaplaincy and other relevant agencies</td>
<td></td>
</tr>
<tr>
<td>- roles and responsibilities for delivering all aspects of the care plan are made explicit</td>
<td></td>
</tr>
</tbody>
</table>
• location is considered as part of the care plan – the presumption being that children and young people are managed on normal location and should be encouraged to engage in appropriate purposeful activities and receive continuity of care, irrespective of where they are located in the establishment
• staff monitoring is proportionate to the assessed risk and the need to support the child or young person
• children and young people are never placed in strip clothing as an alternative to constant observation by, and engagement with, staff
• observation comments are made regularly by staff. They are insightful and demonstrate that there has been genuine engagement with the young person
• night observations are not predictable
• reviews are multi-disciplinary and timely. Action points are reviewed and revised appropriately. YOT workers, family members and friends are invited and assisted to attend reviews if appropriate.

**Observation:** observe a sample of formal reviews. Check:
• whether the chair has the skills and expertise to bring everything together and to involve the child or young person
• if consideration is given to bringing in an external chair who has these skills when necessary
• if key staff are in attendance – in particular personal officers and those who have responsibilities to deliver aspects of the care plan
• if absentees are followed up.

**Staff:** ask:
• residential staff about their knowledge of the policy on formal monitoring procedures and support plans
• if reviews are organised so that relevant staff are able to attend
• how they ensure that vulnerable children and young people are cared for confidentially so that other children and young people are unaware
• staff who regularly chair formal reviews how they allocate responsibilities in relation to care plans and how they ensure that the care plan is adhered to.

*Cross-reference with personal officers, health services, learning and skills and faith inspectors.*
4. All incidents of self-harm or attempts to self-harm are routinely referred to the child protection coordinator.

**Evidence**

- incidents are properly documented and cross-referenced
- all policies clearly cross-reference between suicide and self-harm, anti-bullying and violence reduction and child protection
- there is monitoring by the safeguarding committee.

**Staff:** speak to anti-bullying/violence reduction and child protection coordinators to ascertain what action they take when they are notified that a child or young person has self-harmed.

Ask:
- if child protection issues are properly considered
- if good checks are made to see whether the incident of self-harm is related to bullying.

**References**

R (98) 7, 58  
RPJDL 84  
ERJO 52, 70.2, 74

5. All relevant information about children and young people at risk of self-harm or suicide is communicated to social workers, supervising officers and YOT workers and to families or carers unless there is a reason not to. The local authority is informed in the case of a child who is looked after by the authority or has received services as a child in need.

**Evidence**

- appropriate notifications have been made and that there is ongoing contact with social workers YOTs and families
- families/carers and relevant others are involved in the care plan assessments and reviews and, in the absence of input, that efforts made to involve families and relevant others are documented.

**Staff:** ask about ongoing contact with families.

**References**

R (98) 7, 58  
RPJDL 84  
ERJO 52, 70.2, 74
6. **All staff (including night staff) are fully trained in suicide prevention and understand contingency and intervention plans.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>R (98) 7, 58, 59</td>
</tr>
<tr>
<td>• training records and contingency plans</td>
<td>RPJDL 79, 80</td>
</tr>
<tr>
<td>• that training ensures children and young people identified as at risk of self-harm are not left alone until a risk assessment is complete.</td>
<td>ERJO 70, 74, 100, 101, 102</td>
</tr>
</tbody>
</table>

**Observation:** during the night visit, if the establishment does not have a first night centre or first night staff, check that night staff know where new receptions are located and that they have access to ASSET and other relevant documentation.

**Staff:** speak to staff across a range of disciplines. Ask:
- about the extent of their knowledge about self-harm procedures
- night staff if they have access to first aid kits and anti-ligature shears or equivalent and if there are dedicated first night officers looking after new arrivals. Ask about their role in caring for new arrivals and what they would do if a child was in distress or self-harming.

*Cross-reference with first days in custody and night visit inspectors.*

7. **A support plan in the community is instigated prior to release from custody for anyone who has recently been subject to self-harm monitoring procedures.**

<table>
<thead>
<tr>
<th>Evidence</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that:</td>
<td>R (98) 7, 58, 59</td>
</tr>
<tr>
<td>• community support plans include information contained in the last review or post-closure reviews where appropriate</td>
<td>RPJDL 79, 80</td>
</tr>
<tr>
<td>• support plans in the community involve YOTS, CAMHS and the voluntary sector as appropriate</td>
<td>ERJO 70, 74, 100, 101, 102</td>
</tr>
<tr>
<td>• ongoing support is discussed fully during the pre-release training planning meeting.</td>
<td>YOIR 43</td>
</tr>
</tbody>
</table>

**Staff:** speak to personal officers and resettlement staff.
- how young people were prepared for release
- if they were confident that the plans in place to continue to support them in the community were adequate.

**Children and young people:** speak to those who have recently been monitored and are about to be released. Ask if they feel that they have been adequately prepared and have good support plans in place for the release.

*Cross-reference with personal officer, training planning and resettlement pathways inspectors.*
Bullying

There is an establishment culture that promotes mutual respect among staff and children and young people. Children and young people feel safe from bullying and victimisation. Active and fair systems to prevent and respond to bullying behaviour are known to staff, children and young people and visitors. Children and young people’s views help to develop and promote a safe environment.

Expectations

1. **There is a comprehensive, up-to-date policy setting out how children and young people who bully or intimidate others, and those who have been affected, will be managed and cared for. This is linked to the behaviour management policy and overseen by the safeguarding committee.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that the policy:</td>
<td>R (98) 7, 64</td>
</tr>
<tr>
<td>• is informed by good quality, regular data collection and analysis (including an analysis of unexplained injuries, fights, assaults, threats, etc) and reports from the bullying/violence reduction coordinator</td>
<td>RPJDL 84</td>
</tr>
<tr>
<td>• forms part of the safeguarding policy and the operational and strategic management of bullying is adequately overseen by the safeguarding committee</td>
<td>ERJO 52.1, 88</td>
</tr>
<tr>
<td>• is informed by systematic and frequent consultation with children and young people across the establishment. In particular the policy should acknowledge bullying hotspots</td>
<td></td>
</tr>
<tr>
<td>• sets out effective interventions, including mediation, reparation and restorative justice</td>
<td></td>
</tr>
<tr>
<td>• is regularly reviewed and revised to take account of analysis of relevant establishment data, including bullying surveys</td>
<td></td>
</tr>
<tr>
<td>• includes clear guidance for staff</td>
<td></td>
</tr>
<tr>
<td>• covers staff training requirements, with a particular emphasis on conflict resolution, adolescent behaviour and the relationship between bullying and victimisation.</td>
<td></td>
</tr>
</tbody>
</table>
Staff: ask:

- about the extent of their working knowledge of the policy
- how the policy and relevant guidance have been disseminated to staff
- what training they have had.

_Cross-reference with the behaviour management inspector._

2. All children and young people, staff and visitors understand that all forms of bullying and intimidating behaviour are unacceptable and are aware of the consequences of such behaviour. Unacceptable behaviour is challenged consistently and not condoned.

<table>
<thead>
<tr>
<th>Evidence</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>R (98) 7, 64</td>
</tr>
<tr>
<td>- how the overall rules of the establishment are explained to children and young people</td>
<td>RPJDL 28</td>
</tr>
<tr>
<td>- what information is distributed with induction packs. Check that bullying and intimidation is clearly defined and that information states how young people will be protected from bullying and reassures those who may be anxious that they will be bullied.</td>
<td>ERJO 52.1, 88</td>
</tr>
</tbody>
</table>

**Observation:** check that information is displayed in the reception area, residential units and other communal areas, the visits area and visitors’ centre in a format that children and young people are able to understand, setting out how the establishment deals with bullying and how they will be protected from it.

**Staff:** ask:

- if they feel confident to challenge inappropriate behaviour by young people but also other staff and visitors
- what relevant training they have had and how effective it was
- if they can demonstrate an awareness of both direct and indirect forms of bullying and intimidation
- whether there are staff anti-bullying wing representatives or champions with responsibility for this area. If so, ask them to describe their role.

**Children and young people:** ask:

- if they are confident to alert staff to any incident of bullying in the knowledge that they will be listened to, taken seriously and action will be taken
- if unacceptable behaviour is usually challenged.

_Cross-reference with first days in custody, residential units, learning and skills, contact with the outside world and behaviour management inspectors._
3. **Children and young people are consulted and involved in determining how their lives in the establishment can be made safer, how bullying is confronted, how conflicts can be resolved and what sanctions are appropriate.**

### Evidence

**Documentation:** Check:
- for records of consultation in the last six months
- that children and young people are involved in defining what bullying is to them and how it should be tackled
- that an annual confidential survey of all children and young people about bullying is undertaken
- minutes of wing consultative committee meetings and whether safety, and bullying and victimisation in particular, are standing agenda items.

**Staff:** Ask how young people are encouraged to contribute to improving safety and dealing with bullying, and whether advocates play a role in this.

**Children and young people:** Ask:
- whether they have completed a safety or bullying survey and, if so, whether they had any feedback about the results and what action was intended
- if they feel involved in how safety issues are managed; in particular, if they have input into discussions about bullying
- if there are wing representatives or champions and, if so, whether they consult with everyone on the wing to make sure that they represent all views
- wing representatives about their role and whether they are supported.

*Cross-reference with residential units inspectors.*

### References

- R (98) 7, 64
- RPJDL 84
- ERJO 52.1, 50.3, 88

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4. **Children and young people are able to tell staff they are feeling unsafe without fear of further intimidation.**

### Evidence

**Questionnaire**

**Documentation:** Check:
- that the number of reported incidents of bullying is consistent with the establishment’s survey and the questionnaire findings
- whether the policy includes protecting victims following reports of bullying

### References

- R (98) 7, 64
- RPJDL 84
- ERJO 52.1, 50.3, 88

**HMIP: Expectations**
• the minutes of committees or groups for discussions about bullying
• that children and young people have unhindered access to support provided by accredited external organisations and independent advocates
• that there is a robust system of care planning that ensures that children and young people who report bullying are protected from further intimidation or victimisation.

Observation: look for notices publicising ways to report bullying.

Staff: ask:
• how they ensure that young people fully understand what to do if they are bullied and that they have confidence to speak out
• the facilitators of committees or groups and advocates how they ensure that issues concerning bullying are raised.

Children and young people: ask:
• whether staff speak to them regularly about bullying (particularly personal officers) so that they feel able to approach staff freely
• if they are confident that they could report bullying without fear of further victimisation and if they can do this confidentially
• about their views of communication systems, including any consultative committees
• if young people are encouraged to participate in committees or groups for regular discussion
• if bullying is discussed in training planning meetings.

Speak to young people who have reported bullying and ask whether they were satisfied with the way in which it was dealt.

Cross-reference with residential units, personal officers, applications and complaints and training planning inspectors.

5. Allegations of bullying behaviour are taken seriously, treated consistently and fairly and investigated thoroughly.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>R (98) 7, 64</td>
</tr>
<tr>
<td>Documentation:</td>
<td>ERJO 50.3, 52.1, 88</td>
</tr>
<tr>
<td>check:</td>
<td></td>
</tr>
<tr>
<td>• records of recent bullying incidents</td>
<td></td>
</tr>
<tr>
<td>• that investigations were thorough, that all potential witnesses were interviewed and that the young person who made the allegation was kept fully informed</td>
<td></td>
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<tr>
<td>• that training plans cover any reported incidents of bullying involving particular children or young people</td>
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</tbody>
</table>
• that a child protection referral is made in cases of serious bullying.

Staff: ask staff how they deal with bullying and if mediation is considered and used when appropriate.

Children and young people: ask:
• if procedures are implemented as stated and young people who report bullying receive an immediate response
• if the child or young person who reported the bullying is kept informed
• a sample of children and young people who have been the subject of anti-bullying investigations about their view of the process
• young people who have been victims of bullying if they were protected and kept informed.

Cross-reference with health services and training planning

6. Opportunities for bullying are minimised through a range of measures. Effective supervision by staff provides protection at all times for children and young people in all areas of the establishment.

Evidence

<table>
<thead>
<tr>
<th>Questionnaire</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation:</td>
<td>R (98) 7, 64</td>
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<td></td>
<td>ERJO 88</td>
</tr>
</tbody>
</table>

• that good dynamic security ensures that staff are aware of actual and potential bullying situations
• the level of shouting from windows, management of queues, all movements and during exercise, distribution of canteen, education, gym (including showers), work or workshops, supervision near showers and during association, etc
• that staff lead by example in the way they treat their colleagues and children and young people
• that valuable property is routinely security marked before it is issued.

Documentation: check records of incidents (including levels of fights, assaults, records of daily incident reports to the Youth Justice Board) and records of serious injuries in the last three months.

Staff: ask if:
• they are aware of the messages from bullying surveys, recognised hotspots, etc, and what action they take to supervise children and young people at problematic times and in areas which are difficult to observe
Section 3 – duty of care

- they understand that their duty is to foster a safe environment by confronting unacceptable behaviour quickly and fairly.

Children and young people: ask if:
- there are any particular areas where they feel unsafe or where there are sometimes disruptions or fights
- they think that staff are aware of hotspot areas and respond appropriately.

Cross-reference with residential units, PE, learning and skills, time out of cell, shop and catering inspectors.

7. Children and young people who have been bullied have individual care plans that ensure they are made safe and protected from further victimisation.

<table>
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<tr>
<th>Evidence</th>
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<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
</tr>
<tr>
<td>• records of bullying incidents and cross-reference with care plans and training plans for those who have been bullied</td>
</tr>
<tr>
<td>• that care plans are of good quality; are based on consultation with the young person and a multi-disciplinary assessment of the young person’s individual needs; identify specific actions to protect the young person in the immediate and longer term; and are frequently reviewed and revised. YOTs and parents/carers are involved in the care planning process</td>
</tr>
<tr>
<td>• that there is a presumption that the young person will remain on normal location unless it is not in their best interests to do so.</td>
</tr>
</tbody>
</table>

| Observation: check: |
| • that young people who have reported bullying are attending education and generally accessing a full regime |
| • the numbers of young people who have changed location |
| • meal times and evening association and ask staff if they can identify all young people who have chosen not to eat or come out of their cells and if they are aware of the reasons given for staying in cell. |

Staff: speak to staff involved in care planning, particularly personal officers. Ask:
- if they are clear about the process and their respective individual roles and responsibilities
- what relevant training they have had and whether it included conflict resolution.

Children and young people: speak to young people who have been bullied. Ask for their views of the care planning process and if they were protected and kept informed.

Cross-reference with personal officers, learning and skills, PE, time out of cell and training planning inspectors.
8. Children and young people who have been identified as bullies have individual care plans that ensure their behaviour is addressed. Approaches such as mediation and restorative justice are used as part of a range of interventions.

**Evidence**

**References**

**Documentation:** check:
- the records of bullying incidents and cross-reference with care plans and training plans for those who have bullied
- that care plans are of good quality; are based on consultation with the young person and a multi-disciplinary assessment of the young person's individual needs; identify specific actions that target the problematic behaviour and underlying causes; and are frequently reviewed and revised. YOTs and parents/carers are involved in the care planning process
- that there is a presumption that the young person will be managed on normal location unless it is not safe to do so.

**Staff:** speak to staff involved in care planning, particularly personal officers. Ask:
- if they are clear about the process and their respective individual roles and responsibilities
- what relevant training they have had
- if it included conflict resolution
- how they use restorative justice, mediation and reparation to address bullying behaviour.

**Children and young people:** speak to young people who have bullied. Ask their views of the care planning process and if it helped them to change their behaviour.

*Cross-reference with behaviour management, personal officers and training planning inspectors.*
All establishments should be aware of and meet the specific needs of minority groups and implement distinct policies or action plans, which aim to represent their views, meet their needs and offer peer support to ensure all children and young people have equal access to all facilities. Multiple diversity needs should be recognised and met.

Expectations

1. The establishment’s diversity policy outlines how the diverse needs of children and young people will be met and is effectively managed by a multi-disciplinary diversity management committee. The diversity management committee, or equivalent, coordinates activities, including those by any relevant committee, under each aspect of diversity, namely:
   - race equality
   - nationality
   - disability
   - religion
   - gender, including transgender/transsexual issues
   - sexual orientation.

**Evidence**

**Documentation:** check that:
- the committee is chaired by the governor or deputy governor and is attended by other senior managers
- meetings are held frequently enough to be effective and include all functional managers, children and young people who are wing and diversity representatives, the catering manager, librarian, education manager, chaplaincy, a health services representative and external community representatives
- action plans covering all diversity strands are in place, implemented and reviewed through quarterly reports submitted to the committee, e.g. on race, nationality, etc.

**Staff:** ask:
- about their knowledge of the diversity policy, diversity management committee and the individual diversity committees, if in place, and their impact
- what their level of involvement is in the management of diversity
- how they support children and young people to ensure their involvement.

**References**

<table>
<thead>
<tr>
<th>Documentation: check that:</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>• the committee is chaired by the governor or deputy governor and is attended by other senior managers</td>
<td>RRAA</td>
</tr>
<tr>
<td>• meetings are held frequently enough to be effective and include all functional managers, children and young people who are wing and diversity representatives, the catering manager, librarian, education manager, chaplaincy, a health services representative and external community representatives</td>
<td>DDA</td>
</tr>
<tr>
<td>• action plans covering all diversity strands are in place, implemented and reviewed through quarterly reports submitted to the committee, e.g. on race, nationality, etc.</td>
<td>CERD 2, DEDRB 1</td>
</tr>
<tr>
<td></td>
<td>CRC 1</td>
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<td></td>
<td>RPDJL 4, 81, 84</td>
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<td></td>
<td>ERJO 11, 128.3, 129</td>
</tr>
</tbody>
</table>
Section 3 – duty of care

Diversity: race equality

Children and young people: ask diversity representatives:
• about the support and training provided
• about their input to the diversity policy and diversity management committee
• whether their views are listened to and addressed.

*Cross-reference with health services, learning and skills, catering and faith and religious activity inspectors.*

Expectations – race equality

2. The governor\(^1\) promotes race equality.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Governor: ask:</td>
<td>RRAA</td>
</tr>
<tr>
<td>• if s/he is aware of the Race Review 2008 and how the findings relate to his/her prison</td>
<td>CERD 2, 5(a), 7</td>
</tr>
<tr>
<td>• him/her to describe the current state of race equality in the prison, and the benefits of race equality</td>
<td></td>
</tr>
<tr>
<td>• if s/he takes immediate and appropriate action in response to racist incidents, giving sufficient time to the race equality officer (REO) to exercise his/her duties effectively</td>
<td></td>
</tr>
<tr>
<td>• about his/her priorities and recent actions to promote race equality.</td>
<td></td>
</tr>
<tr>
<td>Staff: ask:</td>
<td></td>
</tr>
<tr>
<td>• them to describe the benefits of racial equality</td>
<td></td>
</tr>
<tr>
<td>• how they think the governor promotes race equality.</td>
<td></td>
</tr>
</tbody>
</table>

\(^1\) Or director in a privately managed prison
3. Race equality is effectively managed by a race equality action team (REAT), or equivalent, chaired by the governor or deputy governor and including other senior managers, children and young people’s representatives and external community representatives.

**Evidence**

**Questionnaire:** perception of victimisation due to race/ethnic origin.

**Documentation:** check that:
- meetings are held frequently enough to be effective and include all functional managers, wing and diversity representatives, the catering manager, librarian, education manager, chaplaincy, a health services representative and an external community representative
- a REAP (race equality action plan) is in place and is monitored by the REAT and quarterly reports are given to the SMT
- all race issues are dealt with, including those relating to Travellers and Gypsies.

**Staff:** ask the REO, or equivalent:
- about the level of senior management support s/he receives
- how s/he supports children and young people to ensure that they are able to make a useful contribution.

**Children and young people:** speak to diversity representatives and ask about the support provided, their input to the REAT/DMT and whether their views are listened to and addressed. Speak to members of the Traveller and Gypsy communities.

*Cross-reference with health services, learning and skills, catering and faith inspectors.*

**References**

CERD 2, 5(a), 7
RPJDL 4, 84
ERJO 15

4. All staff in all units are trained in race equality, which enables staff to understand and respond appropriately to race and cultural issues, as well as to positively promote race equality.

**Evidence**

**Questionnaire**

**Documentation:** check:
- training figures for staff and if there is any training for children and young people
- training materials, if available.

**Observation:** check that staff and managers provide a good model.

**References**

CERD 2, 5(a), 7
RPJDL 85
ERJO 129
Section 3 – duty of care

Diversity: race equality

Staff: ask staff and managers:
• why they think it’s important that they take account of race issues and what they see as the benefits to both children and young people and staff
• how race equality impacts on their work and their understanding of the different race equality processes, e.g. impact assessment, monitoring, consultation
• what issues they find difficult to resolve and whether they have the appropriate support and training to help them do so
• what they believe constitutes a racist incident and how they would respond
• whether staff appreciate that children and young people of different racial, ethnic and religious groups, including Travellers and Gypsies, have differential experiences of prison and how they engage with this.

Ask the REO, or equivalent, what proportion of the REAT are trained in race equality.

Cross-reference with health services and learning and skills inspectors.

5. Staff attempt to understand and actively engage with all racial and ethnic groups.

Evidence

Questionnaire

Documentation: check wing history sheets and applications for evidence that staff are responsive to all children and young people.

Observation: observe staff interaction with children and young people of different racial and ethnic backgrounds, including Travellers and Gypsies. Observe use of language by staff and the willingness of children and young people from different racial and ethnic groups to approach staff.

Staff: speak to staff and the REO. Ask:
• if they are aware of cultural differences in gesture, body language and expression of emotion and how they manage these differences
• if they understand the significance of unconscious bias.

Children and young people: ask children and young people from different racial and ethnic backgrounds how staff respond to them.

References

RRAA
CERD 7
RPJDL 83
ERJO 88.1, 88.3
6. **Inappropriate language or conduct is challenged.**

**Evidence**
- **Documentation:** check the RIRF log for evidence of inappropriate language being reported by staff and the action taken.
- **Observation:** check the language used by staff and children and young people, in particular the names used to address black and minority ethnic children and young people and staff.
- **Staff:** ask staff how they would define inappropriate language/conduct and ask for examples.
- **Children and young people:** check with groups of black and minority ethnic children and young people, including Travellers and Gypsies, how they and their visitors are treated by staff and other children and young people and how they respond to this.

*Cross-reference with staff-young people relationships and contact with the outside world inspectors.*

**References**
- RRAA
- CERD 2
- RPJDL 83
- ERJO 88.2, 88.4, 94.1

7. **A committed and trained REO is appointed with sufficient time and support to effectively manage race equality.**

**Evidence**
- **Staff:** ask the REO and REO assistant(s):
  - about their duties
  - if they work to a race equality manager who is a member of the SMT, particularly if they are of a junior grade
  - if they have sufficient time to do the job properly
  - what support they are given and what support they need to do the job
  - if there are any difficulties that prevent them from doing the job better
  - if the REO is encouraged to become a member or associate member of RESPECT.

**References**
- RRAA
- CERD 7
8. **Children and young people know the identity of the REO and race equality representatives, and are easily able to contact them.**

**Evidence**

**Observation:** check for photographic displays with details of how to contact the REO and race equality representatives and that they are up to date.

**Staff:** ask staff who the REO and race representatives are.

**Children and young people:** ask:
- who the REO and race representatives are, what they do and how easy they are to contact
- if they feel confident the representatives would be able to represent their views
- if they feel the REO can actually assist them with their concerns.

<table>
<thead>
<tr>
<th>References</th>
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<tbody>
<tr>
<td>RRAA</td>
</tr>
<tr>
<td>CERD 2, 7</td>
</tr>
<tr>
<td>RPJDL 25</td>
</tr>
</tbody>
</table>

9. **The REO takes action to identify and minimise racist bullying.**

**Evidence**

**Documentation:** check that any evidence of racial bias in the reporting of, or responses to, violence or bullying is raised within the REAT/DMT. Check the outcomes.

**Staff:** speak to the representative for race equality (e.g. the REO) about his/her role in the violence reduction strategy. Check that:
- s/he monitors violent incidents for any racial element and what action s/he takes
- the strategy has been impact assessed and does not disadvantage any racial group.

**Children and young people:** ask those who have been affected by racist bullying if they thought it was appropriately handled.

*Cross-reference with the bullying inspector.*

<table>
<thead>
<tr>
<th>References</th>
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<tbody>
<tr>
<td>RRAA</td>
</tr>
<tr>
<td>CERD 2, 7</td>
</tr>
<tr>
<td>ERJO 88</td>
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</tbody>
</table>
10. **Equality of treatment is effectively monitored by ethnicity, the results are communicated in an easy-to-understand format to children and young people and staff and appropriate action is taken where necessary.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>RRAA</td>
</tr>
<tr>
<td>• that the black and minority ethnic population, including Travellers and Gypsies, is entered accurately in monthly monitoring</td>
<td>CERD 7</td>
</tr>
<tr>
<td>• that monthly monitoring is undertaken of those activities that take place with sufficient numbers each month for the range setting analysis to be valid</td>
<td>RPJDL 4 ERJO 13, 50.3</td>
</tr>
<tr>
<td>• that local monitoring (blank) fields are used to monitor aspects of particular interest to the establishment beyond mandatory areas. Check the areas identified as a priority and whether monitoring is taking place</td>
<td></td>
</tr>
<tr>
<td>• that quarterly, six monthly or annual analysis takes place of less frequent activities or of activities with small numbers</td>
<td></td>
</tr>
<tr>
<td>• that analysis of the distribution of racial groups is also carried out periodically, particularly in relation to the use of force, adjudications, segregation, use of unfurnished accommodation, rewards and sanctions, ROTL and HDC, work allocation and of incidents of self-harm. Referrals to primary and secondary health services are also monitored</td>
<td></td>
</tr>
<tr>
<td>• that figures are considered with regard to all ethnic groups, not just using the white/black and minority ethnic comparison</td>
<td></td>
</tr>
<tr>
<td>• that the REAT/DMT are aware of the differential results for race equality in the MQPL survey</td>
<td></td>
</tr>
<tr>
<td>• for action on the basis of the monitoring.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask if they are aware of the results of ethnic monitoring and the action to be taken.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• if the results of ethnic monitoring are displayed in an easy-to-understand format in accommodation areas</td>
<td></td>
</tr>
<tr>
<td>• if there is a member of staff or young person representative they can speak to if they have any questions or concerns about the information.</td>
<td></td>
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</tbody>
</table>

*Cross-reference with all inspectors.*
Managing racist incidents

11. **There is an effective system in place for reporting and dealing with racist incidents and external validation of racist incident investigations.**

**Documentation:** check:

- the quality of RIRF investigations and that investigating officers are trained. Check specifically for:
  - polite and timely responses to children and young people
  - a response that deals with the child or young person’s concern and adopts a problem-solving approach
  - an outcome that is based on the balance of probabilities rather than the burden of proof
  - the protection of the complainant’s anonymity as far as is possible, ensuring the child or young person is made aware of the limits to this
  - clarity about the process, including highlighting when external scrutiny is used
  - the use of different languages and formats to aid understanding

- that RIRF investigations are subject to quality assurance, e.g. overseen by an external organisation, are timely, that witnesses are followed up if they have moved, that a complaint is pursued to its conclusion even if the complainant has moved, and that the results are always communicated to the complainant

- that initial stage investigations take into account that racism can be unintentional

- that the investigation of complaints raised by staff defending themselves against an accusation of racism goes beyond establishing the original reason for the accusation

- that action is taken against staff found guilty of racist misconduct.

Check the racist incident log for any trends and track a sample through wing files. Check what proportion of the complaints made are upheld and what proportion are upheld but without the racist aspect.

**Staff:** ask the REO for his/her views on the effectiveness of the system. Speak to advocates about their role in assisting children and young people who have learning difficulties/disabilities or whose first language is not English with complaints about racist incidents.
Section 3 – duty of care

Diversity: race equality

Children and young people: ask:
- if they feel confident in making a race complaint without any negative repercussions
- whether forms are freely available and whether help is available for making complaints. Check their understanding of the role of advocates in this regard
- if there are repercussions after submitting a form – follow up individual cases.
Also talk to Travellers and Gypsies about their experiences.

12. Interventions for challenging racism and protecting victims of racist bullying are in place.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check:</td>
<td>CERD 2</td>
</tr>
<tr>
<td>the outcome of a sample of RIRFs</td>
<td>RPJDL 75, 77, 78</td>
</tr>
<tr>
<td>what remedial action is taken when staff are found guilty of racist misconduct</td>
<td>ERJO 121, 122</td>
</tr>
<tr>
<td>what protections are in place for victims and those who report racist incidents – check for evidence that they are effective.</td>
<td></td>
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</tbody>
</table>

Staff: ask REOs, or equivalent:
- what interventions are available for children and young people found guilty of racist misconduct, e.g. diversity training programmes, and what support is available for victims
- whether children and young people found guilty of racist misconduct are subject to ongoing monitoring by staff.
Ask staff what protections are in place for victims or those who report racist incidents.

Children and young people: ask victims who are subject to protections whether these have been effective.

Cross-reference with the bullying inspector.
Race equality duty

13. **Impact assessments of all locally implemented policies and functions are undertaken to assess their relevance to race equality.**

   **Evidence**
   
   **Documentation:** check:
   - impact assessments and ensure they take into account all races, including Travellers and Gypsies
   - what remedial action has been undertaken if problems have been identified.

   **Staff:** speak to the head of the REAT/DMT about the progress in and understanding of impact assessments and the correlation with ethnic monitoring.

   **References**
   
   CERD 2

14. **A process is in place to identify any child or young person convicted of a current or previous racially aggravated offence, or of an incident of racist bullying in prison, and to draw the attention of staff to these individuals.**

   **Evidence**
   
   **Documentation:** check that cell sharing risk forms are adequately completed and based on sufficient and relevant information.

   **Observation:** check:
   - that such action has been taken
   - for photos of these children and young people in staff-only areas and on the prison intranet.

   **Staff:** speak to the REO, or equivalent, as well as staff responsible for public protection, reception, first night and admin procedures and ask whether this is current practice.

   **Cross-reference with first days in custody and resettlement inspectors.**

   **References**
   
   CERD 2
   RPJDL 23, 85
   ERJO 62.2 f, 88.2

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*HMIP: Expectations*
15. **There is frequent and effective involvement from and communication with black and minority ethnic children and young people.**

**Evidence**

**Documentation:** check:

- that involvement occurs in areas such as catering, canteen, use of force, adjudications, complaints, good order and discipline, and incentives and earned privileges as part of impact assessment
- for evidence of involvement and communication via forums, through groups as well as surveys.

**Staff:** speak to the head of REAT/DMT about how this is organised. Ask:

- how diversity representatives are able to communicate with and represent other black and minority ethnic children and young people, including Travellers and Gypsies
- whether any race forums have taken place
- whether diversity representatives are involved in impact assessments
- whether advocates have a role in these arrangements.

**Children and young people:** ask:

- race equality representatives whether they are supported, given facilities to operate and replaced in a timely fashion
- how children and young people are involved and whether they feel able to raise concerns with staff.

**References**

CERD 2
RPJD 12
ERJO 13, 50.3, 88

16. **Regular events are held to celebrate racial, ethnic and cultural diversity and external organisations are invited to take part.**

**Evidence**

**Documentation:** check the frequency and focus of events – ensure they are reflective of the population.

**Staff:** ask the REO, or equivalent, about:

- the celebration of black history month or other events and the level of support provided in the prison
- the level of involvement of outside organisations.

**Staff/children and young people:** ask about their experiences of events to celebrate cultural diversity.

**References**

CERD 7
RPJD 12
ERJO 76
17. Displays throughout all areas of the establishment portray images that reflect the racial diversity of the population and the local community.

Evidence
Observation: check all units and areas, including the visits area.
Cross-reference with residential units and contact with the outside world inspectors.

References
CERD 7
RPDLJ 12
ERJO 76

18. The governor ensures his/her general duty under the RR(A)A 2000 is discharged by any contractors who offer services directly to young people or by any employer of young people who work out on temporary licence.

Evidence
Documentation: check that pre-employment checks have enquired about race equality policies that cover the avoidance of discrimination and the promotion of good race equality.

References
RRAA 2000
ERJO 131.3

Expectations – foreign nationals

19. There is a coherent and distinct foreign nationals policy or action plan with a coordinator who is fully conversant with the needs of children and young people who are foreign nationals and is supported by the senior management team.

Evidence
Documentation: check that:
- the policy/action plan gives attention to the primary problems of family contact, immigration and language and reflects local needs assessments, such as the provision of toiletries, the ability to send money to and receive money from family, childcare, allocation to employment, etc.
- actions are implemented and monitored with progress against agreed objectives recorded and evaluated.

References
DRM 4
DHRIN 5 (c)
Beijing 22, 30
RPDLJ 4, 84
ERJO 104, 105
Section 3 – duty of care

Foreign nationals

Staff: ask:
- whether the coordinator has a clear appreciation of the main problems facing foreign nationals, and is committed to the role
- what his/her contribution to the policy/action plan is
- if s/he has attended any training or courses and whether s/he feels confident and competent to carry out his/her role
- if s/he attends race equality/diversity committee meetings
- how much time is allocated to the role and if there are barriers to carrying out the role.

20. A multi-disciplinary foreign nationals committee, or equivalent, is in place to ensure that the needs of foreign national children and young people are represented, and that the foreign nationals policy/action plan is fully implemented.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
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</table>
| Documentation: check: | DRM 4  
DHRIN 5 (c)  
Beijing 22, 30  
RPJDL 4, 84  
ERJO 104, 105 |
| - meeting minutes and see who attends on a regular basis  |  
- that the chair is a senior governor, especially in prisons with high numbers of foreign nationals  |  
- that particular issues of concern are discussed at the meetings and actions are put in place and followed up. |
| Staff: speak to members of the committee and the foreign nationals coordinator. |

21. Staff are aware of the distinct needs of children and young people who are foreign nationals.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| Staff: ask: | Beijing 22,  
129  
ERJO 104.1 |
| - about the content of training and whether it covers diversity of experience among different foreign nationals, e.g. according to nationality, ethnicity, place of residency and religion  |  
- if they felt the training was useful and if it enables them to conduct their job properly. |
| Children and young people: ask foreign nationals if they feel their needs are taken into account and met by staff. |
22. **Children and young people have access to accredited translation and interpreting services wherever matters of accuracy and/or confidentiality are a factor.**

**Evidence**
- the frequency of the use of the telephone interpretation service
- that health leaflets are age-appropriate and available in different languages.

**References**
- DRM 5 (c)
- DHRIN 4
- RPJDL 6
- ERJO 106.3

**Staff:** ask:
- what translation and interpretation services are available, when they would be used and by whom
- if they are used by health services and during care and support plan reviews.

**Children and young people:** ask if they know how to access translation services, and their entitlements.

*Cross-reference with the health services inspector.*

23. **Regular liaison takes place with the UK Border Agency and all young people are informed as early as possible in sentence whether they are being considered for removal or deportation.**

**Evidence**
- committee meeting minutes for evidence of UKBA consultation
- wing history files for any detainees held in the prison
- that YOT workers are fully involved and kept up to date with issues concerning the young person’s immigration status
- that training planning reviews consider the specific needs of the young person in relation to their immigration status and that appropriate action is taken.

**References**
- RPJDL 14
- ERJO 15, 104

**Staff:** ask the foreign nationals coordinator about arrangements and if contact has also been made with relevant embassies or consulates. Ask about liaison with YOTs.
Section 3 – duty of care

Foreign nationals

24. Administrative staff responsible for managing immigration paperwork and liaison are trained and provided with guidance.

Evidence

Staff: speak to administrative staff to ascertain their knowledge and level of training.

References

RPJDL 82, 85
ERJO 18, 129

25. Children and young people are not held solely under administrative powers in prisons.

Evidence

Documentation: check:
• the numbers of foreign nationals held beyond the end of sentence
• that the prison is in regular contact with the UKBA and the youth offending team to progress cases and arrange suitable accommodation for temporary admission if necessary.

Staff: speak to the residential units governor and foreign nationals coordinator.

Children and young people: case studies with any children and young people held under dual powers.

Cross-reference with the resettlement inspector.

References

RPJDL 82, 85
ERJO 18, 129

26. Children and young people who are foreign nationals are provided with information about immigration status and procedures in different languages and helped to understand them.

Evidence

Documentation: check the information provided and the language and formats in which it is provided.

Staff: ask administrative staff and foreign national coordinators what information they provide, and in what languages, and how they work with children and young people to ensure that they understand the information and that it does not cause further anxiety.

Children and young people: ask about information provided on removal and deportation and possible detention.

References

DHRIN 5 (c)
RPJDL 6, 24
ERJO 62.3, 104,105

HMIP: Expectations
27. **Accurate records of staff and children and young people able to speak languages other than English are kept.**

**Evidence**

**Documentation:** check:

- that there is an up-to-date list of this information and that it is accessible
- that there are information books in 20 different languages
- the use of peer support and translation facilities, and what guidance, if any, is given to staff about appropriate usage, i.e. that children and young people should only be used as peer support, not for formal interpretation.

**Staff:** ask whether staff know what languages are spoken within the prison, by whom, and how to access these people.

**References**

RPJDL 19, ERJO 128.3

28. **Children and young people who are foreign nationals and immigration detainees are properly identified so that service provision can be targeted.**

**Evidence**

**Documentation:** check that the prison knows how many foreign nationals it discharges into the community and to immigration custody if they are joining family members.

**Documentation/staff:** ask staff to identify all foreign nationals and immigration detainees across the prison and cross-reference to ensure that record keeping is accurate.

**Children and young people:** check that the status recorded is correct.

**References**

RPJDL 21, 23, ERJO 62

29. **There is regular contact with available accredited, independent immigration advice and support agencies, with an appropriate specialism for issues relating to children.**

**Evidence**

**Documentation:** check for any official advice/correspondence with external agencies.

**Staff:** ask the foreign nationals coordinator about which groups are contacted and how often. Ask residential staff what help is given to foreign nationals in order for them to access immigration advice.

**Children and young people:** ask who they would contact for specialist immigration advice.

**References**

RPJDL 59
30. **Children and young people know the identity of young people who are the foreign national representatives within the prison and are able to contact them.**

**Evidence**

**Observation:** check the residential units for photographic displays with details of how to contact children and young people representatives.

**Children and young people:** ask foreign nationals if they can identify their representatives and how easy it is to contact them.

**References**

RPJDL 25

31. **Support and information groups for children and young people who are foreign nationals are held at least monthly. Areas of concern are regularly fed back to senior managers.**

**Evidence**

**Documentation:** check:
- for regularity of meetings
- the minutes of the last three meetings, and whether issues have been acted on by the senior management team
- that staff and outside agencies attend on a regular basis to answer queries
- the role of advocates in the groups.

**Observation:** foreign national orderlies will be a sign of good practice.

**Children and young people:** ask children and young people if support groups exist and how often they meet.

**References**

RPJDL 12
ERJO 76

32. **There is active promotion of peer support for young people who are foreign nationals, and this work is appropriately rewarded.**

**Evidence**

**Documentation:** examples of how this work could be recognised include training plans and rewards and sanctions scheme credits, etc.

**Staff:** ask about peer support for foreign nationals and the use of children and young people as interpreters.

**References**

RPJDL 12
ERJO 76
Section 3 – duty of care

33. **There is routine involvement from and communication with the foreign national population and any significant issues raised are acted on.**

   **Evidence**
   - Staff: speak to the foreign nationals coordinator about involvement and how this is organised. Anonymous surveys and/or focus groups should be undertaken at regular intervals.
   - **Children and young people:** ask children and young people who are foreign nationals how they are involved and whether the issues they raise are acted on.

**Expectations – disability**

34. **The establishment has a policy or action plan in place that meets the requirements of the Disability Discrimination Act (DDA 2005) and specifically the Disability Equality Duty.**

   **Evidence**
   - **Documentation:** check the disability policy/action plan and assess quality of content:
     - is the content sufficient to enable the establishment to carry out its positive duty under the DDA?
     - how have children and young people with mental, physical and learning disabilities been involved in the development of the action plan?
     - is the content based on evidence?
     - how has the evidence been used to form the actions and how are they delivering against them?
   - **Staff:** ask what the key issues are around disability and what steps are being taken.
   - **Children and young people:** ask those with disabilities:
     - whether children and young people were involved in the development of the policy/action plan
     - whether they feel their needs are being met.
35. The needs of children and young people with disabilities are effectively managed by a disability committee, or equivalent.

**Evidence**

- Documentation: check:
  - that meetings are held frequently enough to be effective and attended by senior management and relevant children and young people representatives. Look for a dedicated disability committee or a standing agenda item for the diversity management committee meetings
  - the minutes for evidence that disability issues are discussed, monitoring information is analysed and actions are taken and reviewed where appropriate; reasonable adjustments are agreed; and equality impact assessments are signed off
  - that quarterly reports are submitted from a disability committee and discussed at the diversity management committee meetings.

**Staff:** ask staff:
- if they know who the disability liaison officer is
- how they support children and young people who act as representatives.

**Children and young people:** speak to disability representatives and ask about the support provided, the input to the committee and whether their views are listened to and addressed.

36. Impact assessments of all locally implemented policies and functions are undertaken to assess their relevance to those with a disability.

**Evidence**

- Documentation: check recent impact assessments, their action plans and reviews. If problems are identified check what remedial action has been taken.

**Staff:** speak to the chair of the diversity management committee and the disability committee about the progress in and understanding of impact assessments and the correlation with diversity monitoring. Ask whether disability representatives are involved in impact assessments.

*Cross-reference with all other inspectors.*
37. **Children and young people’s disabilities, including learning disabilities, are identified as soon as possible after arrival and information relating to their needs shared with relevant staff. Regular reassessments are carried out to ensure that children and young people’s changing needs continue to be met.**

**Evidence**

**Documentation:** check:
- wing files for evidence of initial assessments and reassessments and the action taken as a result. How soon after arrival are the assessments undertaken, e.g. on reception? Do the assessments cover all aspects of disability, i.e. mental, physical and/or learning disability? Are immediate needs identified and dealt with before children and young people are locked up for the first night? Are other/more thorough assessments carried out during induction?
- that written documentation which arrived with the young person, such as ASSET, has been fully considered and taken into account
- that discussions have taken place with YOT workers where a disability has been described in the ASSET or other information provided as part of the assessment process
- for formal protocols for staff, including health services staff, to share relevant information with the disability liaison officer and vice versa. How is confidentiality maintained?
- that arrangements are in place to inform the receiving establishment of a child or young person’s specific needs when transferred
- that a needs analysis is conducted on at least an annual basis and that any resulting actions are followed up.

**Observation:** check:
- reception procedure and induction for self-disclosure of physical, mental and/or sensory disabilities
- that disclosure of information is voluntary and disabilities are not assumed
- the formal screening for learning disabilities or difficulties
- that the outcomes of assessments are recorded on LIDS, including the lack of disability or failure to disclose.

**Staff:** ask staff if they are aware of the specific needs of children and young people on their location and what procedures are in place for sharing this information with those who need to know.

**Children and young people:** ask if they were assessed and how it was conducted.

*Cross-reference with first days in custody, learning and skills and health services inspectors.*
Section 3 – duty of care

38. **Formal procedures for declaring a disability after arrival are in place which are promoted and known to staff and fully explained to children and young people.**

**Evidence**
- **Documentation:** check:
  - wing files for evidence of declarations during custody
  - for formal procedures for children and young people and staff to follow.

**Observation:** check for information presented, using appropriate language and media, explaining how children and young people can declare a disability during custody.

**Staff:** ask staff:
- what subsequent formal procedures are in place for children and young people to declare a disability
- if LIDS is updated with new information where relevant
- if they are aware of the specific needs of children and young people on their location.

**Children and young people:** ask:
- if they understood the information they were given and know how, and feel able, to declare a disability during their custody
- those who did declare a disability if they felt their needs were met.

_Cross-reference with the residential units inspector._

39. **Staff are aware of all children and young people with disabilities who would need help in the event of an emergency.**

**Evidence**
- **Documentation:** check for lists on the residential units and for Personal Emergency Evacuation Plans (PEEP) for those who require one.

**Staff:** ask who on their wing would need help and why, and what arrangements are in place to alert and evacuate those who would need help. Ask the fire officer if s/he is aware of those who would need help.

**Children and young people:** speak to those with an identified sensory or physical disability and ask whether they know what arrangements are in place to help them in an emergency.

_Cross-reference with residential units and health services inspectors._

HMIP: **Expectations**
40. **Information is provided to children and young people in a format and language they can easily understand.**

**Evidence**
- **Documentation:** check the language, format and content of information provided on reception and induction. All information should be in easy-read format.
- **Observation:** of reception and induction and information on display.
- **Staff:** ask in what format prison information is available.
- **Children and young people:** speak to those with an identified sensory or learning disability and ask in what format they were given relevant information.

*Cross-reference with first days in custody, health services and residential units inspectors.*

**References**
- RPJDL 24, 25
- ERJO 62.3

41. **Dedicated cells adapted for use by children and young people with disabilities are available on main location and adaptations made if the occupant or the needs of the occupant change.**

**Evidence**
- **Observation:** check that the location of dedicated cells is appropriate and that adaptations made for those with a disability are relevant, e.g. that they can be accessed by a wheelchair, that adaptations cater for those with sensory disabilities, etc.
- **Staff:** ask what arrangements are in place to ensure that children and young people with disabilities are not automatically located in the health services centre.
- **Children and young people:** ask where their cells are and what adaptations have been made to meet their needs.

*Cross-reference with residential units and health services inspectors.*

**References**
- DDA 2005
- RPJDL 28, 31, 32
- ERJO 107
42. **Reasonable adjustments are made to allow children and young people with disabilities full access to the regime and facilities. These adaptations are maintained and reviewed according to updated needs assessments.**

**Evidence**

Observation: check for adaptations on different locations, e.g. that there are lifts/stair lifts for wheelchair users, that there are hearing loops in visits for both children and young people and visitors, etc.

**References**

DDA 2005
RPJDL 27, 28, 31, 32
ERJO 76, 107

Staff: ask what alterations have been made for children and young people with disabilities to ensure they have access to all areas of the prison.

Children and young people: ask whether they have access to all facilities and activities.

*Cross-reference with residential units and all other inspectors.*

43. **All staff understand, respond appropriately to and promote awareness of disability issues.**

**Evidence**

Documentation: check:

- that all staff are trained in how to deal with the various disabilities, including learning disabilities and difficulties
- that the content of the training reflects the needs of the population in that establishment
- whether there is any training for children and young people.

Observation: check:

- that staff and managers provide a good model
- that staff engage with children and young people with disabilities in an appropriate manner
- that inappropriate language and conduct is challenged
- for posters, leaflets, etc. that promote equality of opportunity for and an anti-discriminatory approach to those with a disability.

Staff: ask staff and managers:

- if there are barriers to progress and what they are doing to overcome them
- whether staff appreciate that children and young people with disabilities have a different experience of prison, which may include bullying or unfair treatment by other young people associated with their disability, and how they engage with this
Section 3 – duty of care

Disability

- if they feel equipped to identify children and young people who need help with basic tasks such as using the phone, setting up PIN numbers, filling in food, canteen and visitors forms, etc
- if complaints relating to discrimination due to disability can be made and if they are dealt with appropriately.

Cross-reference with staff-young people relationships, complaints and residential units inspectors and all others.

44. Designated and trained disability liaison officers (DLOs) are in post and are provided with sufficient time, support and resources to meet the needs of children and young people with disabilities in their establishment, including support from named children and young people representatives.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>DDA 2005</td>
</tr>
<tr>
<td>• for the allocation of a dedicated staff member for disability</td>
<td>RPJDL 81, 82, 85</td>
</tr>
<tr>
<td>• the training records for the DLO</td>
<td>ERJO 13, 18, 127, 128, 129</td>
</tr>
<tr>
<td>• SPAR forms to ascertain facility time for the DLO.</td>
<td></td>
</tr>
<tr>
<td><strong>Observation:</strong> check that there are notices in a variety of accessible formats, e.g. easy-read, informing children and young people who the DLO is and how they can get to see them.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• if they know who the disability liaison officer is and who the children and young people representatives are</td>
<td></td>
</tr>
<tr>
<td>• disability liaison officers if they feel that they have enough time and that they are provided with sufficient support to meet their duties</td>
<td></td>
</tr>
<tr>
<td>• how they work with children and young people who act as representatives and ensure that they are sufficiently trained and supported to make a useful contribution.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask if they know who the DLO is and who the children and young people representatives are, and how easy it is to get hold of them. Speak to children and young people who act as representatives. Are they sufficiently trained and supported to make a useful contribution?</td>
<td></td>
</tr>
</tbody>
</table>

Cross-reference with the residential units inspector.
Section 3 – duty of care

45. **Equality of treatment is monitored and analysed by disability, and appropriate action taken to rectify any inequalities.**

   **Evidence**
   
   **Documentation:** check:
   - the minutes of the disability committee and diversity management committee meetings to ensure statistics are routinely collected, analysed by disability, and acted on
   - which areas of victimisation or exclusion have been highlighted through analysis
   - that the terms of reference for the disability committee and diversity management committee include diversity monitoring by, for example, access to regime activities and facilities, e.g. access to education, PE, association and outside exercise, etc., and themes from complaints, bullying, RIRFs, deaths in custody, self-harm, use of force, adjudications, use of segregation, rewards and sanctions, etc.

   **Staff:** ask the DLO:
   - what information is collated and for what purpose, and what action is taken to rectify problems
   - how it is ensured that children and young people with disabilities have equality of access to all regime activities.

   **Children and young people:** ask those with a disability about equality of treatment and access to all regime activities and how they are involved in improving their experience of custody.

   *Cross-reference with all other inspectors.*

46. **All children and young people with a disability have, and are involved in the development and regular update of, a multi-disciplinary care plan that sets out how their needs, including their social care needs, will be met.**

   **Evidence**
   
   **Documentation:** check:
   - that care plans exist for all children and young people with disabilities and are included in wing files. Are they based on a thorough assessment of individual need? Do they outline the additional support a child or young person requires? Are there regular reviews that are described in wing files? Is there evidence that the children and young people were involved in the development of the care plan and do they influence the reviews?
Do key staff, including community YOT workers, have the opportunity to contribute to the care plan and is relevant information shared with those who need to know? Are there links to those in the community who can provide help and is there an effective referral system? Are assessments updated on at least an annual basis to monitor any change in need? Is there evidence of effective multi-disciplinary working to meet the care plan? Does the care plan include health, social care, custodial and resettlement needs? Is it linked with their training plan?

- for provision of specific aids, e.g. hearing loops, mobility aids, social care aids, etc
- for access to speech and language therapy.

Staff: ask staff from different areas of the prison what involvement they have in children and young people’s care plans.

Children and young people: ask how children and young people are consulted about their care and what help they are given to make a contribution.

Cross-reference with personal officers, health services and training planning inspectors.

47. The personal officer acts as carer/mentor for a child or young person with a disability.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that:</td>
<td>Beijing 26.2</td>
</tr>
<tr>
<td>- the specific responsibilities of personal officers with regard to the care of children and young people with a disability are clearly described, with appropriate guidance</td>
<td>ERJO 18</td>
</tr>
<tr>
<td>- a mentor scheme is also in place to provide help to those with learning disabilities/difficulties in completing forms, using the telephone, writing letters, etc. There is a formal procedure for selecting mentors and rewarding them.</td>
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</tr>
<tr>
<td><strong>Observation:</strong> check for displays in different languages and formats advertising different types of support.</td>
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</tr>
<tr>
<td><strong>Staff:</strong> speak to the DLO about how the scheme is run and how both carers and the cared for are supported and protected.</td>
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</tr>
<tr>
<td><strong>Children and young people:</strong> ask individuals with specific needs:</td>
<td></td>
</tr>
<tr>
<td>- what schemes are on offer and how they found out about them</td>
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<tr>
<td>- if they feel supported and empowered rather than over-protected.</td>
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</tr>
</tbody>
</table>

Cross-reference with residential units and health services inspectors.
48. **The specific resettlement needs of children and young people with disabilities, including any social care needs, are accurately assessed and provided for on release.**

**Evidence**

- **Documentation:** check that training plans for children and young people who have a disability take full account of their resettlement needs.

- **Staff:** ask:
  - what assessments are carried out pre-release and how far in advance of release
  - what arrangements are put in place for those who have been identified as having specific needs
  - how it is ensured that YOT workers are fully involved in the planning process.

- **Children and young people:** ask relevant individuals who are coming up to release:
  - if their needs have been assessed
  - what choice of activities are provided and how often.

*Cross-reference with resettlement, training planning and health services inspectors.*

**References**

- RPJDL 79, 80
- ERJO 100.1, 100.3, 102

49. **There is frequent and effective involvement from and communication with children and young people with a disability.**

**Evidence**

- **Documentation:** check:
  - for regularity of meetings. Look at the minutes of the last three meetings, and whether issues have been acted on by the senior management team
  - that staff and outside agencies attend on a regular basis to answer queries
  - that involvement occurs in areas such as catering, canteen, use of force, adjudications, complaints, good order and discipline, incentives and earned privileges, etc, as part of impact assessment
  - for evidence of involvement and communication via forums, through groups as well as surveys.

**References**

- ERJO 13, 50.3
Staff: speak to DLOs about how this is organised. Ask:
- how representatives are able to communicate with and represent other children and young people
- whether any discussion forums have taken place
- whether representatives are involved in impact assessments.

Children and young people: ask representatives if they:
- are supported
- are involved in the equality impact assessment processes and if those with particular disabilities can also get directly involved
- are given facilities to hold meetings, etc
- can identify children and young people with different disabilities and needs and feel they can accurately represent their views
- are replaced in a timely fashion.

Ask other children and young people how they are consulted and whether they feel able to raise concerns with staff.

Cross-reference with the residential units inspector.

Expectations – religion

50. The establishment has a policy or action plan describing how the religious needs of all children and young people will be met.

Evidence

Documentation: check:
- the policy/action plan and the implementation of the objectives
- that the policy/action plan includes the requirement to record and monitor the religious faith of the population, including the number, description and reasons for any religious conversions
- for evidence of routine assessment of the faith needs of the population and the employment of chaplains of different faiths in order to meet those needs
- that there is evidence of involvement of children and young people from in the development of the policy/action plan
- that religious issues are represented by chaplains at the diversity management committee and acted on – check minutes of meetings
- that the policy/action plan includes developing and maintaining links with external and community groups.

Staff: ask how the establishment meets the needs of children and young people from different religious groups.
**Children and young people:** ask children and young people from different religious groups whether:
- they were involved in the development of the policy/action plan
- their religious needs are met as much as possible. If not, what are the problems and what are the issues preventing the problems from being dealt with?

*Cross-reference with the faith and religious activity inspector.*

---

**51. All staff are trained in religious diversity and the way this interacts with cultural and racial identities.**

**Evidence**

**Documentation:** check:
- training logs for the number of staff trained and how recent the training was
- the breadth of training.

**Observation:** observe the interactions between staff and children and young people.

**Staff:** ask staff and managers:
- what training they have had and what they learnt from that training
- what their understanding is of the interaction between religion, race and culture.

*Cross-reference with staff-young people relationships, faith and religious activity and residential units inspectors.*

---

**52. Equality of treatment is monitored and analysed by religion, and appropriate action taken to rectify any inequalities.**

**Evidence**

**Documentation:** check:
- the minutes of the diversity management committee meetings to ensure statistics are routinely collected, analysed by religion and acted on
- that community groups are involved in identifying any potential areas of discrimination and disadvantage
- what areas of victimisation or exclusion have been highlighted through analysis

*References*

**RPJDL 85**

**ERJO 129**

**RPJDL 4**
Section 3 – duty of care

- that the terms of reference for the diversity management committee includes monitoring by religion in terms of access to regime activities and facilities, e.g. access to education, PE, association and outside exercise, etc, and themes from complaints, bullying, RIRFs, deaths in custody, self-harm, use of force, adjudications, use of segregation, IEP, etc
- that the interplay between religion, race and culture is recognised in any analysis.

Staff: ask chaplains what their involvement is in the collation of information, what information is collated and for what purpose, and what action is taken to rectify problems.

Children and young people: ask children and young people from different religious groups about equality of treatment and how they are involved in improving their experience of custody.

Cross-reference with the faith and religious activity inspector and all other inspectors.

53. Strategies exist for preventing and dealing with discrimination on the grounds of religion.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation</strong>: check:</td>
<td>RPJDL 75, 76</td>
</tr>
<tr>
<td>- what prevention strategies are in place</td>
<td>ERJO 88, 121, 122</td>
</tr>
<tr>
<td>- that allegations are treated consistently and investigated thoroughly</td>
<td></td>
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<tr>
<td>- the outcome of any complaints/reports</td>
<td></td>
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<tr>
<td>- that incidents are routinely recorded and any patterns/trends are identified and discussed at the diversity team meeting</td>
<td></td>
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<tr>
<td>- what protections are in place for victims and those who report incidents – check for evidence that they are effective.</td>
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</table>

Observation: check that staff and managers are good role models and that any discrimination is challenged.

Staff: ask:
- what measures the establishment has in place to prevent religious discrimination from taking place
- what strategies are in place for identifying perpetrators and what kind of ill-treatment is covered, e.g. verbal abuse, physical abuse, etc
- what interventions are available for children and young people found guilty of this type of misconduct and what support is available for victims
Section 3 – duty of care

Gender

- whether children and young people found guilty are subject to ongoing monitoring by staff
- what protections are in place for victims or those who report such incidents.

*Cross-reference with bullying and faith and religious activity inspectors.*

Expectations – gender

Expectations for young women that differ from those for young men are located throughout this Expectations document.

54. **Impact assessments of all locally implemented policies and functions are undertaken to assess their relevance to young women.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check recent impact assessments, action plans and reviews. If problems are identified check what remedial action has been taken. Are policies and procedures written with young women, transsexual and transgender children and young people in mind, rather than merely adapting those created for young men?</td>
<td>CEDAW 2 RPJDL 4 ERJO 11</td>
</tr>
<tr>
<td><strong>Cross-reference with all other inspectors.</strong></td>
<td></td>
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</tbody>
</table>

55. **All staff working in young women’s establishments are trained to work with them.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check training records.</td>
<td>RPJDL 82, 83, 85 ERJO 127, 129</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>- what specific training they have received and how long ago they received it</td>
<td></td>
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<tr>
<td>- if the training covered transsexual and transgender issues</td>
<td></td>
</tr>
<tr>
<td>- if they understand the issues related to gender dysphoria</td>
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<tr>
<td>- whether there is a timetable of booster training sessions and if they have attended them</td>
<td></td>
</tr>
<tr>
<td>- how effective the training was.</td>
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</table>

HMIP: Expectations
56. **Children and young people who are transsexual or transgender are supported via specific support groups/schemes within the establishment and through referral to external support networks.**

### Evidence

**Documentation:** check:
- that children and young people with gender dysphoria have an individualised care plan that meets their specific needs and requirements
- that one-to-one support or counselling is provided where there are small numbers of individuals
- for links to community groups and the number of referrals.

**Observation:** check:
- that children and young people can access information about community groups through a range of accessible means
- for displays in different languages and formats advertising different types of support
- how children and young people can apply.

**Staff:** speak to designated diversity officers about how they support children and young people in transition. Ask how young people diversity representatives are involved.

**Children and young people:** ask individuals with specific needs:
- what support groups/schemes are on offer and how they found out about them
- how they get access to external support groups
- if they feel supported, including obtaining gender recognition certificates and gender reassignment surgery.

*Cross-reference with residential units and health services inspectors.*
### Expectations – sexual orientation

#### 57. The establishment has a policy or action plan for supporting and meeting the needs of young people who are gay, lesbian or bisexual.

**Evidence**
- **Documentation:** check that:
  - the policy/action plan includes the delivery of staff awareness training
  - the policy/action plan involves children and young people who are gay, lesbian or bisexual, both during development and as part of reviews
  - issues identified are represented at the diversity management committee meetings and acted on.

**Staff:** ask how the establishment meets the needs of children and young people who are gay, lesbian or bisexual.

**Children and young people:** ask:
- whether those who are gay, lesbian or bisexual were involved in the development of the policy/action plan
- whether they feel their needs are being met.

#### 58. Children and young people who are gay, lesbian or bisexual are supported via specific support groups/schemes within the establishment and through referral to external support networks.

**Evidence**
- **Documentation:** check:
  - the range of support groups on offer, the frequency of meetings and number of attendees
  - that one-to-one support or counselling is provided where there are small numbers of individuals
  - for links to community groups and the number of referrals.

**Observation:** check:
- that children and young people can access information about community groups through a range of accessible means
- for displays in different languages and formats advertising different types of support
- how children and young people can apply.
**Section 3 – duty of care**

**Gender:** sexual orientation

**Staff:** speak to designated diversity officers about how support groups are organised. Ask how young people diversity representatives are involved.

**Children and young people:** ask individuals with specific needs:
- what support groups/schemes are on offer and how they found out about them
- how they get access to external support groups
- if they feel supported.

*Cross-reference with the residential units inspector.*

---

59. **Strategies for preventing and dealing with discrimination on the basis of sexual orientation are in operation.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
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<tr>
<td>• the outcome of any complaints/reports</td>
<td></td>
</tr>
<tr>
<td>• that incidents are routinely recorded and any patterns/trends are identified and discussed at the diversity team meeting</td>
<td></td>
</tr>
<tr>
<td>• what protections are in place for victims and those who report incidents – check for evidence that they are effective.</td>
<td></td>
</tr>
<tr>
<td><strong>Observation:</strong> check that staff and managers are good role models.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• what strategies are in place for identifying bullies and what kind of ill-treatment is covered, e.g. verbal abuse, physical abuse, etc</td>
<td></td>
</tr>
<tr>
<td>• what interventions are available for children and young people found guilty of this type of misconduct and what support is available for victims</td>
<td></td>
</tr>
<tr>
<td>• whether children and young people found guilty are subject to ongoing monitoring by staff</td>
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<td>• what protections are in place for victims or those who report such incidents.</td>
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</table>

*Cross-reference with the bullying inspector.*
Contact with the outside world

Children and young people are helped and encouraged to contact family and friends through regular access to mail, telephones and visits in order to develop, maintain and strengthen relationships.

Expectations

1. **Children and young people are encouraged and helped to maintain contact with their families/carers and friends.**

   **Evidence**

   **Questionnaire**
   
   **Documentation:** check:
   
   - that there is sufficient capacity to facilitate the number of visits that young people are entitled to have
   - that foreign nationals are able to exchange visits entitlements for telephone calls
   - that provision is made for children and young people who might encounter difficulties with regard to visits, e.g. young people with disabilities or mental health problems
   - that siblings and partners under the age of 18 are permitted a visit unless a risk assessment indicates that this is inappropriate. If the risk assessment does not permit a visit the child or young person is told the reasons why
   - that unaccompanied visits from any person aged 16 or over are permitted unless a risk assessment, which takes into account the views of all parties including parents/carers of the visitor, indicates this would be inappropriate
   - that children and young people are not deprived of their statutory entitlement to visits as a punishment.

   **Observation:** check that:
   
   - information about the Assisted Prisons Visits scheme is available in the visitors’ centre and/or visits area
   - young people who are not residing on normal location, e.g. in health services or the care and separation or similar unit, are receiving visits.

   **References**

   - ICESCR 10
   - ERJO 83, 84, 85.1
   - YOIR 42.2
Staff: ask personal officers or family liaison officers:
- whether they contact parents/carers and YOTs routinely to ensure that there are no problems regarding visiting arrangements
- whether parents/carers are able to visit young people on the wing following a training planning meeting
- if they maintain regular contact with the social workers of young people who are in the care of, or looked after, by the local authority to ensure that an appropriate level of contact is maintained.

Children and young people: ask if they:
- know what their entitlements are and whether they are receiving them
- have any problems receiving visits or maintaining contact with family and friends (in particular, if distance from home presents difficulties) and, if so, how they have been helped by staff.

Cross-reference with induction, diversity, rewards and sanctions, training planning, resettlement pathway and personal officer inspectors.

2. Children and young people are able to receive their first visit within two working days of admission and thereafter are able to receive at least one visit a week for a minimum of one and a half hours.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>ERJO 84</td>
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</tbody>
</table>
- visits entitlements | YOIR 10 |
| 
- that children and young people are informed of their visits entitlement within the first 24 hours of arrival and are given the information and documentation they need to arrange a visit | |
| 
- that the entitlement of children and young people on the basic level of the rewards and sanctions scheme is not affected by their status | |
| 
- that there is no upper limit set on the number of visits a remanded young person is entitled to. | |

Staff: ask first night officers if they take responsibility for ensuring that new arrivals and their parents/carers know how to book a visit.

Children and young people: ask if they were able to arrange a visit within their first two days and if there are ever any problems in arranging a weekly visit. Ask how long visits sessions usually are and if visit times are ever curtailed.

Cross-reference with first days in custody and rewards and sanctions inspectors.
Section 3 – duty of care

3. Visits are organised so they are responsive to the needs of children and young people’s families. Visits areas are staffed, furnished and arranged to ensure easy contact between children and young people and their families or friends.

**Evidence**

**Documentation:** check:
- that published visiting times provide for those who wish to attend at weekends and in the evening
- that visitors are given information about how to get to the establishment, the visiting hours, and the name and role of the personal officer and how they can be contacted
- that a survey of visitors’ families is regularly undertaken and that action has been taken as a result of the feedback
- that visits arrangements meet the diverse needs of families/carers so that young people are not prevented from receiving visits
- that arrangements are in place for visitors who cannot easily use the booking line, such as those with language or literacy problems
- for evidence of feedback forms or complaints books.

**Observation:** check:
- the holding room for cleanliness, access to toilets, staff supervision, etc, and how long children and young people are held there
- that the visits booking system is accessible and is able to deal with the number and needs of visitors
- that visitors can book the next visit before the current visit ends
- that transport arrangements are in place for visitors to get to and from the establishment
- that the layout of the visits area is appropriate
- that furniture is in a good condition, and that health and safety is promoted, e.g. hot drinks vending machines are not positioned near a children’s play area, toys are clean and appropriate for the age group
- that families are able to buy a range of refreshments during visits
- that snack machines/the shop are sufficiently stocked and in operation.

**Visitors and children and young people:** ask:
- whether it is easy to book a visit
- if scheduled times meet their needs and what help they were given to arrange a visit

**References**

ERJO 84, 85.1
• what information they have been given about visits
• if they are asked for their opinions on the visits procedures and whether they have seen any action as a result of their feedback
• whether visitors have access to a complaints system.

Cross-reference with applications and complaints and diversity inspectors.

4. Establishments organise family days at least monthly.

Evidence

- how often these events are organised and promoted
- whether the prison liaises with outside agencies during the organisation
- whether they include safe provision for young children and appropriate activities for older children
- how family days are publicised to staff, visitors and children and young people and that the criteria for eligibility are clear
- if particular thought is given to prioritising those young people who do not receive visits
- whether different children and young people attend each month.

Observation: check that:
- the activities provided encourage contact between young people and their children
- family days are used as an opportunity for families and carers to meet key members of staff from a range of disciplines, and are promoted as such.

Staff: ask:
- how family days are planned to make the days stimulating and diverse
- if any consultation is undertaken with children and young people and their families, e.g. are they part of the planning groups, questionnaires?

Talk to voluntary visitor groups working with the establishment to ascertain the extent of their involvement.

Children and young people: ask if family days are frequent enough and designed to meet their needs.

Cross-reference with the resettlement pathways inspector.
5. **Children and young people are provided with additional visits if they have specific welfare needs.**

**Evidence**

- **Documentation:** check:
  - the documented access to these visits and the published criteria for defining ‘welfare needs’
  - that the list of ‘welfare needs’ is flexible and covers a wide range of issues.

**Observation:** check that Prisoners’ Families Helpline posters are prominently displayed.

**Staff:** ask:

- what criteria staff use to authorise such visits and whether these criteria are published and advertised and known to young people
- if the following are considered: signs of distress, evidence that there may be significant concerns or any major changes in circumstances, issues highlighted in training planning meetings
- about the use of extended or all day visits for children and young people who are parents.

**Children and young people:** ask if they are clear about the criteria for additional visits.

*Cross-reference with training planning and resettlement pathway inspectors.*

6. **Visits start and finish on time.**

**Evidence**

- **Observation:** check the starting and finishing times of visits against the scheduled times.

**Staff:** ask if there are sufficient staff to take children and young people over to their visits on time.

**Children and young people:** ask whether visits start and finish in accordance with the published schedule.

*Cross-reference with the applications and complaints inspector.*
7. **The searching of children and young people, visitors and their property is conducted in a religiously and culturally sensitive way. Searching of children and young people and their visitors is carried out sensitively and in accordance with the risk they pose.**

**Evidence**

**Observation:** observe normal searching procedures, including searching undertaken by drugs dogs. Check that:
- strip-searching is not carried out randomly but is targeted based on sound evidence
- all procedures for children and young people and visitors are carried out efficiently before and after visits to ensure that the visit is neither delayed nor curtailed
- the searching procedures at the gate do not cause delays.

**Visitors and children and young people:** ask about their experiences of searching.

*Cross-reference with safeguarding, child protection and security inspectors.*

**References**

ERJO 89.3, 89.4

YOIR 75 (1A)

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8. **If visitors have not arrived within 15 minutes of the start of the visit, staff try to find out why and inform the child or young person and wing staff. Visitors arriving late are allowed to continue with the remainder of their visit.**

**Evidence**

**Documentation:** check the information sent to visitors about late arrivals.

**Observation:** check that children and young people are not left to sit alone in the visits room if their visitors are late or not coming.

**Staff:** ask visits staff about the procedures for non-attendance and late arrivals.

**Children and young people:** ask what happens if their visitors are late arriving.

**Visitors:** ask about their experiences on visits if they have been delayed.

**References**

ERJO 85.1
Section 3 – duty of care  Contact with the outside world

9. Visits staff are aware that visits are potentially emotionally charged situations and they have strategies to enable children and young people to cope with such situations.

Evidence

Observation: assess how well visits staff respond to children and young people and their visitors. Check that:
• efforts are made to make visits a positive experience
• security arrangements are discreet.

Documentation: check whether visits staff systematically record any incidents, e.g. in an occurrence book.

Staff: ask:
• how they react to certain sets of circumstances
• whether there is any specific training available for visits staff
• if they are informed by residential staff of potentially difficult visits
• whether they pass on relevant information to residential staff.

References
ERJO 85.1

10. Visitors are able to share any concerns they have about the child or young person with visits staff or visitors’ centre staff.

Evidence

Observation: check the interaction between staff and visitors.

Staff: ask staff if this has occurred. Speak to personal officers and see if information is passed on to them.

Visitors: ask visitors:
• if they consider staff approachable
• what they would do if they had concerns
• if they are given the opportunity to speak to wing staff who have knowledge of the young person if they have continuing concerns
• if they are encouraged to speak to staff about their concerns and, if so, how this is made clear, e.g. through posters
• if there is a visitors’ helpline or reporting line for them to register their concerns. If so test the line.

Cross-reference with personal officers and relationships inspectors.

References
ERJO 14
11. **There is a robust system for vetting and barring inappropriate contact.**

**Evidence**

Documentation: check:

- that arrangements ensure offenders who are a risk to children and others subject to public protection measures do not come into contact with children during visits
- that there is a tiered system, e.g. enhanced supervision, closed visits, barring
- that supervised visits are used rather than closed visits. Closed visits are authorised only when there is a significant risk justified by security intelligence
- that closed visits are not used as a punishment and allocations to closed visits are reviewed at least monthly
- how this system is applied to mail.

**Staff:** ask about the criteria for implementing the various stages of vetting and barring contact.

**Children and young people:** speak to young people who have been subjected to closed visits. Check whether they were clear about the reason for the decision and that it was reviewed monthly.

*Cross-reference with safeguarding and security inspectors.*

**References**

ERJO 85.2

12. **A well-run and properly equipped visitors’ centre is available and is open at least an hour before and an hour after advertised visiting times.**

**Evidence**

Observation: check:

- access to clean toilets, including disabled toilets and nappy changing facilities
- that refreshments are available and that a clear message is given if such items cannot be taken into the prison
- that there is a range of relevant information on display, including what to do if visitors have concerns about a child or young person
- that the centre is staffed by knowledgeable individuals who provide information and support
- whether there is a feedback/complaints book.

**Staff:** ask staff in the visitors’ centre about their role.

**References**

ERJO 85.2
13. **A children's activity area is provided where children can be supervised by trained staff during visits.**

**Evidence**

<table>
<thead>
<tr>
<th>Documentation: check:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• that the staff supervising have an appropriate childcare qualification</td>
</tr>
<tr>
<td>• visitors’ comments in the visitors survey.</td>
</tr>
</tbody>
</table>

**Observation:** check that the activity area and toys are suitable and clean.

**Staff:** ask supervising staff whether there is good communication between them and the visits staff.

**Visitors:** ask if they are satisfied with this facility.

*Cross-reference with safeguarding and child protection inspectors.*

14. **In order to maintain family contact, children and young people are able to send letters free of charge and are encouraged and helped to use this facility.**

**Evidence**

<table>
<thead>
<tr>
<th>Questionnaire</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check that:</td>
</tr>
<tr>
<td>• children and young people who are foreign nationals can exchange two ordinary letters for one airmail letter</td>
</tr>
<tr>
<td>• all young people receive at least two free letters a week.</td>
</tr>
</tbody>
</table>

**Observation:** check that:

| outgoing mail is posted within 24 hours |
| incoming mail is received within 24 hours of arrival at the establishment, including registered and recorded mail. |

**Staff:** ask:

| how they identify individuals with low levels of literacy and regularly offer help, e.g. letter writing sessions |
| if they are aware of the significance of young people receiving mail on birthdays or other special occasions and ensure that it is delivered without delay |
| whether they are flexible in giving free letters to children, e.g. for special occasions, or if there are published criteria that specify when they can do this. |

**Children and young people:** ask all, but particularly foreign nationals and those with literacy difficulties, about their understanding of their entitlements.

*Cross-reference with the diversity inspector.*
15. **Mail is only opened to check for unauthorised enclosures or to carry out legitimate or targeted censorship.**

**Evidence**

**Documentation:** check:
- that staff are alert to the misuse of mail, especially that coming into young women in prison
- that there is a legitimate and proportionate approach to censorship
- instructions to staff and whether they feel able and supported to make their own judgements about censorship
- that legally privileged correspondence is not opened by staff without the child or young person present. If any legal correspondence is opened, check that this is recorded systematically.

**Staff:** ask censors:
- what training they have had for this role, e.g. do they know what is appropriate content and what is not and what would constitute a child protection issue?
- what arrangements are in place for foreign language speakers.

*Cross-reference with safeguarding, child protection and legal rights inspectors.*

**References**

ERJO 85.2
YOIR 11

16. **Children and young people have daily access to telephones and calls are charged at the cheapest possible national rates. Provision is made for children and young people to receive incoming calls from family/carers and children.**

**Evidence**

**Questionnaire**

**Documentation:** check:
- the documented access to telephones
- that foreign national children and young people can spend an unlimited amount on phone cards/credits
- that all children and young people are able to buy the cheapest available phone cards, including international phone cards for foreign nationals, and use the phone at a convenient time of the day to contact family
- that young people without telephone credit are provided with phone calls free of charge if they are distressed or have specific welfare or legal needs – look at how this is documented
- that incoming calls are recorded – check how often this facility has been used.

**References**

ERJO 83, 85.1
Observation: check:
- the use of phone hoods or booths so that phone calls can be carried out in private
- that there are notices next to all the phones advising users that their calls may be monitored
- for advertising of incoming calls.

Staff: ask what criteria they apply to ensure young people with specific needs are given a free phone call.

Children and young people: ask all, including those who are foreign nationals:
- about incoming calls and how this facility is publicised
- whether they have access to the phone at times of the day that are convenient for the recipient of the call
- if unused visiting orders can be exchanged for extra phone credit
- if they know they can request a free phone call for specific welfare or legal needs.

Cross-reference with the diversity inspector.
Applications and complaints

Applications and complaints are taken seriously as demonstrated by the effective procedures that are in place, which are easy to access and use, with timely responses provided. Children and young people feel safe from repercussions when using these procedures and are aware of, and know how to use, the appeal mechanisms that are available to them. Independent advocates are easily accessible and they assist young people in making applications and complaints.

Expectations

1. **Information about applications and complaints is reinforced through age-appropriate notices and posters that are easy to read and that are produced both in English and other languages and displayed across the establishment.**

   **Evidence**

   **Observation**: check:
   - for promotional posters in prominent places on all residential wings, including posters for the Ombudsman. Check they are in easy-read format
   - that applications and complaints are covered in the induction programme.

   **Staff**: ask staff (particularly personal officers):
   - how they ensure that children and young people understand the system of applications and complaints, i.e. how do they test for literacy and comprehension?
   - how they encourage and help children and young people to use these systems.

   **Children and young people**: ask:
   - if information on the wings is always displayed and that they understand it
   - those whose first language is not English and those with literacy or language difficulties whether they understand and are able to access these procedures
   - those who are foreign nationals whether they were told about the whole process of entitlements and rights.

   *Cross-reference with induction, residential units and diversity inspectors.*

   **References**

   YOIR 7,8
   ERJO 62.3, 122.1
Section 3 – duty of care

Applications and complaints

2. All applications and complaints, whether formal or informal, are dealt with fairly and promptly. Responses are written in an understandable and respectful manner and clearly address the issues raised with either a resolution or a comprehensive explanation of future action. There is a quality assurance system in place to monitor responses to complaints.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>YOIR 8</td>
</tr>
<tr>
<td>Documentation: check:</td>
<td>ERJO 122</td>
</tr>
<tr>
<td>• that there is a system to log all applications and complaints, whether formal or informal, so that there is an auditable trail usable by staff to follow up queries by children and young people</td>
<td></td>
</tr>
<tr>
<td>• that staff who are responsible for the initial logging and processing of complaints have been trained in child protection</td>
<td></td>
</tr>
<tr>
<td>• that there is a written record of all applications or complaints dealt with informally</td>
<td></td>
</tr>
<tr>
<td>• that applications/complaints are initially checked for their level of urgency so that urgent complaints are dealt with promptly, but within 48 hours at most. Others are responded to within three days</td>
<td></td>
</tr>
<tr>
<td>• that staff speak to children or young people who fail to complete forms properly rather than delaying dealing with the complaint or sending it back</td>
<td></td>
</tr>
<tr>
<td>• quality of responses – that they are legible, personally addressed, in plain language which clearly addresses the complaint and sets out an explanation or resolution and clearly states which member of staff dealt with the complaint</td>
<td></td>
</tr>
<tr>
<td>• that formal applications are signed and dated by the respondent</td>
<td></td>
</tr>
<tr>
<td>• the effectiveness of the establishment’s own quality assurance system.</td>
<td></td>
</tr>
</tbody>
</table>

Staff: ask:

• how children and young people are able to get appropriate help in completing their application or complaint if they wish to use the formal systems
• if translation services are provided for foreign nationals or young people with language difficulties and how young people with literacy problems are helped.

Children and young people: ask:

• whether staff are helpful when dealing with applications
• how responsive staff are to requests for urgent help
• whether applications and complaints are generally resolved satisfactorily.

Cross-reference with the child protection inspector.

HMIP: Expectations
3. **Children and young people** are encouraged and helped to solve areas of dispute informally, although they are not deterred from making formal complaints, and advocates are available to assist.

**Documentation:** check:
- for evidence in wing files of informal resolution
- for evidence in minutes of consultation meetings with children and young people that areas of dissatisfaction or common complaint are fully discussed and resolved.

**Staff:** ask:
- about their role in dispute resolution
- for examples of informal resolution, including written evidence
- how they ensure that young people do not interpret this as an attempt to discourage them from making a formal complaint
- staff if they accept verbal as well as written applications and how they encourage children and young people to speak to them about reasonable applications and complaints so that they can deal with them informally if appropriate.

**Ask advocates:**
- what their specific role is and if they are involved in informal resolution of complaints, and how they relate to staff in this regard.

**Children and young people:** ask:
- if they are asked routinely about general aspects of their treatment and care
- if they feel they have ever been persuaded to withdraw a complaint rather than being offered an informal resolution
- whether any complaints have been resolved informally
- whether staff are generally helpful in sorting out complaints, both formally and informally
- if they are aware of the advocacy service.

*Cros-reference with residential units and relationships inspectors.*
### Section 3 – duty of care

#### Applications and complaints

**4.** Consultative committees or equivalent consultation processes are held at least monthly when children and young people are able and encouraged to present any areas of grievance or dissatisfaction directly to senior members of staff.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check the outcomes of discussions and whether action points have been acted on.</td>
<td>RPJD 84</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask:</td>
<td>ERJO 13</td>
</tr>
<tr>
<td>• if consultative committees or consultation processes are encouraged and whether action plans are drawn up and acted on</td>
<td></td>
</tr>
<tr>
<td>• what role advocates and personal officers play in consultative committees</td>
<td></td>
</tr>
<tr>
<td>• whether minutes or a summary of the main points from meetings are published and are available to all children and young people</td>
<td></td>
</tr>
<tr>
<td>• what other mechanisms there are for feeding back outcomes to children and young people.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• if they are helped to present their views about any aspect of their care and treatment</td>
<td></td>
</tr>
<tr>
<td>• if they think consultative committees are a useful way to communicate and discuss important matters and if concerns are acted on</td>
<td></td>
</tr>
<tr>
<td>• if they have other informal ways of communicating with managers, e.g. Governor’s surgeries.</td>
<td></td>
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</tbody>
</table>

*Cross-reference with the residential units inspector.*

**5.** Children and young people can and do access and submit application and complaint forms easily and in confidence and without fear of punishment or recrimination.

<table>
<thead>
<tr>
<th>Evidence</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Questionnaire</strong></td>
<td>YOIR 8</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>ERJO 122, 123</td>
</tr>
<tr>
<td>• the number and outcome of application and complaint forms for the last three months</td>
<td></td>
</tr>
<tr>
<td>• a sample of confidential complaints</td>
<td></td>
</tr>
<tr>
<td>• that children and young people who make complaints against staff and/or other children and young people are protected from possible recrimination</td>
<td></td>
</tr>
</tbody>
</table>

*HMIP: Expectations*
that there is a clear confidentiality protocol and complaints about staff or other young people are always considered for their bullying and/or child protection implications.

**Observation:** check that:
- application forms are not required to access complaint forms and that envelopes are also available without having to ask staff
- there is at least one locked complaints box on each wing and the boxes are emptied daily by a designated officer with a non-contact role
- dispensers are kept stocked with forms
- files concerning complaints are maintained on a limited access basis.

**Children and young people:** ask:
- whether there are always supplies of the relevant forms and envelopes available
- if they know how to make a confidential complaint and if they have confidence in the system
- about any adverse affects of making a complaint.

*Cross-reference with bullying and child protection inspectors.*

---

6. **Children and young people know how to appeal against decisions and appeals are dealt with fairly and responded to within seven days.**

**Evidence**

- **Documentation:** check:
  - that responses to complaints include information about appeals
  - the number of appeals, what the outcome was and how promptly they were responded to.

**Staff:** ask how they ensure that young people are aware of the appeals procedure.

**Children and young people:** ask if they have been told how they can appeal against decisions and whether they have ever done so.

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**References**

- ERJO 122.3
7. All children and young people know how to contact members of the Independent Monitoring Board (IMB) and advocacy services and are helped to pursue any grievances with the help of senior managers within and outside the prison.

**Evidence**

**Observation:** check wings for IMB, advocacy and legal services contact information.

**Documentation:** check:

- that the IMB and advocacy scheme are integral to the complaints system and that there is clarity about the different roles and responsibilities of the two systems which work well together
- for recent complaints that have gone to governors/senior managers
- how many complaints the IMB receive each month, what they tend to be about and what proportion they can resolve.

**Staff:** ask:

- YOT workers, social workers, legal services officers and advocates about their role in helping young people to pursue grievances with external bodies
- the IMB clerk whether there are any difficulties with young people’s access to the IMB application system
- members of the advocacy service if there are any difficulties in access.

**Children and young people:** ask:

- how they would contact the IMB and advocates and whether they have had any contact with IMB representatives or advocates
- if they know who could help them with complaints at a high level and if they feel they can contact outside agencies in confidence.

*Cross-reference with the legal rights inspector.*
8. **There is a monthly analysis of complaints (both formal and informal, upheld and not upheld) for patterns or trends, paying particular attention to potential discrimination. This management information is used appropriately to identify areas for improvement.**

**Evidence**

- **Documentation:** check:
  - the analysis of complaints data
  - whether the data is interrogated and if action is taken when patterns/trends emerge
  - which staff have access to the data and its analysis.

- **Staff:** ask for examples of where things have been changed and improved as a result of the analysis of these data.

- **Children and young people:** ask whether or not their views of any trends or patterns coincide with those of managers.

*Cross-reference with the diversity inspector.*
Children and young people understand their status and legal rights and can freely access legal services and exercise their rights.

Expectations

1. **All children and young people can readily access effective advice from trained legal services staff, including a bail information and support scheme for those who are unconvicted and services for appellants.**

<table>
<thead>
<tr>
<th><strong>Evidence</strong></th>
<th><strong>References</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check remand management documentation to ascertain that:</td>
<td>BOP 18</td>
</tr>
<tr>
<td>• remand management meetings take place within specified timescales</td>
<td>BPRL 1, 4, 17, 18</td>
</tr>
<tr>
<td>• relevant staff attend the meetings – in particular the personal officer and the external YOT worker</td>
<td>RPJDL 24</td>
</tr>
<tr>
<td>• all unconvicted children and young people have a remand management plan which addresses their individual assessed need.</td>
<td>ERJO 13, 120</td>
</tr>
<tr>
<td>Check individual wing files and ascertain whether:</td>
<td>YOIR 16, 17</td>
</tr>
<tr>
<td>• solicitors’ details are recorded in individual wing files</td>
<td></td>
</tr>
<tr>
<td>• there is evidence that staff assist children and young people in obtaining specialist legal advice and representation, where necessary</td>
<td></td>
</tr>
<tr>
<td>• specialist accredited immigration advice is sought for all foreign nationals.</td>
<td></td>
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</tbody>
</table>

**Observation:** check there are sufficient appropriate legal texts in the library and that young people have easy access to them.

**Staff:** speak to staff who are responsible for remand management and provide legal services and check:

| • whether they have sufficient time to carry out their duties | |
| • how young people access their services and if there is a waiting list | |
| • that unconvicted children and young people are seen within 24 hours of arrival to assess and address any obstacles to bail | |
| • how appeals are managed to ensure that appeal deadlines are met | |
| • whether assistance is provided with parole and early release where appropriate | |
Section 3 – duty of care

- if help is given to young people who are also victims or witnesses (such as in abuse cases)
- how remand management and legal staff engage with external YOT workers
- what bail information and support is provided and whether potential recourse to health services in support of a bail application is considered.

Children and young people: ask about the level of help and support they receive during their time on remand. Speak to some appellants, those serving indeterminate sentences regarding parole support, and foreign nationals about immigration advice.

Cross-reference with health services, learning and skills, remand management and diversity inspectors.

2. Staff enable children and young people to enquire about and exercise their legal rights, and there are no formal or informal sanctions to deter children and young people from doing so.

Evidence

Documentation: check:
- whether there are YOT-seconded bail and remand workers in place
- how many other staff are trained in legal services
- whether the legal services staff work with or support dedicated bail and remand workers
- whether these staff are regularly redeployed to other duties, and whether there is a backlog of cases as a result.

Staff: staff should ensure that young people understand:
- their legal status
- what is likely to happen to them
- the role of the various agencies working with them
- the requirements and limits of confidentiality and consent, and how this affects the young person and their families and their contact with other professionals
- the meaning of legally privileged communication.

For those who are eligible, this should include information on early/late release.

Children and young people: ask about their experiences with legal services and bail and remand workers and whether they find them helpful.
3. Any child or young person who needs to discuss legal problems with a solicitor is able to make free and private contact during office hours.

   **Evidence**
   
   **Documentation:** check:
   - records to see if such contact has been made
   - the use of email and fax messages, as well as access to phone calls in private.

   **Staff:** ask:
   - what steps they take to ensure children and young people get access to appropriate legal advice
   - if children and young people are able to speak privately with their representatives before and after video link appearances.

   **Children and young people:** ask:
   - if they can make free and private calls to their solicitors
   - what time of the day they have access
   - how they would access a solicitor if they didn’t already have one.

   *Cross-reference with the contact with the outside world inspector.*

4. Children and young people are offered help with reading, writing and understanding legal terminology.

   **Evidence**
   
   **Staff:** ask how they identify children and young people who might need help with their legal correspondence and how that is offered.

   **Children and young people:** ask if they are able to access any help they need in dealing with legal correspondence.

   *Cross-reference with the diversity inspector.*

5. Young people are helped to understand childcare proceedings and are given advice on how to access information relating to parental rights and children’s welfare.

   **Evidence**
   
   **Documentation:** check the quality and relevance of information given to prisoners.

   **Observation:** check notice boards for information.
Section 3 – duty of care

Staff: ask:
- staff what information they provide
- advocates and social workers what their role is
- what help and advice is provided to children and young people who need legal advice as they have children of their own who are subject to care proceedings.

Children and young people: ask what information, support and advice they have been given.

6. Children and young people who choose to represent themselves in court are offered help by staff and given extra administrative resources free of charge that they require to pursue their case.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff: ask:</td>
<td>RPJDL 18</td>
</tr>
<tr>
<td>• about normal procedure</td>
<td>ERJO 120</td>
</tr>
<tr>
<td>• what help and advice is provided by legal services staff</td>
<td></td>
</tr>
<tr>
<td>• library staff about any materials they have that explain the youth justice system</td>
<td></td>
</tr>
<tr>
<td>• how young people access free stamps, writing materials and laptops.</td>
<td></td>
</tr>
</tbody>
</table>

Children and young people: ask if they are allowed access to computers to pursue their case.

Cross-reference with the learning and skills inspector.

7. Private legal visits are supported and accommodated in suitable facilities.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check the arrangements for private legal visits and that children and young people can have a family member or carer present during a legal visit if they wish.</td>
<td>BOP 18</td>
</tr>
<tr>
<td>Observation: check the facilities for private legal visits.</td>
<td>RPJDL 17, 18</td>
</tr>
<tr>
<td>Children and young people: ask if they are aware that they are entitled to have a family member or carer present during a legal visit if they wish.</td>
<td>ERJO 120</td>
</tr>
</tbody>
</table>

Cross-reference with contact with the outside world and resettlement inspectors.
Children and young people are cared for by a health service that assesses and meets their health needs while in custody and which promotes continuity of health and social care on release. The standard of health services provided is equivalent to that which children and young people could expect to receive in the community.

Expectations

1. Health services are informed by the assessed needs of growing children and adolescents and are planned, provided and quality assured through integrated working between the establishment and its local health economy.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check the following for information on use of services, referral patterns, etc:</td>
<td>R (98) 7, 10</td>
</tr>
<tr>
<td>• health needs assessment</td>
<td>RPJDL 49, 50,</td>
</tr>
<tr>
<td>• establishment health development plan</td>
<td>51, 53</td>
</tr>
<tr>
<td>• commissioning plan</td>
<td>ERJO 69</td>
</tr>
<tr>
<td>• establishment health steering group meeting minutes</td>
<td>YOIR 27</td>
</tr>
<tr>
<td>• clinical governance meeting minutes</td>
<td>SfBH D5a,</td>
</tr>
<tr>
<td>• anonymised reports to REAT, etc.</td>
<td>D11, C22 a,</td>
</tr>
<tr>
<td><strong>Staff:</strong> find out about the extent of integrated working by speaking to:</td>
<td>b, c</td>
</tr>
<tr>
<td>• establishment staff</td>
<td>HSFW 1, 2,</td>
</tr>
<tr>
<td>• primary care trusts</td>
<td>3, 25</td>
</tr>
<tr>
<td>• establishment leads in strategic health authorities</td>
<td>Children’s</td>
</tr>
<tr>
<td>• social care services</td>
<td>NSF 1, 3, 4</td>
</tr>
<tr>
<td>• children and adolescent mental health services (CAMHS)</td>
<td></td>
</tr>
<tr>
<td>• the YOT health practitioner</td>
<td></td>
</tr>
<tr>
<td>• other health providers.</td>
<td></td>
</tr>
</tbody>
</table>

_Cross-reference with the diversity inspector._
2. **The joint working arrangements between the establishment and the relevant primary care trust take account of and adhere to Department of Health and Department for Children, Schools and Families quality and regulatory frameworks.**

**Evidence**

- **Documentation:** check:
  - joint policies, the SLA for recent joint training and the involvement of the PCT in areas such as self-harm and suicide, substance use and admissions procedures
  - the assessment for social care needs and national service frameworks (NSFs).
  
  **Staff:** ask the health services manager whether s/he is aware of national service frameworks and whether they are being used.

**References**

- R (98) 7, 10
- RPDJL 49
- ERJO 69.2
- SfBH C1a, C2, D5a
- HSfW 12, 14
- All Children's NSF standards

3. **All children and young people have equity of access to health services.**

**Evidence**

- **Questionnaire**
- **Documentation:** check that:
  - there is monitoring of all children and young people who have had appointments with any health services professionals
  - access is analysed by ethnicity, status, age, wing or foreign national groups, etc
  - any disproportionate imbalances in access are investigated.

**Observation**

- **Children and young people:** ask a sample of children about the ease of access to health services.

  *Cross-reference with the diversity inspector.*

**References**

- R (98) 7, 10
- RPDJL 49
- ERJO 69.2
- SfBH D11, C18
- HSfW 4, 6, 10
- All Children's NSF standards

4. **The decoration and cleanliness of all rooms used for health services are consistent with the promotion of health and wellbeing and have appropriate infection control facilities.**

**Evidence**

- **Observation:** check that cleaning schedules are adequate and are adhered to.
- **Documentation:** check:
  - that there is an up-to-date, comprehensive infection control policy that is properly adhered to

**References**

- R (98) 7, 11
- ERJO 63.1
- SfBH C4a, C21
- HSfW 5

**HMIP: Expectations**
Section 4 – healthcare

Health services

• when the last infection control audit was carried out
• that there is a rolling decoration programme that ensures that good standards are maintained.

Staff: speak to cleaning staff.

Children and young people: ask whether the decoration and cleanliness during the inspection matches their general experience. 
Cross-reference with the learning and skills inspector.

5. Services promote wellbeing and meet the health and social care needs of children and young people. Health services staff work closely with staff in other areas of the establishment to ensure integration of child-focused care.

Evidence

Documentation: from multi-disciplinary meeting minutes, SMT minutes, management of self-harm documentation, injury forms, movements between health services and the segregation unit, etc, as well as the current health needs assessment and the establishment health development plan, check that:
• there are clear links with other departments such as PE or learning and skills departments
• there is a whole prison approach to health
• health services address the needs of adolescent young men and young women, including those with specific needs such as those who are parents and pregnant young women.

Staff: ask:
• health services managers about the levels of integration of child/young person-focused care
• other establishment staff, e.g. PE instructors, catering staff, chaplains and security, whether healthcare is part of regime monitoring meetings
• whether they consult with children and young people about healthcare provision.

Children and young people: ask what information they are given about healthy lifestyles.

Cross-reference with learning and skills, self-harm and suicide prevention, PE, catering, prison shop, security and rules, faith and religious activity inspectors.
6. Patients are treated in a manner that maintains decency, privacy and dignity, recognising the differing needs of children and young people, including those with learning and/or physical disabilities and those from different cultural/ethnic groups and genders.

Evidence

Observation: check:
- that children and young people do not eat in their cell unless there is a clinical reason for doing so
- that children and young people who are not well enough to leave their cells have access to appropriate recreational facilities
- the appropriateness of the language used by staff and the condition of the setting.

Staff: speak to health services managers, PCT staff and health services staff, and check whether staff are aware of the range of black and minority ethnic groups, foreign nationals and children and young people with a learning and/or physical disability, and the potential medical and social care needs of these groups.

Children and young people: ask:
- about their experiences, including whether they think they have been treated with dignity and decency, in privacy. Also speak to children and young people from black and minority backgrounds and those with disabilities, for example, and ask what their experiences have been
- if they have been told they can see a doctor of their own gender if they wish.

Cross-reference with residential units, time out of cell and diversity inspectors.

7. Children and young people are given age-appropriate written and pictorial information about health services and understand how to access them.

Evidence

Observation: check that:
- information about health services is available in a range of languages and multimedia for those who have difficulty reading and writing
- displays and leaflets cover health issues relevant to an adolescent population.

References

R (98) 7, 26
RPJD 24, 25
ERJO 62.3, 62.4, 71
SfBH C16
HSfW 6
Children’s NSF 3, 4

HMIP: Expectations
Children and young people: ask children and young people in different locations if:
- they are satisfied with access to all health services
- there any areas that are problematic
- the health services application system is easy to access and reliable
- they are able to get to their appointments.

Staff: ask if appointments are ever cancelled due to a lack of staff to accompany young people to health services or to outside appointments.

Cross-reference with diversity and first days in custody inspectors.

8. The health and social care needs of children and young people are taken fully into account in training planning meetings and reviews. In particular:
- a member of health services is actively involved in training planning meetings and attends where relevant
- children and young people are involved in planning their own care
- parents/carers are consulted unless it is in the interests of the young person and there are documented reasons for not doing so.

Evidence

Observation: attend training planning and pre-release meetings and reviews.

Documentation: check the training planning meetings and review documentation and look for evidence of consent forms, compacts, etc.

Staff: ask health services staff about their involvement in training plans and attendance at meetings.

Children and young people: ask whether they have been consulted about their care.

Cross-reference with the training planning inspector.
Expectations – clinical governance

9. **Clinical governance arrangements are in place, which include the management and accountability of staff.**

   **Evidence**
   - The minutes of clinical governance meetings
   - The serious untoward incident (SUI) policy
   - Evidence of serious untoward incident/critical incident investigations
   - The evidence of PCT involvement in SUIs and deaths in custody, reviews, reports, etc.

   **Staff:** ask whether they:
   - All have job descriptions, which are subject to appraisal
   - Attend regular meetings to discuss clinical and organisational issues.

10. **Staffing levels and skills mix include appropriately trained medical, nursing, reception, administrative, discipline and other ancillary or specialist staff to reflect the specific needs of children and young people.**

   **Evidence**
   - Staff profiles, e.g. the number of registered sick children’s nurses, doctors with experience in paediatrics, etc
   - Professional registration details
   - ‘detail’/SPARs
   - Training needs analysis
   - Skill mix reviews.

   **Staff:** ask whether:
   - The skills mix of staff is sufficient to cover all children and young people held (including black and minority ethnic groups, foreign nationals, those with physical or mental health problems), and whether it includes CAMHS, learning disabilities and staff with experience in dealing with children and young people with substance misuse issues
   - Officers are detailed to health services to support health services staff.
11. **Children and young people are treated by staff who receive ongoing training, supervision and support to maintain their professional registration and continue their professional development.**

**Evidence**

**Documentation:** check:
- training records
- arrangements for clinical supervision
- that continuing professional development includes relevant training for the population, e.g. emergency childbirth in establishments that hold young women, aetiology of sickle cell disease in prisons with black and minority ethnic children and young people, etc.

**Staff:** ask:
- whether they have received child protection, suicide and self-harm, juvenile awareness staff programme (JASP) training
- how they would identify and deal with bullying, etc.

*Cross-reference with diversity, safeguarding, child protection, self-harm and suicide prevention inspectors.*

**Evidence**

**References**

- R (98) 7, 34, 135
- SfBH C5c, C10a, C10b, C11c
- HSfW 22, 24, 28

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12. **Patient safety during clinical activity that requires specialist equipment meets the standards laid down by regulatory bodies. All equipment (including the resuscitation kit) is regularly checked and maintained and staff understand how to access and use it effectively.**

**Evidence**

**Observation:** check:
- the equipment, including the availability of an automated external defibrillator
- the availability of an emergency childbirth kit in all prisons that hold young women.

**Documentation:** check:
- equipment logs
- registers
- training registers
- medical equipment alerts.

**Staff:** ask if they are aware of the location of the equipment.

**Evidence**

**References**

- R (98) 7, 10, 11
- SfBH C1b, C4b, C4c
- HSfW 14, 19
13. **There are formal arrangements with local health and social care agencies for the loan of occupational therapy equipment and specialist nursing advice to ensure that children and young people are able to access mobility and health aids.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check:</td>
<td>R (98) 7, 3, 7, 10</td>
</tr>
<tr>
<td>• the equipment, e.g. hoists, aids to daily living, aids and equipment for continence needs</td>
<td>RPJD L 49</td>
</tr>
<tr>
<td>• the cells of those who need aids for evidence of the equipment provided.</td>
<td>HSfW 7, 12, 24</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>Children’s</td>
</tr>
<tr>
<td>• that the SLAs with outside agencies include the provision of occupational therapy (OT) equipment and aids</td>
<td>NSF 6, 7, 8</td>
</tr>
<tr>
<td>• the commissioning arrangements and that they include reference to OT services and continence advisors/enuresis services</td>
<td></td>
</tr>
<tr>
<td>• training records</td>
<td></td>
</tr>
<tr>
<td>• clinical records/care plans.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask staff about arrangements.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask those who need aids whether the equipment they needed was obtained without delay.</td>
<td></td>
</tr>
<tr>
<td><em>Cross-reference with the residential units inspector.</em></td>
<td></td>
</tr>
</tbody>
</table>

14. **Every child or young person has a clinical record containing an up-to-date and comprehensive assessment and care plan (if required), including health and social care history, which conforms to professional guidance from the regulatory bodies.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that a sample of clinical records from the previous six months and inpatient care plans include a record of:</td>
<td>R (98) 7, 1</td>
</tr>
<tr>
<td>• problems</td>
<td>RPJD L 19</td>
</tr>
<tr>
<td>• diagnoses</td>
<td>SFBH C9</td>
</tr>
<tr>
<td>• investigations</td>
<td>HSfW 7, 26</td>
</tr>
<tr>
<td>• treatment</td>
<td>Children’s</td>
</tr>
<tr>
<td>• referral letters.</td>
<td>NSF 3–5</td>
</tr>
</tbody>
</table>
15. **All clinical records (including dental and pharmacy) are kept securely in accordance with data protection and the Caldicott principles. Access is limited to those with a demonstrable need to know.**

**Evidence**
- Observation: check the security of the storage area.
- Staff: speak to the health services manager.

**References**
- R (98) 7, 13
- RPJDL 19
- SfBH C9
- HSfW 8, 25, 26

16. **Clinical records of children and young people who have left the establishment are stored in accordance with data protection and the Caldicott principles, in a way that enables retrieval and amalgamation with a current clinical record if the young person returns.**

**Evidence**
- Observation: check the storage areas.
- Staff: ask how these records are stored.

**References**
- R (98) 7, 13
- RPJDL 19
- SfBH C9
- HSfW 20

17. **There is evidence of treatment plans for children and young people which reflect national clinical guidance, such as that provided by NICE, national service frameworks, etc. Such treatment plans are subject to clinical audit.**

**Evidence**
- Documentation: check:
  - clinical records
  - that local protocols include reference to evidence-based practice.
- Staff: speak to the following about their awareness of national guidelines:
  - doctors
  - health services staff
  - pharmacists, etc.

**References**
- R (98) 7, 10
- RPJDL 49
- ERJO 74.1
- SfBH C3, C5a, C5d, D2a, D2d
- HSfW 11, 12, 28
- All Children’s NSF standards
18. There is a patient forum that is representative of the children and young people held at the establishment. Young people who are representatives are supported by staff to ensure that they are able to play a full and active role.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: attend a forum meeting.</td>
<td>RPJDL 31</td>
</tr>
<tr>
<td>Documentation: check:</td>
<td>ERJO 13, 74.2</td>
</tr>
<tr>
<td>• the establishment population statistics</td>
<td>SfBH C17, D8, D11</td>
</tr>
<tr>
<td>• the minutes/notes of the meetings.</td>
<td>HSfW 1, 2</td>
</tr>
<tr>
<td>Children and young people: ask:</td>
<td>Children’s NSF 3, 4</td>
</tr>
<tr>
<td>• whether they feel that their contribution is useful and valued</td>
<td></td>
</tr>
<tr>
<td>• how staff support them with their responsibilities related to the role.</td>
<td></td>
</tr>
</tbody>
</table>

19. Children and young people are actively involved in identifying their health needs, seeking advice or treatment and drawing up a care plan in ways that are appropriate to their age and understanding.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check that young people have been consulted as part of the care planning process.</td>
<td>RPJDL 31</td>
</tr>
<tr>
<td>Staff: ask what measures are taken to ensure that young people are able to actively engage in and understand how they can usefully contribute to their own care planning.</td>
<td>ERJO 13, 62.3</td>
</tr>
<tr>
<td>Children and young people: ask whether they:</td>
<td>Children’s NSF 3, 4</td>
</tr>
<tr>
<td>• feel genuinely consulted</td>
<td></td>
</tr>
<tr>
<td>• played a useful part in the care planning process.</td>
<td></td>
</tr>
</tbody>
</table>

20. Children and young people know how to comment/complain about their care and treatment (using advocacy services or YOT workers if appropriate). They are not discouraged from doing so and are supported to do so when necessary.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check:</td>
<td>R (98) 7, 10</td>
</tr>
<tr>
<td>• the requests and complaints received by health services during the last three months and any letters and responses</td>
<td>ERJO 121, 122.1</td>
</tr>
<tr>
<td>• that information on how to complain is available in the department</td>
<td>SfBH C14 a, b</td>
</tr>
<tr>
<td></td>
<td>HSfW 15</td>
</tr>
<tr>
<td></td>
<td>Children’s NSF 3, 4</td>
</tr>
</tbody>
</table>
that complaints about clinical care are linked to the NHS complaints system.

**Children and young people**: ask whether they are satisfied with the complaints system.

*Cross-reference with the applications and complaints inspector.*

---

**21. Systems are in place for the prevention of communicable diseases. In the event of an outbreak of a communicable disease, the response is prompt and effective, in liaison with local NHS services, including the identification and tracing of contacts.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check the policy document.</td>
<td>R (98) 7, 10, 36–42</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask whether they:</td>
<td>ERJO 69, 70.1</td>
</tr>
<tr>
<td>• are aware of the policy</td>
<td>SfBH D12b, D13c</td>
</tr>
<tr>
<td>• know the named point of contact at the PCT.</td>
<td>HSfW 30, 31</td>
</tr>
</tbody>
</table>

---

**22. Children and young people are assessed to ascertain whether they are competent to provide informed consent before any treatment is commenced. If competence is judged to be absent arrangements are made for consent to be obtained from parents/carers.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation</strong></td>
<td>R (98) 7, 14, 15, 16</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check that:</td>
<td>SfBH C13c</td>
</tr>
<tr>
<td>• protocols reflect current statutory and professional requirements</td>
<td>HSfW 14, 17, 27</td>
</tr>
<tr>
<td>• assessments are included in the care/treatment plan.</td>
<td>Children’s NSF 3, 4</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask health services staff if they are aware:</td>
<td>Fraser Competencies</td>
</tr>
<tr>
<td>• of the protocols (if in existence)</td>
<td>WSI</td>
</tr>
<tr>
<td>• of their responsibilities</td>
<td></td>
</tr>
<tr>
<td>• if parents/carers are kept informed of treatment, where appropriate, even when parental consent is not necessary.</td>
<td></td>
</tr>
</tbody>
</table>
23. **Information sharing protocols exist with appropriate agencies to ensure efficient sharing of relevant health and social care information.**

**Evidence**

<table>
<thead>
<tr>
<th>Documentation: check:</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>• the protocols with local health and social care communities</td>
<td>R (98) 7, 7</td>
</tr>
<tr>
<td>• the protocol with discipline staff, health services staff and others</td>
<td>ERJO 74.2</td>
</tr>
<tr>
<td>• that protocols cater for children and young people at risk.</td>
<td>SfBH C13c</td>
</tr>
</tbody>
</table>

Check that protocols are explicit about how, when and what information can be shared.

**Staff:** check discipline staff’s understanding of the protocols.

**References**

R (98) 7, 7
ERJO 74.2
SfBH C13c
HSfW 25
When to share information:
Best practice guidance for everyone working in the youth justice system (2008)

---

**Expectations – primary care**

24. **During reception, immediate physical and mental health and social care needs such as stabilisation or detoxification of those with substance misuse withdrawal needs, mental health problems, disability or ongoing treatment or care are identified, documented and responded to promptly and effectively using a reception screening tool.**

**Evidence**

<table>
<thead>
<tr>
<th>Questionnaire</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> reception procedure. Check whether:</td>
<td>R (98) 7, 1</td>
</tr>
<tr>
<td>• interviews are conducted in a sufficiently private area</td>
<td>ERJO 62.5</td>
</tr>
<tr>
<td>• ASSET information is used to inform the assessment procedure</td>
<td>SfBH C19</td>
</tr>
<tr>
<td>• potential self-harm or suicidal behaviour is assessed</td>
<td>HSfW 8, 11, 26</td>
</tr>
<tr>
<td>• other specialists, i.e. drugs counsellors, social workers, CAMHS workers or YOT workers are also contacted where risk is identified</td>
<td></td>
</tr>
<tr>
<td>• previous healthcare issues are followed up</td>
<td></td>
</tr>
<tr>
<td>• medication being used is noted and followed up</td>
<td></td>
</tr>
<tr>
<td>• a similar tool is used for transfers into the establishment.</td>
<td></td>
</tr>
</tbody>
</table>
Section 4 – healthcare

Health services: primary care

Documentation: check:
- clinical records
- that urgent healthcare needs are dealt with promptly
- that health services contribute to vulnerability assessments.

Children and young people: speak to recent arrivals about their reception experience.
Cross-reference with first days in custody, diversity, suicide and self-harm and substance use inspectors.

25. Following reception screening, a further health assessment is carried out and recorded by trained staff no later than 24 hours after the child or young person’s arrival in custody.

Evidence

<table>
<thead>
<tr>
<th>Questionnaire</th>
<th>R (98) 7, 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation:  of the process. Check:</td>
<td>ERJO 62.5</td>
</tr>
<tr>
<td>how long each interview lasts and the quality of assessment</td>
<td></td>
</tr>
<tr>
<td>whether additional needs which are not identified during the reception interview are dealt with promptly</td>
<td></td>
</tr>
</tbody>
</table>

Documentation: check:
- that clinical records include a full health assessment of any mental health needs, learning disability/difficulty, social care needs and drug withdrawal
- that assessment is completed within 24 hours
- ASSET information and other available reports.

Staff: ask about procedures in reception.
Cross-reference with first days in custody, diversity, self-harm and suicide prevention and substance use inspectors.

26. The child or young person’s GP and any relevant care agencies are contacted at the beginning of custody, with appropriate consent, to provide relevant information to ensure continuity of care.

Evidence

<table>
<thead>
<tr>
<th>Documentation: check:</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>clinical records</td>
<td>R (98) 7, 1, 7</td>
</tr>
<tr>
<td>training planning records.</td>
<td>ERJO 74.1</td>
</tr>
</tbody>
</table>

Children and young people: speak to new arrivals.
Cross-reference with first days in custody, training planning and substance use inspectors.
27. Out of hours and emergency medical cover is well organised, responsive and effective.

**Evidence**

- Documentation: check the details of the contract/SLA.
- Staff: ask about out of hours cover during the night visit.
- Children and young people: ask:
  - what happens when they feel unwell at night
  - whether it is possible to get medication for minor ailments such as a headache during the night
  - whether it is possible to speak to a member of health services staff if they are feeling particularly low, especially for those on an open ACCT.

*Cross-reference with the applications and complaints inspector.*

**References**

- R (98) 7, 1, 2, 3, 4
- SfBH C6
- HSfW 2, 3

28. Children and young people are encouraged by staff to take an interest in looking after their health and promotion of healthy ways of living forms an integral part of the regime. Children and young people receive information about health and social issues and they are supported in using such advice.

**Evidence**

- Observation: look for:
  - evidence of health promotion material on display throughout the establishment
  - evidence that health promotion events involving community organisations have been held
  - uptake of, for example, well person clinics, genito urinary medicine services, smoking cessation, hepatitis B immunisation clinics, childhood vaccination/immunisation programmes, oral health promotion, oral cancer screening
  - promotion of clinics (especially for high risk groups)
  - information about the availability of barrier protection and advice about safe sex.

**References**

- R (98) 7, 27, 28, 29
- ERJO 71
- SfBH C23
- HSfW 30
- Children’s NSF 1–4

**Documentation:** check that:

- there is range of relevant health promotion information available, including for oral health, sexual health, and control of communicable diseases
- there is a policy/protocol for the issuing of barrier protection
- advice and information is available on sexual health, including sexually transmitted infections
• children and young people have access to disease prevention programmes and screening programmes that mirror national and local campaigns.

**Staff:** ask about:
• the availability of clinics and the level of attendance
• working practices with regard to barrier protection
• the availability of condoms or dental dams and water-based lubricants and whether these are easily and anonymously accessible.

**Children and young people:** ask if:
• they have been given the information they require
• they have easy access to the full range of clinics.

_Cross-reference with PE, learning and skills, training planning and substance use inspectors._

---

**29. The amount and range of primary care services provided reflects the needs of growing children and adolescents.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> look at:</td>
<td></td>
</tr>
<tr>
<td>• surgeries</td>
<td>RPJDL 49, 54</td>
</tr>
<tr>
<td>• practice nurse appointments</td>
<td>ERJO 69, 74</td>
</tr>
<tr>
<td>• nurse-led disease management</td>
<td>YOIR 27</td>
</tr>
<tr>
<td>• ancillary service provision</td>
<td>Children's NSF 4</td>
</tr>
<tr>
<td>such as opticians, physiotherapists, podiatrists, dentists and pharmacists.</td>
<td></td>
</tr>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td></td>
</tr>
<tr>
<td>• clinic timetables</td>
<td>HsfW 1, 2, 29</td>
</tr>
<tr>
<td>• registers of long-term conditions, etc.</td>
<td></td>
</tr>
<tr>
<td>• practice leaflets.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to:</td>
<td></td>
</tr>
<tr>
<td>• administrative staff</td>
<td></td>
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<tr>
<td>• PE staff</td>
<td></td>
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<tr>
<td>• catering staff</td>
<td></td>
</tr>
<tr>
<td>• visiting staff</td>
<td></td>
</tr>
<tr>
<td>• health services managers.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong></td>
<td></td>
</tr>
<tr>
<td>speak to children and young people.</td>
<td></td>
</tr>
</tbody>
</table>

_Cross-reference with PE and catering inspectors._
30. Appropriately trained nurses undertake triage and children and young people’s care is supervised by a qualified nurse.

**Evidence**

Observation: check the nursing supervision.

Documentation: check:
- nurses’ qualifications
- training records
- triage protocols/algorithms
- whether there are RSCNs.

**Children and young people**: ask them about normal practice.

**References**

R (98) 7, 1, 21
YOIR 27
SfBH C5b
HSfW 11, 22

31. An effective appointment system is in operation, which ensures that consultations take place at times that allow enough patient contact time.

**Evidence**

Documentation: check:
- the length of waiting lists over the last six months
- that appointments are not missed because children and young people are not able to get there on time.

**Children and young people**: ask if they:
- are taken to their appointments on time
- have enough time in consultation.

**References**

R (98) 7, 1, 2, 4

32. Children and young people can see a doctor of their own gender if they wish to do so.

**Evidence**

Staff: ask staff.

**Children and young people**: ask children and young people.

**References**

R (98) 7, 10, 19
ERJO 69.2
33. Antenatal services equivalent to those provided in the community are available for pregnant young women.

**Evidence**

**Observation and staff:** midwifery clinics.

**Documentation:** check:
- shared care arrangements
- the SLA/commissioning agreement and whether it includes reference to teenage pregnancy services
- that counselling is offered.

**Young women:** ask young women using the service if they are satisfied with the antenatal service they are receiving.

**References**

R (98) 7, 8, 10
ERJO 73b
Children’s NSF 2, 11

34. Effective systems, including regular review, in line with good practice, are in place for the management of children and young people with long-term conditions.

**Evidence**

**Documentation:** check:
- the life-long conditions registers
- the clinical records of children and young people with known long-term conditions.

**Staff:** speak to:
- administrative staff
- nurses
- health services managers.

**Children and young people:** ask children and young people with long-term conditions how they are supported.

**References**

R (98) 7, 10
SfBH C23
HSfW 7, 11, 12

35. Health services staff provide a community-based service on the wings for children and young people with long-term physical or mental health conditions which supports and promotes their independence.

**Evidence**

**Observation:** check:
- how frequently health services staff visit wings
- whether there are named nurses for each wing and if this promotes good relationships between young people as well as wing staff.

**References**

R (98) 7, 29
ERJO 73, 74, 75
Children's NSF 8, 9
Documentation: check:
- clinical records
- wing history sheets.

Staff: speak to:
- officers
- health services staff.

Children and young people: identify and speak to any young people on wings with physical or mental conditions.

*Cross-reference with the residential units inspector.*

**Pharmacy**

36. All children and young people receive a pharmacy service equivalent to that in the community, which includes direct access to advice by appropriately trained pharmacy staff, information about the benefits and risks of medications, and the self-administration of medication.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>R (98) 7, 11, 49</td>
</tr>
<tr>
<td>Observation</td>
<td>RPJDL 55</td>
</tr>
<tr>
<td></td>
<td>ERJO 72</td>
</tr>
<tr>
<td></td>
<td>DoH SfBH</td>
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<tr>
<td></td>
<td>C16, C18</td>
</tr>
<tr>
<td></td>
<td>HSfW 19</td>
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<tr>
<td></td>
<td>Children’s NSF 10</td>
</tr>
</tbody>
</table>

**Children and young people:** ask whether they:
- are able to speak to a pharmacist without difficulty
- are able to have in-possession medications and, if so, what advice they are given
- are able to obtain simple over-the-counter remedies from the healthcare department.

*Cross-reference with the prison shop inspector.*
### Section 4 – healthcare

**Health services: primary care**

#### 37. Children and young people prescribed long-term medications receive them without gaps or delays, including when going to court or when transferring from one establishment to another.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check prescription charts.</td>
<td>R (98) 7, 10, 18</td>
</tr>
<tr>
<td><strong>Children and young people:</strong> speak to children and young people receiving long-term medications.</td>
<td>RPJDL 55</td>
</tr>
<tr>
<td><strong>Cross-reference with the courts and escorts inspector.</strong></td>
<td>ERJO 99.1</td>
</tr>
<tr>
<td><strong>Children’s NSF:</strong></td>
<td>HSFW 7</td>
</tr>
<tr>
<td></td>
<td>Children’s NSF 10</td>
</tr>
</tbody>
</table>

#### 38. A medicines and therapeutic committee with PCT involvement ensures accurate, evidence-based prescribing and agrees protocols, including disease management guidelines, ‘special sick’ policies and a local formulary for the administration of medicines either by health services staff or when children and young people self-medicate.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>R (98) 7, 10, 48, 49</td>
</tr>
<tr>
<td>- the minutes of meetings from the last three months to see whether the security and SASH coordinator are represented</td>
<td>ERJO 74</td>
</tr>
<tr>
<td>- policies</td>
<td>SfBH C4(d)</td>
</tr>
<tr>
<td>- the local formulary, etc</td>
<td>HSFW 28</td>
</tr>
<tr>
<td>- the arrangements for implementing NICE guidelines.</td>
<td>Children’s NSF 10</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to health services managers and the pharmacist.</td>
<td></td>
</tr>
</tbody>
</table>

#### 39. Systems are in place to ensure that medicines are handled safely and securely. There is safe pharmaceutical stock management and use.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check:</td>
<td>R (98) 7, 49</td>
</tr>
<tr>
<td>- the arrangements for storage</td>
<td>RPJDL 55</td>
</tr>
<tr>
<td>- that stock is appropriately labelled</td>
<td>ERJO 72.1</td>
</tr>
<tr>
<td>- the arrangements for stock rotation</td>
<td>SfBH C4(d), C4(e)</td>
</tr>
<tr>
<td>- disposal of unwanted medications.</td>
<td>HSFW 19</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask staff about the procedure for dispensing stock.</td>
<td>Children’s NSF 10</td>
</tr>
</tbody>
</table>
40. The establishment has a system to collect quality aggregated prescribing data to inform effective medicines management and clinical governance, and to demonstrate value for money.

**Evidence**

- **Documentation:** check:
  - data collection procedures
  - that the medicines and therapeutic committee receives aggregated prescribing data.

**Staff:** speak to the pharmacist.

**References**

- R (98) 7, 10, 49
- RPJDL 55
- ERJO 72.1
- HSfW 25, 27
- Children’s NSF 10

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**Dentistry**

41. During induction children and young people receive an initial screening by a dentist identifying their individual oral health needs.

**Evidence**

- **Documentation:** check:
  - dental records
  - treatment plans.

**Staff:** speak to:

- the health services manager
- the dentist
- any PCDs (professionals complementary to dentistry).

**Children and young people:** ask whether they had an initial screening and when.

*Cross-reference with the first days in custody inspector.*

---

42. Children and young people receive oral health promotion, dental checks and treatment at least to a standard and range equal to that normally commissioned by the PCT for similar age groups in the community. Children and young people have access to proprietary oral health products.

**Evidence**

- **Questionnaire**
- **Documentation:** check:
  - dental records and treatment plans
  - dental waiting lists over the last six months

**References**

- R (98) 7, 1, 6, 10
- RPJDL 49
Section 4 – healthcare

Health services: primary care

- canteen lists for oral health products
- that provision is based on an individual’s identified needs (including orthodontic treatment when indicated) and is timed to account for their likely length of stay.

Staff: speak to:
- the health services manager
- the dentist
- any PCDs.

Children and young people: ask whether they have a written treatment plan outlining their treatment needs.

Cross-reference with the prison shop inspector.

43. Children and young people’s dental health services, including the safety of the practising environment and quality of care, are assured by independent inspection and monitoring under the same arrangements used by the PCT for other dentists in primary dental care.

Evidence

Documentation: check:
- the record of the dentist’s qualifications
- the most recent audit reports/evaluation and any other documentation relating to clinical governance issues, including copies of any recent inspection by another body.

Staff: speak to the dentist and the health services manager about liaison with the PCT and dental practice adviser.

44. Out of hours and emergency dental cover is well organised, responsive and effective.

Evidence

Documentation: check:
- the details of the contract/SLA – ensure the cover is already established, well-arranged, well-structured and coordinated
- cost-effectiveness.

Staff: ask the dentist and health services manager whether staff, particularly health services staff, know that this service is available and that they know the protocols/procedures to access it when necessary.

Children and young people: ask what information they have been given about emergency dental services.

Cross-reference with the applications and complaints inspector.
Inpatient care

45. **Health services bed spaces do not form part of the establishment’s certified normal accommodation (CNA) and admission is only on assessment of clinical need.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td></td>
</tr>
<tr>
<td>• recent admissions to health services and any overcrowding drafts</td>
<td>R (98) 7, 11</td>
</tr>
<tr>
<td>• the CNA certificate.</td>
<td>RPJDL 51</td>
</tr>
<tr>
<td><strong>Staff:</strong> speak to the health services manager.</td>
<td>Children’s NSF 6, 7</td>
</tr>
</tbody>
</table>

46. **Inpatient facilities are not used by default to accommodate vulnerable children and young people, those with a disability, or those having difficulty coping within the establishment.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Documentation:</strong> check the records for the inpatient population.</td>
<td>ERJO 61</td>
</tr>
<tr>
<td><em>Cross-reference with the safeguarding inspector.</em></td>
<td>Children’s NSF 6, 7</td>
</tr>
</tbody>
</table>

47. **Inpatients have access to therapeutic intervention and constructive activity, with access to the same range of activities as other children and young people unless their clinical condition precludes it.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check:</td>
<td></td>
</tr>
<tr>
<td>• the range of activities being undertaken by inpatients, specifically the equality of provision and access for those with mental health problems</td>
<td>RPDJL 31, 32</td>
</tr>
<tr>
<td>• that regime activities are provided for any child or young person unable to leave the health services unit</td>
<td>ERJO 50</td>
</tr>
<tr>
<td>• that children and young people who are located in cells with CCTV or on constant watch are able to maintain an appropriate level of dignity</td>
<td>Children’s NSF 6, 7</td>
</tr>
<tr>
<td>• that children and young people do not eat in their cell unless there is a clinical reason for doing so</td>
<td></td>
</tr>
<tr>
<td>• that children and young people who are not well enough to leave their cells have access to appropriate recreational facilities.</td>
<td></td>
</tr>
</tbody>
</table>
Section 4 – healthcare

Health services: secondary care

Documentation: check:
- the inpatient regime
- the records of those who are not permitted to leave the unit
- that risk assessments are in place when children and young people mix with adults in inpatient units.

Children and young people: ask:
- how they spend their time
- what activities and services are available to them.

Cross-reference with learning and skills, PE and time out of cell inspectors.

Expectations – secondary care

48. Children and young people receive health services that are not unnecessarily restricted by security procedures.

Evidence

Documentation: check appointment records, and see if all patients have been seen by secondary care consultants within NHS time limits.

Staff: ask:
- whether any appointments (internal and/or external) have been cancelled for security reasons in the last three months
- how many appointments have been rearranged due to a lack of escort facilities and how many of these have been rearranged on multiple occasions.

Children and young people: ask children and young people who have had recent appointments (internal and/or external) whether any previous appointments been cancelled.

Cross-reference with behaviour management and security inspectors.

References

RPJDL 31
ERJO 53.2

49. Children and young people who have appointments and continuing treatment with specialist services are not moved unless appropriate arrangements are available in the new establishment to ensure continuity of care.

Evidence

Documentation: check the number of cancellations of external appointments, including those for orthodontic treatment, as a result of transfer.

References

R (98) 7, 10, 18

HMIP: Expectations
Section 4 – healthcare

Health services: mental health

Staff: speak to:
• health services staff
• the dentist
• officers.

Cross-reference with the dentistry inspector.

Expectations – mental health

50. All discipline staff have the appropriate training to recognise and take appropriate action when a child or young person may have emotional, behavioural and/or mental health problems and work effectively with health staff to ensure their care.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check:</td>
<td>RPJDL 85 ERJO 128.1, 129.3 Children’s NSF 9 PMH</td>
</tr>
<tr>
<td>• training programmes and schedules</td>
<td></td>
</tr>
<tr>
<td>• evaluations showing changed attitudes to and understanding of emotional, behavioural and mental health problems.</td>
<td></td>
</tr>
<tr>
<td>Staff: speak to:</td>
<td></td>
</tr>
<tr>
<td>• mental health staff who have delivered training</td>
<td></td>
</tr>
<tr>
<td>• officers, particularly those in the segregation unit, on reception, and those involved in vulnerability assessments.</td>
<td></td>
</tr>
<tr>
<td>Children and young people: ask if they find staff on the wings and in health services understanding and approachable.</td>
<td></td>
</tr>
</tbody>
</table>

Cross-reference with safeguarding, relationships, personal officers and residential units inspectors.

51. Where it is identified that a child or young person has had previous contact with mental health services in the community, a referral to the children and adolescent mental health services (CAMHS) is always made and information about previous history actively sought and subsequently used.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check:</td>
<td>R (98) 7, 7, 10 ERJO 62.2 SfBH D2 b, c HSfW 12 d Children’s NSF 9 PMH</td>
</tr>
<tr>
<td>• that clinical records, including receptions screening documentation, contain CAMHS referrals and assessments, signed consents to access previous medical records and clinical summaries and letters, etc, from elsewhere</td>
<td></td>
</tr>
<tr>
<td>• that there is evidence that information contained in ASSET and other reports has been used</td>
<td></td>
</tr>
</tbody>
</table>

HMIP: Expectations
for involvement of the local authority in the case of looked-after children.

Staff: speak to mental health in-reach staff about procedures.

Cross-reference with first days in custody inspector.

52. Children and young people have access to tier 1 and 2 (CAMHS) services for general advice and treatment, mental health promotion, counselling and referral as required.

**Evidence**

- referral patterns, waiting times and caseload information
- clinical audit reports
- that there is equality of access to therapies for all children and young people
- that there is continuity of care for children and young people who have just arrived or have been transferred, where relevant.

**Staff:** check that:

- children and young people have access to a range of professionals including GPs, health visitors, teachers, social workers, YOT workers and voluntary agencies for tier 1 services
- children and young people have access to primary mental health workers, psychologists, counsellors and paediatric clinics for tier 2 services
- children and young people have access to snoozelum rooms and other adjunct therapies.

**Children and young people:** ask what information they have been given about the services available to them and how they were treated.

53. Children and young people with severe, complex and persistent disorders who can be managed in the prison have access to tier 3 (CAMHS) services.

**Evidence**

- check referral patterns, waiting times and caseload information.

**Staff:** check that children and young people have access to a range of professionals including child and adolescent psychiatrists, social workers, clinical psychologists, psychiatric nurses, child psychotherapists, occupational therapists, and art, music and drama therapists.

**References**

R (98) 7, 7, 10, 53
ERJO 74
Children’s NSF 9
PMH

(Note: in Wales specialist CAMHS services are also provided at level 2)
Children and young people: ask:
• what information they have been given about the services available to them
• who is involved in their care and whether this is helpful
• whether they feel sufficiently involved
• whether they feel there is anyone not involved in their care who should be.

54. **Services are available to children and young people who need additional therapeutic support for emotional, behavioural and mental health problems.**

**Evidence**

**Documentation:** check:
• the extent of the provision and access to facilities courses, groups, day services and one-to-one options for children and young people experiencing mental health and related difficulties, including learning disabilities/difficulties, ADHD, and personality disorders
• audit information
• that services are linked with education, regimes and resettlement to help with integration and throughcare.

**Staff:** speak to health services staff, including mental health staff, relevant therapists (e.g. art, drama, etc) and education staff, etc.

**Children and young people:** ask those receiving therapeutic support:
• who is involved in their care and whether this is helpful
• whether they feel sufficiently involved
• whether they feel there is anyone not involved in their care who should be.

Cross-reference with learning and skills, time out of cell, residential units, resettlement and diversity inspectors.

**References**

R (98) 7, 7, 10, 52, 53
ERJO 74
EPR 52(3)
SfBH D12 a, b
HSfW 4a–d
Children’s NSF 9
PMH

HMIP: Expectations
55. **Children and young people with severe mental health problems receive multidisciplinary case management that includes their health, drug and alcohol misuse, social, custodial, resettlement, and advocacy needs.**

**Evidence**

**Documentation:** check:
- information sharing protocols
- care programme approach (CPA) documentation and clinical records that indicate effective and comprehensive multi-disciplinary input that covers all identified needs (e.g. primary care and mental health in-reach services, uniformed staff, other disciplines, external agencies, advocacy)
- that care plans are signed by the patient
- that case conferences are attended by relevant professionals, including the advocate
- for family involvement
- Young Persons Substance Misuse Service and ASSET documentation for correlation of information.

**Staff:** ask all disciplines about involvement in case reviews.

**Children and young people:** ask:
- who is involved in their care and whether this is helpful
- whether they feel sufficiently involved
- whether they feel there is anyone not involved in their care who should be.

*Cross-reference with contact with the outside world, substance use and resettlement inspectors.*

**References**

R (98) 7, 7, 10, 52, 53, 55
SfBH D2 a, b, c, D10
HSfW 7, 12 c, d
Children’s NSF 9
PMH

56. **Children and young people with mental health problems are transferred expeditiously under the Mental Health Act to tier 3 or 4 services as clinically indicated. If they have to be moved to another establishment it is in their best interests and their care is not compromised.**

**Evidence**

**Documentation:** check:
- policies and procedures relating to transfers
- the SLA/contract
- clinical records
- ECC and/or care plan documentation.

**References**

R (98) 7, 7, 10, 52, 53, 55
Children’s NSF 9
PMH
EPR 47(1)
Staff: speak to primary care and mental health staff about:
- transfers in and out of the establishment
- whether children and young people have access to a range of facilities depending on need, including secure forensic adolescent units, eating disorder units, specialist neuro-psychiatric teams and other specialist teams (as an example, for children who have been sexually abused).
Learning and skills

Learning and skills are central to the regime of the establishment and all children and young people are engaged in good quality provision that meets their individual needs and enables them to achieve their full potential. Children and young people of statutory school age receive full-time education.

Expectations

1. All children and young people receive an initial assessment that identifies any specific learning support needs and which is used to inform teaching, learning and training planning targets.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>RPJDL 21, 23</td>
</tr>
<tr>
<td>• the effectiveness, efficiency and timeliness of initial assessments, including ASSET</td>
<td>ERJO 62.2f, 62.6</td>
</tr>
<tr>
<td>• the use of pre-custody educational information in the initial assessments, such as previous or existing Statement of Educational Need (SEN) or any other special educational needs</td>
<td>YOIR 38</td>
</tr>
<tr>
<td>• that specific learning support needs are identified and that learning disabilities screening is included, for example for dyslexia, dyspraxia, or attention deficit hyperactivity disorder</td>
<td></td>
</tr>
<tr>
<td>• for links made between initial assessments and training planning targets. Check that targets relate to the whole sentence as opposed to an individual establishment.</td>
<td></td>
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</tbody>
</table>

**Observation:** observe initial assessments.

**Staff:** speak to the head of learning and skills, the head of education, teachers and trainers, the special educational needs coordinator (SENCO), literacy and numeracy coordinators and personal officers. Check:

| • the level of awareness and use of initial assessments and ASSET for pre-existing educational information | |
| • whether they are aware of specific and individual learning support needs. | |

**Children and young people:** ask:

| • about their understanding of the outcome of their assessments | |
| • how their individual needs are met through their training plan | |
| • whether they were consulted throughout the assessment process and whether they have been involved in subsequent regular reviews. | |

*Cross-reference with first days, diversity, personal officer and training planning inspectors.*
2. **Children and young people are allocated to courses at an appropriate level to meet their assessed needs and their aspirations and interests.**

**Evidence**

Documentation: check:
- that the specific needs of children under school leaving age are catered for
- that courses are at the right level to meet individual needs and are matched to the abilities of the children and young people
- personal records, ASSET, training planning records, class registers and records
- that waiting lists are managed to ensure equitable access for all children and young people to the activities which best suit their needs and interests
- how many young people are in full-time/part-time education or vocational training, or a combination of both
- that children and young people are not restricted in their choice of courses through over-restrictive security measures.

Staff: talk to education staff and personal officers and check that they are aware of the allocation of the children and young people for whom they have responsibility. Ask what encouragement is given to encourage children and young people to attend.

Children and young people: speak to children and young people. Ask:
- about their allocation to courses
- whether they think the courses they are on are appropriate
- how attending these courses links to their targets.

*Cross-reference with training planning and personal officers inspectors.*

**References**

RPJDL 38, 43
ERJO 76, 77
YOIR 38

3. **Children and young people attend the activities to which they are allocated and that are set out as objectives in their training plan.**

**Evidence**

Documentation: check:
- the attendance rates for the last 12 months
- how attendance is monitored
- training plans
- if there are any patterns of non-attendance not identified by the establishment
- what action is taken to address attendance problems.

**References**

ERJO 76
YOIR 37
Section 5 – activities

Staff: ask what difficulties, if any, there are in ensuring that children and young people attend the activities to which they have been allocated.

Children and young people: ask:
- if the courses they attend link to their personal plans and targets
- if there are occasions when they cannot get to their classes.

Cross-reference with training planning, behaviour management and security inspectors.

4. **A range of effective and age-appropriate offending behaviour and other interventions is available to promote social integration and personal development.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that:</td>
<td>ERJO 76, 77, 79</td>
</tr>
<tr>
<td>• programmes and interventions are based on a recent needs assessment of the population</td>
<td></td>
</tr>
<tr>
<td>• individual young people undergo multi-disciplinary assessments to identify their needs in relation to offending behaviour programmes and other interventions</td>
<td></td>
</tr>
<tr>
<td>• training plans include targets that can be achieved in custody and in the community and that arrangements are put in place to achieve this</td>
<td></td>
</tr>
<tr>
<td>• offending behaviour programmes and social and life skills are considered within target setting at training planning meetings and young people are able to access programmes and interventions without undue delay</td>
<td></td>
</tr>
<tr>
<td>• there are systems in place to ensure equality of access</td>
<td></td>
</tr>
<tr>
<td>• completion of interventions is recorded in training plans.</td>
<td></td>
</tr>
</tbody>
</table>

**Staff:** speak to staff responsible for assessing young people for offending behaviour programmes and delivering them.

Cross-reference with diversity, training planning and resettlement pathways inspectors.
5. **Children and young people attend activities punctually and activities start and finish in accordance with the published timetable.**

**Evidence**
- **Documentation:**
  - whether sickness cover is included in the terms of the contract
  - education and training department records to see if activities start on time
  - that activities are not affected by regime/staff pressures
  - the number of classes cancelled over the previous six months and how this is monitored by the establishment.

**Observation:**
- start and finish times of activities.

**Staff:**
- ask what the threats to punctuality are.

**Children and young people:**
- how they are brought to education
- whether there are ever late starts and early finishes.

**References**
- ERJO 76
- YOIR 37

6. **Children and young people who refuse to, or regularly do not, attend their allocated activities are supported by individual plans to re-engage them.**

**Evidence**
- **Documentation:**
  - the strategy for refusers/poor attenders
  - that the reasons for non-attendance are monitored and that alternative options are in place
  - for reintegration programmes and support plans for long-term refusers, such as preparation for learning.

**Observation:**
- non-attendance on a specific day of the inspection
- how individuals and themed issues are being managed.

**Staff:**
- how good the links are between education and residential staff so that any non-attendance can be followed up
- what happens to young people who refuse to attend education and how they try to encourage attendance
- what action is taken to investigate the reasons for refusal, e.g. bullying.

**Children and young people:**
- speak to non-attenders.

*Cross-reference with safeguarding and bullying, personal officers, time out of cell and residential units inspectors.*
7. The timetable includes an appropriate range of educational, vocational and physical education activities that enable children and young people to enjoy their education and make good progress, especially in literacy and numeracy. Achievements are accredited appropriately through nationally recognised qualifications.

**Evidence**

**Documentation:** check:

- that the timetable is well-balanced, challenging and suitable for all age groups, e.g. it contains a good mix of academic subjects, vocational training and physical education, as well as evening classes and courses such as drama and art
- for a strong focus on literacy and numeracy basic skills
- that the timetable is well planned
- that lessons are not too long and that the timetable includes a variety of subjects throughout the day
- that most children and young people achieve a useful qualification during their stay
- that the qualifications available are useful and relevant
- that young people are not in full-time employment except to gain a qualification
- departmental evaluation questionnaires
- the proportion of children and young people in full-time and part-time work, learning and skills.

**Observation:** of activities.

**Staff:** ask if provision takes into account children and young people’s attainment before coming into custody, as well as the length of sentence, so that they can make good progress, including the more able.

**Children and young people:** ask:

- if they are satisfied with the range of activities available
- if they feel that they will be able to achieve their education targets.

*Cross-reference with the catering inspector.*
8. Children and young people who are not on normal location have equal access to mainstream education and training activities unless a risk assessment indicates that it is unsafe.

**Evidence**

Documentation: check that education records and risk assessments exist for all those children and young people who are prevented from attending activities.

Observation: of activities provided to those in the care and separation unit and the healthcare centre.

**Staff:** ask:

- if children and young people are ever prevented from attending activities as a behavioural management sanction
- about the arrangements for children and young people in the care and separation unit and in the health services unit. Check that:
  - there is a presumption that all children and young people will attend activities unless they are assessed as unsafe. In these cases check that appropriate, alternative provision is made
  - those not attending normal activities have revised individual timetables.

**Children and young people:** ask young people not on normal location, for example, in the healthcare centre or the care and separation unit, about their access to regime activities and alternative provision. Ask if they understand why they cannot attend normal activities.

*Cross-reference with behavioural management, care and separation and health services inspectors.*

9. Teaching, training and learning are of good quality.

**Evidence**

Questionnaire

Documentation: check:

- curriculum planning and schemes of work
- lesson and training session plans
- how the quality of teaching and training is assured, e.g. session observations
- accreditation and assessment records
- needs analysis records

**References**

RPJDL 38
YOIR 38
Section 5 – activities

Learning and skills

- education and training development plans
- staff qualifications and job specifications
- the inventory of resources
- that age-appropriate materials are used and attention is paid to equality and diversity issues.

**Observation:** lesson/training sessions. Check:
- the use of resources and ICT in lessons
- the links with the local authority and other external agencies to extend the curriculum
- the quality of accommodation
- whether lessons are suitably varied and differentiation is used well to meet the needs of all children and young people
- if they are well-paced and challenging.

**Staff:** discussions with the head of learning and skills, the education manager, teachers (including LSAs), the SENCO and literacy and numeracy coordinators.

**Children and young people:** ask:
- about their work and achievements
- if they are satisfied with the lessons they take part in
- if their lessons are interesting and challenging and whether they feel the lessons are helping them
- how their lessons could be improved.

10. **Children and young people behave well, engage actively in, contribute to and enjoy the activities they are involved in.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td></td>
</tr>
<tr>
<td>- the behavioural management policy for the education department and that it is linked to the behaviour management policy for the establishment and to the rewards and sanctions scheme</td>
<td></td>
</tr>
<tr>
<td>- the number of occasions when young people were sent back to their unit for poor behaviour in the last six months</td>
<td></td>
</tr>
<tr>
<td>- the number of formal exclusions, and the reasons, in the last six months.</td>
<td></td>
</tr>
<tr>
<td><strong>Observation:</strong> lessons – check:</td>
<td></td>
</tr>
<tr>
<td>- the quality of relationships between teaching staff and other disciplines and young people and teaching staff</td>
<td></td>
</tr>
<tr>
<td>- how well young people behave and if teachers are in control</td>
<td></td>
</tr>
</tbody>
</table>

HMIP: **Expectations**
• whether poor behaviour is tackled effectively to ensure good quality learning can take place
• whether the role of LSAs and officers is clear.

**Staff:** speak to education staff and officers. Ask:
• if officers are involved in supporting young people and their teachers in classes
• if there is a time out facility and how it is managed and properly monitored.

**Children and young people:** Ask:
• if they are clear about how poor behaviour is managed
• if poor behaviour is generally managed well
• if they enjoy their lessons.

*Cross-reference with behaviour management, rewards and sanctions and residential units inspectors.*

11. **Children and young people have easy access to a well-equipped library/learning resource centre (LRC) and are encouraged to use it frequently.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>RPJD 41</td>
</tr>
<tr>
<td>• the library/LRC policy</td>
<td>ERJO 76</td>
</tr>
<tr>
<td>• development plans</td>
<td></td>
</tr>
<tr>
<td>• library usage records</td>
<td></td>
</tr>
<tr>
<td>• the service level agreements with local library services</td>
<td></td>
</tr>
<tr>
<td>• the timetabled time in the library/LRC – a minimum of one hour during the week and 30 minutes at the weekend</td>
<td></td>
</tr>
<tr>
<td>• the records for cancelled library sessions</td>
<td></td>
</tr>
<tr>
<td>• the records of book withdrawals and that this includes children and young people not on normal location, for example in health services or the care and separation units</td>
<td></td>
</tr>
<tr>
<td>• that library materials are appropriate for the age group and match the population’s needs</td>
<td></td>
</tr>
<tr>
<td>• that there is access in the evenings and at weekends</td>
<td></td>
</tr>
<tr>
<td>• for consultation with children and young people about what they would like to see in the library</td>
<td></td>
</tr>
<tr>
<td>• that children and young people have access to, for example, the internet, careers information, material in different languages and formats suitable for poor readers, material for young men and young women, a mix of fiction and non-fiction choices, magazines and newspapers</td>
<td></td>
</tr>
<tr>
<td>• that the library is used as a resource for lessons</td>
<td></td>
</tr>
</tbody>
</table>
• the access to impartial information, advice and guidance, e.g. Connexions, careers advice.

Observation: library/LRC sessions.

Staff: ask the librarian/other library staff:
• whether/how often library sessions are cancelled
• if there are ever operational difficulties associated with escorting young people to the library
• if there are good links between library and education staff
• whether the library makes a contribution to the development of children and young people’s literacy.

Children and young people: ask:
• whether/how often library sessions are cancelled
• young people not on normal location, for example in health services or the care and separation unit, about their access to the library and/or to other discrete unit provision
• if the library provides books and materials they need/enjoy
• if the librarian is helpful
• foreign nationals about access and provision.

Cross-reference with health services and care and separation inspectors.
HMIP: Expectations
PE is central to helping children and young people to become confident individuals, maintain a healthy lifestyle, use spare time constructively, develop skills and gain qualifications while in custody and on release back into the community. PE is enjoyable and inclusive for all, regardless of ability or previous experience. Programmes contain a variety of activities to meet the needs and interests of all children and young people.

Expectations

1. **All children and young people have access to three hours of timetabled PE a week (in addition to optional recreational PE) that includes a range of indoor and outdoor activities.**

   **Evidence**
   
   **Questionnaire**
   
   **Documentation:** check:
   - PE and education departmental timetables
   - opportunities for recreational PE
   - the evening and weekend enrichment programme
   - the PE scheme of work
   - attendance records
   - cancellations
   - that there is equal access for all with no disproportionate use by certain groups, and that this is monitored and rectified by the establishment
   - that there is an appropriate balance of indoor and outdoor activities
   - that PE is in addition to and is not substituted for time in the fresh air
   - that exclusion from PE (PE ban) is not used as a punishment or sanction
   - that children and young people not on normal location are able to attend PE unless a risk assessment indicates that it is unsafe for them to do so
   - the level of access for those on the basic level of the rewards scheme
   - the number of people who refuse to attend, the department’s policy on refusal and whether refusers are monitored.

   **References**
   
   BPTP 6
   ERJO 77
   YOIR 41
Section 5 – activities

Physical education and health promotion

**Observation:** check:
- promotional materials in the gym and on the residential wings
- non-attendance on specific days of the inspection and how this is being managed.

**Staff:** ask:
- how they manage/encourage children and young people who do not wish to attend PE
- if they have come across any examples of bans.

**Children and young people:** seek confirmation from children and young people that they are able to access three hours of PE a week, as well as recreational PE.

*Cross-reference with diversity, safeguarding, behavioural management, residential units, care and separation, time out of cell and health services inspectors.*

---

2. **There is an inclusive range of activities that meets the developmental and educational needs of all children and young people, including those who have a health need, regardless of ability. There are opportunities to gain qualifications.**

**Evidence**

<table>
<thead>
<tr>
<th>Documentation: check:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• the PE curriculum</td>
</tr>
<tr>
<td>• PE schemes of work</td>
</tr>
<tr>
<td>• the range and levels of accreditation achieved</td>
</tr>
<tr>
<td>• that qualifications are nationally recognised</td>
</tr>
<tr>
<td>• the minutes of departmental meetings</td>
</tr>
<tr>
<td>• departmental planning documents</td>
</tr>
<tr>
<td>• individual training plans and reviews</td>
</tr>
<tr>
<td>• that training plans make specific reference to health promotion and personal fitness targets which are carried over to the community part of the sentence</td>
</tr>
<tr>
<td>• the range and appropriateness of accreditation offered</td>
</tr>
<tr>
<td>• that there is an appropriate emphasis on developing teamwork, communication and interpersonal skills and there is a good balance between recreational PE, fitness training and skills acquisition and development</td>
</tr>
<tr>
<td>• how children and young people’s views on PE are sought and acted on</td>
</tr>
<tr>
<td>• that there is not an over-emphasis on weight training</td>
</tr>
<tr>
<td>• that team games and sports are encouraged</td>
</tr>
</tbody>
</table>

**References**

- BPTP 6
- RPJDL 12, 47
Section 5 – activities

Physical education and health promotion

- that there is appropriate provision for children and young people who have little or no previous experience of formal PE
- that the range of activities caters for all levels of ability and fitness
- whether there is any use of ROTL for PE-related activities
- whether there are opportunities to play against visiting teams.

**Observation:** check the range and appropriateness of facilities and equipment. Observe lessons.

**Children and young people:** ask whether:
- their views on PE are sought and acted on
- they are satisfied with the range of activities available.

*Cross-reference with catering, prison shop, training planning, diversity, health services, learning and skills, behavioural management, care and separation and resettlement inspectors.*

3. **PE liaises well with health services, the Young People's Substance Misuse Service and other departments and agencies involved in the care and resettlement of children and young people.**

**Evidence**

**Documentation:** check:
- that PE is represented at safeguarding meetings and at ACCT reviews when appropriate
- referral records
- departmental timetables
- attendance records
- how referrals are made to PE from other departments
- how responsive the PE department is to requests and referrals
- how long children and young people who are referred have to wait
- the effectiveness of the links with health services and the Young People’s Substance Misuse Service (YPSMS)
- how well PE is integrated into children and young people’s overall education
- that PE contributes to care plans for children and young people in the care and separation unit when appropriate
- attendance at training planning meetings.

**References**

ERJO 74.2

HMIP: **Expectations**
Section 5 – activities

Physical education and health promotion

Observation: check:
• whether the PE department has an input into smoking cessation, weight loss and other healthy living clinics or programmes offered by health services or the YPSMS
• if the PE department contributes to offending behaviour programmes.

Cross-reference with health services, catering, prison shop, safeguarding, self-harm and suicide prevention, behavioural management, care and separation, substance misuse, training planning and resettlement inspectors.

4. The PE facilities, including showers, are in good condition and are well supervised, so that children and young people feel safe when using them.

Evidence

<table>
<thead>
<tr>
<th>Questionnaire</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ERJO 2, 52.1, 65.88</td>
</tr>
</tbody>
</table>

Documentation: check:
• the records of incidents and accidents over the last six months
• the minutes of departmental meetings
• bullying questionnaire responses.

Observation: observe lessons/sessions. Check:
• the facilities
• the equipment and showering/changing rooms
• that all children and young people have access to showers
• that the showers are sufficient in number, work and are in good condition
• that supervision allows children and young people appropriate privacy
• how children and young people obtain washing materials and PE kit
• the start and end of sessions and the levels of supervision.

Children and young people: ask:
• if they feel safe when using the PE facilities
• whether there are particular areas in which they feel unsafe
• if they feel staff supervision is adequate.

Cross-reference with safeguarding, bullying and health services inspectors.
Faith and religious activity

All children and young people are able to practise their religion fully and in safety. The chaplaincy plays a full part in prison life and contributes to the overall care, support and resettlement of all children and young people regardless of faith, including those of no faith.

Expectations

1. All children and young people are able to attend communal worship/faith meetings for at least one hour each week, and have access to chaplains of their faith, in private when they wish to.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>DHRIN 2</td>
</tr>
<tr>
<td>Documentation:</td>
<td>RPJDL 48</td>
</tr>
<tr>
<td>check:</td>
<td>ERJO 87</td>
</tr>
<tr>
<td>• the number of different religions in the prison population against the different types of chaplains available, and the frequency of visits</td>
<td>YOIR 33</td>
</tr>
<tr>
<td>• the procedure for attending services and that children and young people are not required to make an application to attend</td>
<td></td>
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<tr>
<td>• the procedure for accessing chaplains in private.</td>
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</tbody>
</table>

Observation: check that:

• there is chaplaincy input during induction
• significant events that require the provision of religious ceremonies (e.g. bar mitzvah) are available and involve family or other appropriate people
• services are age-appropriate and encourage participation where appropriate
• the timings of services are well-advertised and appropriate to different religions
• there are good arrangements for access to religious services for children and young people not on normal location, e.g. in health services or the care and separation unit
• there is alternative provision for those where it is deemed unsuitable or not possible for them to attend normal services and that this is recorded in individual wing files
• there is adequate capacity for all those who want to attend communal worship and that it does not clash with other regime activities.
Section 5 – activities

Faith and religious activity

Staff: check that:
- there is an understanding among staff that some children and young people may practise less well-known religions, which may not be represented by the chaplaincy team, but should still be respected and properly catered for
- the procedure for attending services is efficient and does not restrict access
- all members of the chaplaincy team regularly draw keys.

Children and young people: ask if they know the timings of religious services and if they are able to access services freely and speak to a chaplain of their faith without difficulty.

Cross-reference with first days in custody, diversity, health services and care and separation inspectors.

2. Children and young people are able to attend classes and groups in addition to communal worship for the purposes of nurturing faith.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation:</td>
<td>DHRIN 2</td>
</tr>
<tr>
<td>Observation:</td>
<td>RPJDL 48</td>
</tr>
<tr>
<td>Staff:</td>
<td>ERJO 87</td>
</tr>
</tbody>
</table>

Staff: ask chaplaincy staff about the regime and access to classes and groups during the core day and evenings.

Children and young people: ask:
- what support they receive from the chaplaincy team
- whether they feel their spiritual and faith needs are met.

Cross-reference with the learning and skills inspector.

3. All children and young people are given the opportunity for contemplation, reflection and prayer through access to chapels, multi-faith rooms and worship areas that are equipped with facilities and resources for all faiths.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation:</td>
<td>DHRIN 2</td>
</tr>
<tr>
<td></td>
<td>RPJDL 48</td>
</tr>
</tbody>
</table>

Staff: ask chaplaincy staff:
- whether places of worship and rooms are suitable for all faiths, are of sufficient size and are well equipped, and are available at reasonable times.
facilities are set out in such a way as to encourage the participation of children and young people of all faiths and those of no faith.

Children and young people: ask for their views of the facilities and access to them, including whether there is equality for all faiths.

4. Children and young people are able to obtain, keep and use artefacts that have religious significance, provided they do not pose a risk to security.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check there is a policy to allow appropriate artefacts in possession.</td>
<td>DHRIN 2</td>
</tr>
<tr>
<td>Observation: check for evidence of religious artefacts in children and young people’s cells.</td>
<td>RPJDL 48</td>
</tr>
<tr>
<td>Staff: ask whether there is a policy and what items are allowed/disallowed.</td>
<td>ERJO 87</td>
</tr>
<tr>
<td>Children and young people: ask whether they are clear on what is allowed/disallowed.</td>
<td></td>
</tr>
</tbody>
</table>

5. Children and young people are able to celebrate all major religious and cultural festivals and are encouraged to participate in their planning and organisation. All religious festivals are promoted actively by the establishment.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation/documentation: check:</td>
<td>DHRIN 2</td>
</tr>
<tr>
<td>• the provision of festivals against religious festival dates</td>
<td>ERJO 13</td>
</tr>
<tr>
<td>• that festivals are advertised through posters, etc.</td>
<td></td>
</tr>
<tr>
<td>Staff: ask:</td>
<td></td>
</tr>
<tr>
<td>• if they are aware of the major religious festivals and when they are</td>
<td></td>
</tr>
<tr>
<td>• about catering facilities during festivals such as Ramadan, Passover or Lent</td>
<td></td>
</tr>
<tr>
<td>• whether children and young people are encouraged to participate in the organisation of events.</td>
<td></td>
</tr>
<tr>
<td>Children and young people: ask which religious festivals have been celebrated and if young people are ever involved in the organisation, and whether this is ever discussed at consultation meetings.</td>
<td></td>
</tr>
<tr>
<td>Cross-reference with residential and catering inspectors.</td>
<td></td>
</tr>
</tbody>
</table>
6. **Chaplains establish and maintain links with faith communities outside the establishment to help meet the individual needs of children and young people.**

**Evidence**

**Documentation:** check for evidence of community groups coming into the establishment.

**Staff:** ask the chaplaincy team about the links they have developed and with whom.

**Children and young people:** ask about their contact with external groups and how this was arranged.

**Visiting groups:** ask if they feel they can make an active contribution and whether staff facilitate this.

**References**

DHRIN 2
RPJD 48
ERJO 15

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7. **Chaplains can be an integral part of a child and young person’s care.**

**Evidence**

**Documentation:** check training planning documentation, care plans, ROTL forms, etc, for contribution from the chaplaincy team.

**Staff:** ask:

- the chaplaincy team if they are consulted about the children and young people they are involved with at significant times, such as whether they are invited to and attend training planning meetings or other important meetings and are involved in care planning for children and young people
- other staff whether the important role that chaplains can play in a child or young person’s life is recognised.

*Cross-reference with safeguarding, training planning and resettlement pathways inspectors.*

**References**

DHRIN 2
RPJD 48
ERJO 15

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8. **Relevant faith chaplains provide pastoral care to support children and young people, their relatives and staff during significant life events.**

**Evidence**

**Staff:** ask members of the chaplaincy team if they provide support, for instance, when a child or young person has suffered a bereavement, or if they have a seriously ill parent or close relative. Ask staff for examples of good practice. Ask residential staff how they engage chaplains to support them in caring for children and young people both routinely and in times of difficulty.

**References**

DHRIN 2
RPJD 48
YOIR 31, 32
Section 5 – activities

Faith and religious activity

9. The chaplaincy is proactive in providing information, courses and events that educate children and young people about world faiths and promote understanding and acceptance of different religions.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
</table>
| **Documentation**: check: | DHRIN 2  
| • what information is given to children and young people | RPJDL 48  
| • the minutes of chaplaincy meetings to monitor the planning and delivery of courses, etc. | |
| **Observation**: check for posters advertising events and courses. | |
| **Children and young people**: ask what information and courses are on offer and what they feel they have gained as a result. | |

Cross-reference with the diversity inspector.
All children and young people are actively enabled and encouraged to engage in out of cell activities, and they are offered a timetable of regular and varied events.

**Expectations**

1. **Children and young people are normally out of their cells during the day.**

   **Evidence**

<table>
<thead>
<tr>
<th>Documentation:</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>check that the timetable specifies at least 10 hours out of cell each day.</td>
<td>RPJDL 31, 32, 47</td>
</tr>
<tr>
<td><strong>Observation:</strong> check:</td>
<td>ERJO 80</td>
</tr>
<tr>
<td>• the levels of actual time out of cell against recorded levels and conduct a stand-still roll check during the core day</td>
<td>YOIR 37</td>
</tr>
<tr>
<td>• that children and young people are only confined to their cells for the shortest period and only for safety reasons, for roll check, during the night or where there is good reason</td>
<td></td>
</tr>
<tr>
<td>• the time out of cell, including access to association and outside exercise, for those on the basic level of the rewards scheme</td>
<td></td>
</tr>
<tr>
<td>• that daily routines are publicised on every wing and adhered to.</td>
<td></td>
</tr>
</tbody>
</table>

   **Staff:** ask staff during the roll check to identify young people who are locked up and the reasons why.

   **Children and young people:** ask:

   • how much time they generally spend out of their cells, particularly at weekends
   • how often activities are cancelled and if they are given explanations for the cancellations.

   *Cross-reference with the safeguarding inspector.*

2. **Children and young people are given the opportunity of at least one hour of association time every day in addition to the time allocated for domestic tasks.**

   **Evidence**

<table>
<thead>
<tr>
<th>Questionnaire</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong></td>
<td>RPJDL 32</td>
</tr>
<tr>
<td>check:</td>
<td>ERJO 80</td>
</tr>
<tr>
<td>• wing history files</td>
<td></td>
</tr>
<tr>
<td>• that association is only cancelled in exceptional circumstances.</td>
<td></td>
</tr>
</tbody>
</table>

**HMIP:** **Expectations**
Observation: check:
• recorded figures with actual times
• whether association areas are properly equipped and in good order with seating, tables, games and a quiet area for talking
• that children and young people can choose to socialise with peers and/or staff and use the recreational facilities
• that all children and young people have the opportunity to engage in activities if they wish
• that there is sufficient staff supervision
• that staff actively engage with young people.

Children and young people: ask:
• if they are able to relax with their peers
• them to confirm they are not coerced to take part in or not take part in activities.

Staff: ask staff how they ensure that vulnerable children and young people are safe during periods of unlock.

Cross-reference with safeguarding, residential units and relationships inspectors.

3. **Children and young people are encouraged to take part in creative and purposeful recreation and do so safely.**

**Evidence**

**Documentation:** check:
• the programme of evening and weekend activities
• that there is an appropriate range of recreation resources, such as books, magazines and board games
• the involvement of YMCA/youth groups, PE, voluntary and community and arts groups
• that a record is kept of individuals who have not participated
• that reasons are documented in the wing files for those young people not taking part, and that the reasons are justifiable
• for bullying concerns.

**Observation:** check:
• which young people have not taken part in the scheduled daily activity
• that children and young people with physical, sensory and learning difficulties or disabilities have the opportunity to participate in activities
• staff supervision during association and that sufficient staff are available to ensure that the number of children on association are supervised safely.

**References**

- RPJDL 47
- ERJO 50, 77, 79
Section 5 – activities

Staff: ask:
• whether children and young people on each wing participate in evening and weekend activities and hobby groups
• whether staff use their own interests and skills to engage young people
• whether they are aware of those who remain in cell, the reasons why and whether they have checked on them
• what mechanisms are in place for ongoing monitoring
• what action is taken if an individual has particular problems.

Children and young people: ask:
• whether they are consulted about recreation activities
• whether the programme on offer is interesting and enjoyable
• children and young people who have refused to take part in the daily activities why they refused – check for bullying concerns.

Cross-reference with diversity and safeguarding inspectors.

4. All children and young people are given the opportunity and encouraged to spend at least one hour outside in the open air every day.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>RPJDL 47</td>
</tr>
<tr>
<td>Documentation: check:</td>
<td>ERJO 81</td>
</tr>
<tr>
<td>• that there is regular scheduled exercise time in the regime</td>
<td>YOIR 37</td>
</tr>
<tr>
<td>• if movement to and from education/work or PE is included as outside exercise time</td>
<td></td>
</tr>
<tr>
<td>• whether time outside is cancelled unnecessarily.</td>
<td></td>
</tr>
</tbody>
</table>

Observation: check that:
• exercise takes place in accordance with the published timetable, especially for those not on normal location
• seating is available and that there are good recreational facilities available for children and young people
• appropriate clothing is provided for all weather conditions
• staff supervision and engagement is good.

Cross-reference with health services, residential units and safeguarding inspectors.
The primary method of maintaining a safe, well-ordered and constructive environment is the promotion and reward of good behaviour. Children and young people play an active part in developing and maintaining standards of conduct. Unacceptable behaviour is dealt with in an objective, fair and consistent manner as part of an establishment-wide behaviour management strategy, which is underpinned by restorative justice principles and good relationships between staff and young people. The application of disciplinary procedures, the use of force and care and separation are applied fairly and for good reason with good governance arrangements. They are minimised through preventative strategies and alternative approaches: they are not seen in isolation, but form part of the overall behaviour management strategy and have clear links with safeguarding arrangements and violence reduction strategies.

Expectations

1. **There is a clear behaviour management strategy that describes standards of expected behaviour, the outcomes of positive behaviour and the consequences of poor behaviour, including violence.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>Beijing 1.3</td>
</tr>
<tr>
<td>• that the behaviour management strategy involves all departments and all aspects of the regime that provide for the engagement of parents/carers and relevant professionals, including social workers and YOT workers, as appropriate</td>
<td>ERJO 62.3, 62.4</td>
</tr>
<tr>
<td>• that the strategy makes specific links with methods for dealing with fights, assaults and other forms of violent behaviour</td>
<td>YOIR 7</td>
</tr>
<tr>
<td>• that the strategy is in an age-appropriate format and easy to read</td>
<td></td>
</tr>
</tbody>
</table>
Section 6 – good order

Behaviours management

- that there is appropriate emphasis on de-escalation and conflict resolution
- the extent of staff training in relation to behaviour management generally
- that application of the strategy is properly monitored, including ethnic monitoring, and any problems are rectified.

Observation: check:
- for displays on residential units describing behaviour management
- that no unofficial or group punishments are in operation, particularly in relation to access to any activity or association.

Staff: ask:
- if they are able to demonstrate that they understand the behaviour management strategy
- whether they are aware of cultural differences in gesture, body language and expression of emotion when dealing with young people from minority ethnic groups
- if they appreciate the role of mental health problems in inappropriate behaviour and how they would identify and respond to these cases.

Children and young people: ask:
- if they are clear about the consequences of poor behaviour and how good behaviour is rewarded
- whether they were given information as part of their induction
- if they think that staff are fair and consistent in their application of disciplinary procedures
- children and young people whose first language is not English and those with learning difficulties/disabilities whether they understand the rewards and sanctions scheme and disciplinary procedures.

Cross-reference with first days in custody, learning and skills and diversity inspectors.
Section 6 – good order

Behaviour management: security

Expectations – security

2. The elements of ‘dynamic security’ are in place:
   • relationships between staff and children/young people are positive and based on mutual respect
   • children and young people receive appropriate personal attention from staff
   • there is sufficient purposeful activity to occupy children and young people.

   **Evidence**

   **Questionnaire**
   **Observation**: observe:
   • relationships between children and young people and staff, especially during association/exercise, e.g. whether staff engage with children and young people during association, and whether there are enough staff on wings to facilitate good personal officer work.

   **Children and young people**: ask about relationships and attention from staff, particularly:
   • whether there are opportunities to speak to staff when they want to
   • whether they have at least one member of staff that they trust and would be able to confide in.

   *Cross-reference with relationships, personal officers, learning and skills, PE and time out of cell inspectors.*

   **References**
   RPJDL 1
   ERJO 53, 88.3, 127, 128
   YOIR 37

3. Effective security intelligence safeguards the wellbeing of children and young people.

   **Evidence**

   **Documentation**: check:
   • recent security reports and incident sheets
   • whether staff comply with security requirements
   • whether there is appropriate cross-referencing with bullying and violence reduction and safeguarding
   • observation books on residential units for evidence of good staff observation and to see if SIRs are completed as appropriate.

   **Staff**: ask about recent incidents where security reports have led to action.

   *Cross-reference with safeguarding, bullying and substance use inspectors.*

   **References**
   ERJO 53
   YOIR 44
4. **Access to regime activities is not impeded by an unnecessarily restrictive approach to security.**

   **Evidence**
   
   **Observation:** check:
   - access to activities for children and young people on all units, including the care and separation unit or equivalent
   - that movement to activities is managed safely.

   **Documentation:** check:
   - the policy with regard to risk assessments for allocation to activity
   - a sample of risk assessments for allocation to activity
   - that young people are not unnecessarily prevented from attending activities because of a risk averse approach.

   **Staff:** speak to the security governor and staff.

   Cross-reference with time out of cell, PE and learning and skills inspectors.

5. **Children and young people are not routinely strip-searched. A strip-search is only carried out after a thorough risk assessment identifies serious risk of harm to the young person or others, and on the authorisation of a duty governor. Children and young people are never strip-searched using force.**

   **Evidence**
   
   **Documentation:** check that:
   - all strip-searches are logged and include a risk assessment supporting the need for the procedure
   - the risk assessment takes full account of information available about the child
   - guidance on risk assessment places sufficient emphasis on any previous experience of abuse
   - the security manual and/or searching strategy takes account of the need to properly balance security within the establishment with the welfare of the child
   - strip-searching using force is prohibited
   - data about the extent of strip-searching is collected and analysed and routinely monitored by the safeguarding committee.

   **References**
   - ERJO 53.2
   - YOIR 44
   - CRC 37 (C)
   - ERJO 89.1, 2
   - YOIR 46
Observation: observe searching procedures during reception and after visits, etc. Check that:
• children and young people are never strip-searched using force
• temporary separation from others and close supervision is used to prevent risk of harm to the young person or others if a child or young person refuses to cooperate with a strip-search that has been duly authorised by the duty governor.
Staff: ask:
• about their understanding of the establishment’s searching policy and what they would do if a young person refused to comply with a strip-search
• how risk assessments are made regarding the need to strip-search children and young people
• what the procedure is for obtaining authorisation for a strip-search
• whether children and young people are ever required to squat during an authorised strip-search and whether children and young people would be strip-searched using force.
Children and young people: ask about their experience of strip-searching. Ask those who have been strip-searched whether staff explained to them why a strip-search was necessary.

Cross-reference with safeguarding, child protection and first days in custody inspectors.

6. The searching of a child or young person’s cell and possessions is conducted sensitively. The process of the cell search is clearly explained before the search takes place. On completion of the search the room is left tidy.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
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</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>ERJO 89.1, 89.4</td>
</tr>
<tr>
<td>Documentation</td>
<td></td>
</tr>
<tr>
<td>check:</td>
<td></td>
</tr>
<tr>
<td>complaints relating to cell searches over the past three months</td>
<td></td>
</tr>
<tr>
<td>the searching policy to ensure that strip-searches associated with cell searches are risk assessed and only carried out if justified by intelligence</td>
<td></td>
</tr>
<tr>
<td>records of cell searches to ensure that any strip-searches also carried out were appropriately supported by a risk assessment.</td>
<td></td>
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<tr>
<td>Staff: ask:</td>
<td></td>
</tr>
<tr>
<td>about the usual arrangements for cell searches</td>
<td></td>
</tr>
<tr>
<td>if children and young people are strip-searched as part of a cell search – check that this is not routine</td>
<td></td>
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<tr>
<td>whether cell searching procedures involve the appropriate treatment of religious artefacts.</td>
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</tbody>
</table>

HMIP: Expectations
Children and young people: ask:
- about the routine procedure
- if they are clear about why cell searches take place.

*Cross-reference with applications and complaints and faith inspectors.*

**Expectations – rules and routines**

7. Rules and routines are proportionate and promote responsible behaviour and the wellbeing of children and young people. They are clearly understood by staff and children and young people and applied openly, fairly and consistently, with no discrimination.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observation: check that:</td>
<td>ERJO 53.2, 62.3</td>
</tr>
<tr>
<td>• rules and routines are advertised prominently throughout all residential and communal areas in a format that children and young people are able to read and understand</td>
<td>YOIR 7, 44</td>
</tr>
<tr>
<td>• rules and routines are fully explained during the induction process and are reinforced using a range of age-appropriate methods.</td>
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</table>

Children and young people: ask:
- if they understand the rules and if they think they are reasonable and applied fairly
- whether any different rules apply to children and young people in care and separation units or locations other than normal residential units, and whether they understand them and think they are reasonable and applied fairly.

Particular attention should be paid to young people from minority ethnic groups or those with special needs.

*Cross-reference with first days in custody, applications and complaints, residential units and diversity inspectors.*
Section 6 – good order  Behaviour management: *rules and routines*

8. **Inappropriate behaviour on the part of children and young people is challenged.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>ERJO 18, 19, 94.1, 94.2</td>
</tr>
<tr>
<td><em>disciplinary reports and rewards and sanctions scheme warnings</em></td>
<td>YOIR 44</td>
</tr>
<tr>
<td><em>a sample of wing files – look for recordings of aspects of behaviour management and check whether the entries are balanced or purely punitive</em></td>
<td></td>
</tr>
<tr>
<td><em>use of force documentation to ensure that force is not used purely to secure compliance with an order, unless the child or young person, or others, are at risk of harm</em></td>
<td></td>
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<tr>
<td><em>that staff use the lowest level of authority necessary to maintain good behaviour.</em></td>
<td></td>
</tr>
<tr>
<td><strong>Observation:</strong> observe staff interacting with children and young people on wings – staff should demonstrate good interpersonal and conflict resolution skills in managing low level disputes without using official disciplinary measures.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask wing staff:</td>
<td></td>
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<tr>
<td><em>how they would deal with boisterous behaviour</em></td>
<td></td>
</tr>
<tr>
<td><em>if they have received training in working with children and adolescents and challenging adolescent behaviour</em></td>
<td></td>
</tr>
<tr>
<td><em>if they have had training in mediation and conflict resolution</em></td>
<td></td>
</tr>
<tr>
<td><em>to describe an appropriate level of tolerance of normal adolescent behaviour and an appreciation of the need to take time to explain how and why the behaviour is unacceptable to the child or young person concerned.</em></td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask how rules are enforced and how confrontations with staff and other young people are dealt with.</td>
<td></td>
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</table>

*Cross-reference with relationships and learning and skills inspectors.*
**Section 6 – good order**

**Behaviour management: rewards and sanctions**

**Expectations – rewards and sanctions**

9. **The rewards and sanctions scheme is part of a motivational, age-appropriate behaviour management strategy.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Questionnaire</strong></td>
<td>YOIR 6</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td></td>
</tr>
<tr>
<td>• that there are frequent and regular reviews between key staff and children and young people concerning their behaviour and progress in the rewards and sanctions scheme</td>
<td></td>
</tr>
<tr>
<td>• that clear targets are set to encourage promotion and assist those at risk of demotion</td>
<td></td>
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<tr>
<td>• that the rewards and sanctions scheme is a clear part of the behaviour management strategy</td>
<td></td>
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<tr>
<td>• that there is sufficient differentiation between the levels as set out by the rewards and sanctions scheme to encourage responsible behaviour and to motivate children and young people to attain targets set in their training plans</td>
<td></td>
</tr>
<tr>
<td>• that the bottom level of the rewards scheme offers adequate minimum levels of association, exercise, visits, showers, access to phones and time out of cell</td>
<td></td>
</tr>
<tr>
<td>• that the young person’s behaviour is discussed at training planning meetings</td>
<td></td>
</tr>
<tr>
<td>• a sample of cases to ensure that rewards and sanctions are applied consistently and fairly across the establishment – look at reviews for those who have recently been promoted or demoted on the scheme and check for a balance of positive and negative comments</td>
<td></td>
</tr>
<tr>
<td>• for children and young people who are consistently spending time on the bottom level of the scheme and what support they are given to help them progress</td>
<td></td>
</tr>
<tr>
<td>• that the regime for children and young people on the lowest level provides sufficient opportunity and support for them to demonstrate improvement in their behaviour</td>
<td></td>
</tr>
<tr>
<td>• that no-one experiences the double jeopardy of receiving a disciplinary sanction and being demoted on the rewards and sanctions scheme.</td>
<td></td>
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</tbody>
</table>

**HMIP: Expectations**
Observation: observe a review. Check that:
- it was attended by relevant staff
- the young person was assisted to contribute
- the discussion was helpful in explaining to the young person how they could achieve promotion or avoid demotion
- consideration was given to the engagement of parents/carers and relevant professionals, including social workers and YOT workers.

Staff: ask:
- them to demonstrate that they understand, and have an input into, the rewards and sanctions scheme, including appeals
- if the reward scheme is effective in impacting on behaviour.

Children and young people: ask:
- if they understand how the scheme works and whether the scheme motivates them to behave well and achieve their training plan targets
- if they can appeal against decisions made in the rewards and sanctions scheme and whether they are helped to do so
- if they have appealed and what the outcome was.

Cross-reference with training planning, applications and complaints and diversity inspectors.

10. **Children and young people who have achieved the top level offered by the scheme in another establishment are able to retain their enhanced status on transfer from that establishment.**

**Evidence**

**References**

- ERJO 99.1

Documentation: check:
- the policy of the establishment
- whether status level in the rewards and sanctions scheme is recorded on transfer documentation and if there are delays in establishing the enhanced status of children and young people who have been transferred.

Children and young people: speak to young people who have recently transferred from another establishment.

Cross-reference with the courts and escorts inspector.
11. **Children and young people are kept up-to-date with their progress on the scheme and are given access to reports made about them and opportunities to comment. If there is likely to be a change in level this is discussed with the child or young person before it is applied. Children and young people are informed in writing about the reasons when a decision to demote them is made.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>YOIR 6 (3), (4)</td>
</tr>
<tr>
<td>• a sample of case files for procedures followed</td>
<td></td>
</tr>
<tr>
<td>• that meetings are recorded clearly.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• if there are regular meetings with young people to discuss their progress in the scheme</td>
<td></td>
</tr>
<tr>
<td>• if children and young people are offered access to their reports and are given opportunities to comment on written records</td>
<td></td>
</tr>
<tr>
<td>• how the procedures are applicable to those with language or literacy difficulties</td>
<td></td>
</tr>
<tr>
<td>• what role advocates play in the rewards and sanctions review meetings – enquire of advocates.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> speak to young people who have recently been demoted. Ask:</td>
<td></td>
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<tr>
<td>• if they felt the decision was fair</td>
<td></td>
</tr>
<tr>
<td>• if they felt they had sufficient warning that their behaviour was likely to result in demotion</td>
<td></td>
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<tr>
<td>• whether they had help to avoid demotion or gain promotion.</td>
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</table>

*Cross-reference with the diversity inspector.*

12. **A mechanism exists so that children and young people are actively involved in developing the rewards and sanctions scheme.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>ERJO 13</td>
</tr>
<tr>
<td>• the minutes of consultative committee meetings</td>
<td>YOIR 6</td>
</tr>
<tr>
<td>• whether any surveys have been undertaken to obtain young people’s views on the rewards and sanctions scheme.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• by what process children and young people are able to have an input into the rewards and sanctions scheme</td>
<td></td>
</tr>
<tr>
<td>• whether advocates have a role in this.</td>
<td></td>
</tr>
</tbody>
</table>
Children and young people: ask whether they are aware of any consultative processes for them to have an input into or comment on determining standards of behaviour on the rewards and sanctions scheme.  
*Cross-reference with the residential units inspector.*

13. **The rewards and sanctions scheme is monitored and reviewed at least annually by senior managers to check for fairness and to promote responsible behaviour.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check for evidence of recent reviews and subsequent changes in the scheme.</td>
<td>Beijing 26.1</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask how the rewards and sanctions scheme is monitored for fairness and effectiveness.</td>
<td>YOIR 6</td>
</tr>
</tbody>
</table>

*Cross-reference with the diversity inspector.*

**Expectations – adjudications**

14. **Adjudications are used as a last resort to deal with the most difficult and challenging behaviour and the behaviour management policy supports this.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>ERJO 94</td>
</tr>
<tr>
<td>• that the behaviour management policy clearly sets out the role of adjudications as a method of last resort</td>
<td></td>
</tr>
<tr>
<td>• a sample of adjudications to ensure that they are being used appropriately.</td>
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</table>

Check separation is not used as an adjudication punishment and there are management checks in place to ensure that adjudications are being used appropriately.
15. Checks are made to ensure that children and young people understand the charges they face and the procedures that will be followed.

**Evidence**

**Documentation**: check:
- that information given to children and young people regarding all disciplinary charges and the explanation of charges is age-appropriate and easy to read
- recent adjudication forms and the use of translation services for this purpose over last three months
- that adjudication hearings are properly written out and recorded.

**Observation**: look at the adjudication processes. Check that:
- the process is delivered in an age-appropriate, non-intimidating setting, such as a room on the residential unit
- the language used is appropriate for children and young people
- the process is responsive to individual needs, such as learning difficulties and disabilities
- the proceedings are delivered in a clear and fair manner.

**Staff**: speak to staff about procedures for children and young people who are less able to read, write and understand English.

**Children and young people**: speak to children and young people about adjudications to ascertain general levels of awareness and understanding – check that they understand the language used.

*Cross-reference with the diversity inspector.*

16. Children and young people facing serious charges whose sentence permits added days are seen by an independent adjudicator as early as possible but always within one month of the opening of the hearing.

**Evidence**

**Documentation**: check adjudication records, especially with regard to timescales.

**Staff**: ask:
- if all serious charge cases where the young person’s sentence permits added days as a punishment are referred to the independent adjudicator
- if children and young people are supported by advocates.
17. All children and young people facing disciplinary charges are given time and help to prepare their case and are specifically informed about their right to obtain legal advice and their right to appeal. Children and young people are actively encouraged and assisted to take part.

**Evidence**

**Documentation:** check:
- adjudication reports from the last three months and look for evidence of good participation by young people, of additional help being given when required, and of legal advice or advocates being used
- the number of appeals in the last three months.

**Observation:** observe a sample of adjudications. Check:
- that children and young people are allowed to hear all evidence against them, give reasons for their actions and question the officer laying the charges, as well as the relevant witnesses
- that staff offer an appropriate level of support and encouragement throughout these stages
- what information is given about appeals in the initial hearing
- that young people are reminded that they may have an advocate present.

**Staff:** speak to advocates about their involvement in adjudications. Ask if there is an agreement about how they can prepare children and young people for, and support them during or after adjudications and appeals. Ask what arrangements are made for children and young people with learning disabilities or those who need extra help to prepare their case. Ask residential staff what steps they have taken to promote access to legal advice for children and young people facing disciplinary charges.

**Children and young people:** speak to young people who have been the subject of an adjudication. Ask:
- whether they felt able to participate in the proceedings, whether they know they have the right to appeal, and how they get help to do so
- if they were informed beforehand of the procedures that would be followed during the hearing, especially if it was the first time they had faced an adjudication
- if they have been encouraged to speak to an advocate, especially for any legal advice.

*Cross-reference with the diversity inspector.*
18. Findings and punishments are age-appropriate and are made fairly and consistently on the evidence available; mitigating circumstances are considered. The results are explained to the child or young person.

**Evidence**

- the establishment routinely monitors adjudications for fairness and consistency and this includes links with ethnic monitoring
- there are standardisation meetings
- there is regular and frequent analysis for patterns or trends in key areas
- in the absence of trend analysis the establishment carries out a sampling exercise
- adjudications are conducted by staff dedicated to the juvenile unit on split sites
- punishments are proportionate to the charge proven
- restorative justice and mediation options, as well as suspended punishments, are considered.

**References**

ERJO 95.1
YOIR 59, 60, 60A, 60B

**Observation:**

- the language used is age-appropriate and that terminology is explained to children and young people, e.g. ‘mitigation’
- children and young people who do not communicate well, for whatever reason, are given additional help to ensure that they understand the proceedings
- children and young people are given a record of the hearing.

**Children and young people:**

- whether they felt the hearing was fair and that they were listened to
- if they understood the outcome.

*Cross-reference with the diversity inspector.*
19. Force is only used legitimately, when there is an immediate risk to the safety of the child, young person or others or of serious damage to property, always as a last resort and when all other alternatives have been explored. Force is not used as a punishment or to simply obtain compliance with staff instructions.

**Documentation:** check that:
- the establishment routinely monitors and analyses the use of force, which includes links with ethnic monitoring
- there is regular and frequent analysis for patterns or trends in key areas
- use of force documentation is completed correctly and properly authorised, especially medical records
- there is evidence of age-appropriate de-escalation
- minimum force is used for the shortest time necessary
- there is evidence that the degree of force used is proportionate to the assessed risk
- the use of handcuffs is properly authorised in advance and only when there is an immediate risk to the child, young person or others
- children and young people are always released as soon as force is no longer justified
- no other type of mechanical restraint is used on children
- any injuries are properly recorded and that child protection referrals are made where necessary.

**Observation** where force is used check:
- that staff are trained in and use only approved techniques with no more force and for no longer than is necessary
- for continuous attempts at de-escalation
- that staff always debrief with their managers following incidents.

**Staff:** ask:
- about their understanding of the circumstances in which they can use force
- how they would deal with different scenarios and what guidance and training they have been given to de-escalate difficult situations and manage young people when they lose self control
- how they ensure that the use of force is only used as a last resort.
**Children and young people:** speak to a sample of children and young people subjected to control and restraint within the last three months.

*Cross-reference with diversity, safeguarding and child protection inspectors.*

---

**20.** There is a cooling off/time out opportunity for children or young people who temporarily lose self-control or give clear indications that they are about to lose self-control and present a risk of harm to themselves or others. Cooling off/time out under staff supervision is used as part of agreed diversion/diffusion and de-escalation techniques and for the shortest possible time.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> look at the policy on the use of cooling off/time out. Check that:</td>
<td>ERJO 91.4, 93 YOIR 51</td>
</tr>
<tr>
<td>• there is clear governance</td>
<td></td>
</tr>
<tr>
<td>• reintegration is encouraged as soon as possible</td>
<td></td>
</tr>
<tr>
<td>• efforts are made to engage with the young person and find out why they needed time out</td>
<td></td>
</tr>
<tr>
<td>• there is a register of use, including monitoring arrangements</td>
<td></td>
</tr>
<tr>
<td>• monthly reports are submitted to the safeguarding committee.</td>
<td></td>
</tr>
<tr>
<td><strong>Observation:</strong> check that:</td>
<td></td>
</tr>
<tr>
<td>• there is a separate cooling off/time out facility rather than sending young people to their cells</td>
<td></td>
</tr>
<tr>
<td>• the facility is suitable for purpose and is not a traditional special cell</td>
<td></td>
</tr>
<tr>
<td>• the facility is conducive to staff engaging with young people in a safe environment until such time as they regain self-control and are able to return to normal location.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• how they use cooling off/time out</td>
<td></td>
</tr>
<tr>
<td>• if they been trained in diversion/diffusion and de-escalation techniques.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> speak to a sample of young people who have experienced time out. Ask:</td>
<td></td>
</tr>
<tr>
<td>• whether it helped them</td>
<td></td>
</tr>
<tr>
<td>• whether staff engaged with them before, during and after the episode.</td>
<td></td>
</tr>
</tbody>
</table>

*Cross-reference with safeguarding, child protection and diversity inspectors.*
21. Children and young people are always given the opportunity to talk about their experience with a trusted and impartial member of staff when they have calmed down and as soon as possible after the use of force. This is fully documented and retained in their personal file. Young people are offered the opportunity to make a complaint if they feel that it is justified.

Evidence

Documentation: check that:
- the use of force policy or the behaviour management policy includes a requirement to debrief children and young people
- there is a pro forma or agreed procedure for such debriefs which includes the opportunity for them to make a written contribution to the incident report
- records of discussions after the use of force are present in individual wing files.

Staff: speak to staff about procedures following the use of force. Ask:
- if they are trained for this aspect of the procedure
- if children and young people have access to advocates if they wish.

Children and young people: speak to a sample of young people who have been restrained about the procedure following the use of force. Ask:
- if any discussions covered why force was used and how they might behave differently in the future to avoid it happening again
- how the experience made them feel.

Cross-reference with the applications and complaints inspector.

22. The use of force is monitored by the establishment by ethnicity, location, etc, and emerging patterns and/or trends are acted on. There are good links with the safeguarding committee, particularly with regard to injuries sustained during restraint, complaints about excessive or inappropriate use of force and feedback from children and young people through the debriefing process.

Evidence

Documentation: check:
- that the use of force has the highest level of scrutiny and governance – there is a written protocol for the videoing of planned removals which protects the safety and dignity of the young person

References

ERJO 88.3
YOIR 8
RPJDL 84
ERJO 90.4
YOIR 52(6)
Section 6 – good order

Behaviour management: use of force

• whether consideration is given to notifying parents/carers, or the local authority with regard to looked-after children and relevant professionals, including YOT workers, following the use of force
• monitoring reports for the last three months, for the total number of incidents, type of incident, whether incidents involve a range of children and young people or a small number, the location of incidents, the range of staff involved, and the injuries sustained, as well as other adverse reactions such as difficulty breathing, vomiting, etc, during or after physical restraint. Compare across establishments of the same type
• that data are analysed and discussed at security committee meetings and safeguarding committee meetings and that appropriate action is taken
• that incidents are analysed via the checking of videos and that planned use of force is carried out correctly. Any learning from this analysis is fed back to managers and staff to enable them to develop appropriate strategies
• the extent of complaints and any injuries sustained by children and young people subjected to the use of force and that incidents of injuries were referred to the child protection coordinator. This data is routinely analysed by the security committee and carefully monitored by the safeguarding committee.

Observation: check a sample of videoed use of force incidents to double check the quality assurance procedures and that the use of force was deployed correctly.

Staff: ask:
• about an awareness of any issues relating to the use of force highlighted through monitoring
• whether health services staff check for injury patterns, unexplained injuries, etc.

Children and young people: ask those who have been recently restrained:
• whether they thought the level of the use of force was appropriate and properly recorded
• if they were given time to regain their dignity and composure after the incident
• if any injuries caused as a result of the use of force were recorded and if they were recorded accurately.

Cross-reference with safeguarding, child protection, application and complaints, diversity and health services inspectors.
23. **Health services staff attend during and after all control and restraint incidents and medical assessments are completed after each occurrence.**

**Evidence**

- **Documentation:** check that medical assessments are carried out and are attached to use of force documentation.

**References**

- RPJDL 64
- YOIR 52 (3)

**Staff:** speak to health services staff. Ask:
- whether there is a mechanism to check that they always attend planned control and restraint incidents and subsequently for spontaneous incidents, and that medical assessments are completed
- what they would do if they thought force was disproportionate.

*Cross-reference with the health services inspector.*

**Expectations – care and separation**

24. **Children and young people whose behaviour requires them to be temporarily separated from others are located in a suitable environment where their individual needs can be fully met.**

**Evidence**

- **Documentation:** check:
  - that each young person has an individual care/intervention plan
  - that the plan identifies the problem behaviour and underlying problems, and appropriate resources are in place during the period of care and separation to address these
  - that plans include a staged reintegration to successfully return young people to normal location as quickly as possible
  - that reviews are multi-disciplinary and are held at least weekly
  - that the final review includes an opportunity for the young person to discuss the period of separation
  - a sample of records to see whether children and young people are separated for the shortest possible period
  - whether the decision to separate the young person can be justified
  - that separation is not being used repeatedly or for long periods to hold children and young people with complex mental health problems who should be managed within a secure mental health setting

**References**

- ERJO 93, 95.4
- YOIR 51
Section 6 – good order

Behaviour management: care and separation

• that consideration is given to engaging parents/carers and relevant professionals, including social workers, YOT workers and advocates.

Observation: check that:
• the environment in which the young person is separated is suitable to meet their needs – it is age-appropriate, properly resourced and offers well-maintained facilities
• children and young people are able to attend care planning meetings, are encouraged and enabled to actively participate and are told that they can have an advocate with them.

Staff: speak to staff responsible for the care of the young person while they are separated about their engagement with young people and their role in implementing care/intervention plans.

Children and young people: ask:
• if they are clear about why they have been separated
• if they have seen and agreed their care plan
• if they feel that they are being given the help they need to return to normal location.

Cross-reference with health services, time out of cell, learning and skills and PE inspectors.

25. Children and young people who are located in a separation unit are separated with the proper authorisation and are located for appropriate reasons. Separation is not used as a punishment.

Evidence

<table>
<thead>
<tr>
<th>Documentation: check:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• the use of the separation unit in the last three months, e.g. the frequency, ethnic monitoring and reasons for segregation</td>
</tr>
<tr>
<td>• that the unit is not being used for reasons of population management, or to hold vulnerable children and young people who only require protection or who cannot cope, or those who should be in health services</td>
</tr>
<tr>
<td>• that proper authorisation is compatible with valid reasons</td>
</tr>
<tr>
<td>• that young people are not separated solely as a punishment</td>
</tr>
<tr>
<td>• that children and young people have the opportunity to make representations to the governor before being segregated.</td>
</tr>
</tbody>
</table>

Observation: check that a full regime is offered to children and young people while they are temporarily separated. Subject to risk assessment they have the same access to visits, showers, telephones, education, etc, as children and young people on normal location, which is agreed in their care plan.

Cross-reference with adjudications, diversity, safeguarding, bullying and health services inspectors.
26. **Children and young people who are located in a separation unit are not routinely strip-searched and are only strip-searched when a risk assessment indicates that there is a risk of harm to self or others.**

**Evidence**

- that the policy for the separation unit specifies procedures for strip-searching
- risk assessments
- that the local searching strategy has been adapted to reflect a suitable risk-assessed approach.

**References**

- ERJO 89.2
- YOIR 46

**Staff:** ask about their understanding of the procedures relating to strip-searching children and young people.

**Children and young people:** speak to children and young people currently or recently placed in a separation unit.

*Cross-reference with safeguarding and child protection inspectors.*
Catering

Children and young people are offered a sufficient choice of healthy and varied meals based on their individual requirements. The menu reflects the dietary needs of growing adolescents. Food is prepared and served according to religious, cultural and prevailing food safety and hygiene regulations.

Expectations

1. **Meals are healthy, varied and balanced and cater for special diets. They always include two substantial meals each day. The content and quantity reflects the needs of growing adolescents.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>ERJO 68</td>
</tr>
<tr>
<td>Documentation: check that:</td>
<td>YOIR 20</td>
</tr>
<tr>
<td>• menus offer healthy options and enable children and young people to have five portions of fruit or vegetables a day</td>
<td></td>
</tr>
<tr>
<td>• there is the option of a substantial meal at lunchtime as well as for the evening meal and at least one of those is a cooked meal</td>
<td></td>
</tr>
<tr>
<td>• menus offer a choice of meals, including an option for vegetarian, vegan, religious, cultural and medical diets, taking into account individual children and young people's intolerances/allergies and the effect of food additives – options should be broadly representative of the population and all menu choices should be offered to the same standard</td>
<td></td>
</tr>
<tr>
<td>• pregnant young women and nursing mothers receive an appropriate diet.</td>
<td></td>
</tr>
</tbody>
</table>

**Observation:** sample food at various meal times and check that:

• meal portions are adequate to satisfy adolescent appetites and children and young people are given enough to eat and drink throughout the day

• food is of good quality

• children and young people are given a healthy snack in the evening and they have access to a hot drink after evening lock-up – flasks are available to all

• there is access to drinking water at all times of the day and night.

**Staff:** ask if:

• there are systems in place to ensure that new arrivals and children and young people on transfer or at court do not miss out on their main meal

**HMIP: Expectations**
• options for religious or cultural groups are open to all and not just those who actively practise their religion
• the advice of dieticians and nutritionists is regularly sought to make improvements to the menu and to take account of relevant current research findings.

Children and young people: ask:
• if they are satisfied with the choice available and the quality and quantity of the meals they receive
• if they have enough to eat overall
• whether pregnant young women and mothers receive specific nutritional advice and an appropriate diet.

Cross-reference with faith and health services inspectors.

2. Catering arrangements and menus take into account the need to promote healthy eating as part of a healthy lifestyle.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that:</td>
<td></td>
</tr>
<tr>
<td>• menus include a healthy option which is clearly highlighted</td>
<td>ERJO 68</td>
</tr>
<tr>
<td>• there is a range of material in multimedia offering advice on healthy options</td>
<td>YOIR 20</td>
</tr>
<tr>
<td>• there are clear links with health promotion initiatives led by healthcare and/or the PE or learning and skills departments.</td>
<td></td>
</tr>
</tbody>
</table>

Staff: ask:
• how children and young people are encouraged to make healthy choices and if they are given sufficient information to help make them
• how young people who have eating disorders or weight problems are managed and supported
• whether all young people have an opportunity to attend cookery classes which include planning meals, budgeting, etc.

Children and young people: ask:
• what information they are given about healthy eating and how it fits into a healthy lifestyle
• what encouragement they get to eat more healthily.
If possible, a health inspector should speak to those who have sought help with weight problems or have an eating disorder to ask them if the support they are receiving is sufficient to meet their needs.

Cross-reference with health services, learning and skills, PE and resettlement pathway inspectors.
Section 7 – services

Catering

3. **Children and young people dine communally at proper meal times.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check that:</td>
<td>ERJO 68.2</td>
</tr>
<tr>
<td>• breakfast is served on the day it should be eaten, lunch is served between noon and 1.30pm and dinner between 5pm and 6.30pm – on all wings</td>
<td></td>
</tr>
<tr>
<td>• young people have the option to dine communally at all meal times and are encouraged to do so</td>
<td></td>
</tr>
<tr>
<td>• dining areas are safe and allow staff and young people to dine together in a relaxed and sociable atmosphere</td>
<td></td>
</tr>
<tr>
<td>• children and young people are given enough time to eat their meal in comfort.</td>
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</tbody>
</table>

**Staff:** ask:

- if they are aware of the children or young people who refuse to dine in association at meal times and whether the reasons are recorded
- if this is monitored and appropriate action taken to address underlying problems, e.g. bullying, lack of social skills, depression.

**Children and young people:** ask:

- if all meals are eaten communally, usually with staff
- if meals are served regularly and in accordance with published timetables
- if they are rushed to finish their meals
- children or young people who regularly refuse to dine in association why this is and what staff have done to help.

*Cross-reference with safeguarding, bullying, residential units, health services and time out of cell inspectors.*

4. **Staff supervise the serving and preparation of meals in order to prevent tampering with food and other forms of bullying.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check the supervision:</td>
<td>ERJO 88.1, 88.2</td>
</tr>
<tr>
<td>• of the preparation of food in the kitchen</td>
<td></td>
</tr>
<tr>
<td>• at the servery</td>
<td></td>
</tr>
<tr>
<td>• of the queues.</td>
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</tbody>
</table>

**Staff:** ask what steps they take to prevent tampering with food and if they are confident that procedures are adequate.
Children and young people: ask about normal procedures for supervision and whether they have any concerns about tampering with food. 

_Cross-reference with bullying and security inspectors._

### 5. Menus take into account comments from regular and frequent consultation with children and young people.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>ERJO 13</td>
</tr>
<tr>
<td>• that menus are available in accessible formats</td>
<td></td>
</tr>
<tr>
<td>• how comments/complaints about catering arrangements (written and verbal) are collected, analysed and acted on</td>
<td></td>
</tr>
<tr>
<td>• the minutes of consultative committee meetings to see if the issues raised relating to catering are acted on and that the minutes are circulated to children and young people.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• how staff facilitate good consultation</td>
<td></td>
</tr>
<tr>
<td>• how frequently comments books are consulted and acted on</td>
<td></td>
</tr>
<tr>
<td>• how verbal comments are taken account of</td>
<td></td>
</tr>
<tr>
<td>• how children and young people receive feedback</td>
<td></td>
</tr>
<tr>
<td>• if catering is a standard agenda item at consultative committee meetings.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• what mechanisms are in place to allow children and young people to comment on catering arrangements, if they are effective, and if everyone, not just the wing representative, is able to have input.</td>
<td></td>
</tr>
<tr>
<td><em>Cross-reference with residential units, applications and complaints and diversity inspectors.</em></td>
<td></td>
</tr>
</tbody>
</table>

### 6. All areas where food is stored, prepared or served are properly equipped and well managed and conform to the relevant food safety and hygiene regulations.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>ERJO 65.1, 68.2, YOIR 20</td>
</tr>
<tr>
<td>• health and safety audits and environmental health officer reports</td>
<td></td>
</tr>
<tr>
<td>• that there are up-to-date health and safety and food hygiene certificates</td>
<td></td>
</tr>
</tbody>
</table>
7. Religious, cultural or other special dietary requirements relating to food procurement, storage, preparation, distribution and serving are fully observed and communicated to children and young people.

**Evidence**

**Documentation:** check that:
- there are up-to-date and relevant halal certificates
- an impact assessment has been completed.

**Observation:** check that:
- halal certificates are displayed where children and young people can see them
- utensils are used appropriately in the kitchens and at the serveries to avoid cross-contamination.

**Staff:** ask kitchen staff about special arrangements for different types of food, and special dietary requirements for specific religions, foreign nationals, etc.

**Children and young people:** ask if they have confidence in the preparation and content of specialist meals and what is done to reassure them. Ask servery workers what training is offered.

*Cross-reference with learning and skills, health services and diversity inspectors.*
Prison shop

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

Expectations

1. **Children and young people can make purchases from a suitable range of reasonably priced items.**

   **Evidence**
   - **Documentation:** check that:
     - there is a good range of products on offer, including the opportunity to purchase religious artefacts
     - goods are age- and gender-appropriate
     - young people from black and minority ethnic groups and foreign nationals have a choice of products to meet their needs and choices
     - the cost of items is equivalent to that of a local supermarket
     - children and young people without access to private money are not disproportionately disadvantaged by the prices set
     - magazines can be ordered and are received within a week of publication
     - items are not prohibited due to security prohibitions unless the prohibition is based on a risk assessment.

   **Staff:** ask them to describe the shop ordering and delivery system.

   **Children and young people:** ask about the efficiency of the procedures.

   *Cross-reference with security and diversity inspectors.*

2. **Children and young people are able to order purchases within 24 hours of arrival and receive all items ordered the following day. Thereafter they are able to order items once a week.**

   **Evidence**
   - **Observation:** check:
     - the procedures during reception and induction
     - that weekly access applies to all residential locations.

   **References**
   - RPJDL 31
   - ERJO 53.1, 53.3
Staff: ask if there is a system to allow children and young people who are away from the establishment on any form of authorised absence on canteen day to order purchases on the same day and receive all their items the following day.

Children and young people: ask:
- if they were told how to use the shop as part of their induction and helped to make a purchase the following day
- about the efficiency of the procedure.

Cross-reference with first days and residential units inspectors.

3. Children and young people are consulted systematically about the items they would like to see on the shop list and their feedback is acted on.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>RPJD31</td>
</tr>
<tr>
<td>• for evidence of consultation and frequency of consultation exercises (i.e. at least every three months)</td>
<td>ERJO 50.3, 53.1, 53.3</td>
</tr>
<tr>
<td>• canteen lists and whether they are based on feedback</td>
<td></td>
</tr>
<tr>
<td>• for evidence of children and young people being informed of the outcomes of their consultation</td>
<td></td>
</tr>
<tr>
<td>• that price changes in the last six months can be justified by managers of the system – check the records.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask how consultation is carried out and suggestions acted on.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• whether they are consulted about the content of the canteen list and how often</td>
<td></td>
</tr>
<tr>
<td>• if they have experienced consultation feedback being taken into account.</td>
<td></td>
</tr>
</tbody>
</table>

Cross-reference with the residential units inspector.

4. The shop system is effectively managed to ensure children and young people are safe from bullying.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>RPJD31</td>
</tr>
<tr>
<td>• whether the establishment’s bullying survey suggests that bullying takes place in relation to the canteen</td>
<td>ERJO 52, 88</td>
</tr>
<tr>
<td>• whether there is a system for checking SIRs to see if bullying for shop items is an issue. Check a sample of SIRs.</td>
<td></td>
</tr>
</tbody>
</table>
Observation: check that there is visible and active staff supervision to protect children and young people from bullying and theft of their purchased goods.

Staff: ask:
- whether they carry out spot checks to see if children and young people still have the goods they ordered in their possession the next day
- whether they carry out cell checks to see if young people are in possession of goods that they did not purchase or a disproportionate number of items
- whether expensive items are security marked.

Children and young people: ask whether bullying (associated with canteen) does take place.

Cross-reference with safeguarding, bullying and security inspectors.

5. **Healthy items are available and actively promoted in support of a healthy lifestyle.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that:</td>
<td></td>
</tr>
<tr>
<td>• fruit and healthy snacks are available</td>
<td>ERJO 53.3</td>
</tr>
<tr>
<td>• the sale of healthy items is promoted through discounts</td>
<td></td>
</tr>
<tr>
<td>• muscle building/protein supplements are not available.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask shop/canteen staff if they:</td>
<td></td>
</tr>
<tr>
<td>• inform children and young people about healthy choices</td>
<td></td>
</tr>
<tr>
<td>• have good links with other departments that promote healthy lifestyles, such as PE, education and health services.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask how they are encouraged to make healthy choices.</td>
<td></td>
</tr>
<tr>
<td>Cross-reference with health services, learning and skills and PE inspectors.</td>
<td></td>
</tr>
</tbody>
</table>

HMIP: Expectations
6. **All children and young people are given advice and support on how to manage their money.**

**Evidence**

Documentation: check:
- what information and support is provided to young people
- that individual financial records are properly maintained and children and young people can readily access their records.

Staff: ask:
- whether children and young people who arrive in reception without private money are offered an advance of one week’s pay to buy shop goods, with repayment realistically staged over a period of time and guidance given on how to budget for this repayment
- whether children and young people are encouraged to save in order to buy what they would like.

Children and young people: ask:
- what information and support is given
- whether they can access their financial records.

Cross-reference with learning and skills and resettlement pathways inspectors.

**References**

RPJDL 31
ERJO 53.3

7. **Children and young people are able to order items from catalogues, and are not charged an administration fee if they do so.**

**Evidence**

Documentation: check:
- the availability and extent of the catalogue and the policy about orders
- that purchase options include recreational items.

Children and young people: ask about the efficiency of the catalogue ordering system.

**References**

RPJDL 31
ERJO 53.3
Strategic management of resettlement

All areas of the establishment demonstrate a commitment to resettlement which ensures that children and young people are well prepared for release into the community. The resettlement strategy is informed by and developed in consultation with children and young people. Strategic partnerships, and YOTs in particular, plan for and provide timely access to resettlement opportunities for all children and young people on their release and, where appropriate, prior to release through the use of ROTL.

Expectations

1. **The establishment has a clear resettlement policy based on the needs of the population.**

   **Evidence**

   - **Documentation:** check that:
     - there is an up-to-date needs assessment of the population (check diverse needs are taken into account) which also includes the specific needs of children and young people on indeterminate sentences and those with long sentences
     - children and young people have been consulted and that the process has been used to inform the policy
     - the resettlement policy reflects the national and regional strategies, is based on a needs analysis, reflects the needs of children and young people and sets the direction for comprehensive resettlement planning
     - the policy is monitored and evaluated by a resettlement committee, or equivalent, and reviewed at least annually
     - membership of the resettlement committee is multi-disciplinary and that meetings are regular and frequent
     - the policy describes systems in place to identify children and young people who are in the care of or looked after by the local authority, or who are entitled to leaving care services, and that the responsible authority is involved in resettlement planning at all stages.

   **References**

   - RPJDL 79, 80
   - ERJO 79, 100, 101, 102
   - YOIR 3
2. The establishment has close collaborative links with a range of voluntary, statutory and community organisations, particularly youth offending teams and local authorities, to assist the resettlement arrangements for children and young people.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that there is external agency representation and useful contributions from a range of agencies, including youth offending teams on the resettlement committee.</td>
<td>RPJD 79, 80</td>
</tr>
<tr>
<td><strong>Observation:</strong> attend a committee meeting if possible to observe the extent of collaborative working.</td>
<td>ERJO 79, 100, 101, 102</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask staff on the resettlement committee what arrangements are in place to ensure the active involvement of voluntary, statutory and community organisations, particularly youth offending teams.</td>
<td>YOIR 3</td>
</tr>
</tbody>
</table>

3. Release on temporary licence (ROTL) is a key part of the resettlement strategy and is used to good effect in individual training plans.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>RPJD 79, 80</td>
</tr>
<tr>
<td>• that the resettlement strategy specifies how ROTL will be used as a key part of reintegration planning</td>
<td>ERJO 101, 103</td>
</tr>
<tr>
<td>• that ROTL is considered for a variety of purposes, including health, training and employment, education, family contact, etc</td>
<td>YOIR 3, 5</td>
</tr>
<tr>
<td>• that there is a system in place to ensure all young people eligible for ROTL are informed of their eligibility, helped to apply and considered at an early stage as part of the training planning process</td>
<td></td>
</tr>
<tr>
<td>• that ROTL is based on a risk assessment; young people are not denied the opportunity on offence alone</td>
<td></td>
</tr>
<tr>
<td>• that steps are taken to minimise risks so that children and young people are not refused ROTL unnecessarily</td>
<td></td>
</tr>
<tr>
<td>• that adequate reasons are provided if ROTL is refused</td>
<td></td>
</tr>
<tr>
<td>• that the home YOT is sufficiently engaged in supporting young people eligible for ROTL</td>
<td></td>
</tr>
<tr>
<td>• that contacts have been made with voluntary services, local employers, schools, colleges, etc, to provide a range of good quality training placements and employment opportunities</td>
<td></td>
</tr>
<tr>
<td>• for an evaluation of the impact of ROTL on resettlement outcomes.</td>
<td></td>
</tr>
</tbody>
</table>
Children and young people: ask what they know about the ROTL process; in particular speak to young people who have been refused ROTL to see if they were told why it had been refused and to young people who have experienced ROTL to check whether they found it valuable and were supported by staff.

Cross-reference with training planning, health services, contact with the outside world and learning and skills inspectors.
Planning for a child or young person’s release starts upon arrival. All children and young people contribute to the development of their own training or remand management plan, which is based on an individual assessment of risks and needs. The plan is a product of collaboration between the establishment, the young person, their parents or carers and their youth offending team. The plan is reviewed regularly and implemented throughout and after their time in custody to ensure a seamless transition to the community.

Expectations

1. All children and young people have a good quality training or remand management plan that is based on their individual risks, needs and aspirations and is implemented effectively.

Evidence

Documentation: check that:

- training and remand management plans set specific, measurable, achievable, realistic and time limited (SMART) targets based on a comprehensive assessment of risk and need and consultations with the young person
- plans take into account the specific needs of children and young people with indeterminate sentences and those with long sentences
- targets are monitored and reviewed and arrangements with regard to health, accommodation, further education, training or employment, financial support and other community support systems are discussed at every training plan and remand management meeting
- unsentenced and unconvicted young people have access to the same regime activities as the sentenced population
- training plans are easily accessible to residential staff so that they can support and encourage young people to achieve their targets
- all training planning meetings and reviews have an appropriate level of multi-disciplinary/multi-agency contribution, including regular reports from personal officers
- children and young people are encouraged and enabled to make written contributions in advance of their training and remand planning meetings and reviews.

References

RPJDL 12, 23, 27, 79, 80
ERJO 50.1, 51, 53.1, 79
YOIR 3
**Staff:** check:
- that staff from all disciplines are clear about their role in the training and remand management planning process.
- with external YOT workers about their views of the process in the establishment.

**Children and young people:** check that:
- they were involved in the initial assessments of their needs and were given opportunities to discuss what they would like to achieve during their time in custody
- they have access to their training or remand management plan and are aware of their targets
- they agree that their targets are related to their needs and are achievable.

*Cross-reference with health services and learning and skills inspectors.*

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2. **Well-attended training planning meetings and reviews take place regularly in order to check on children and young people’s general wellbeing, to review their progress and revise targets.**

**Evidence**

**Documentation:** check that:
- initial training planning meetings take place within 10 days of the young person’s arrival in custody and remand management meetings take place within five days
- reviews are carried out whenever there is a change in circumstances for the young person or a need to revise targets, but as a minimum monthly
- bail support workers from the young person’s local youth offending team attend the initial remand planning meeting to consider whether a package of bail support is viable to supplement a bail application
- children and young people are given clear and accurate information about their eligibility for early or late release at their initial training plan meeting and how their behaviour could impact on this eligibility
- all training planning meetings and reviews are multi-disciplinary/multi-agency. They are always attended by the young person, their personal officer, representatives from the learning and skills and health services departments who know the young person and appropriate representation from the youth offending team

**References**

RPJDL 23, 79
ERJO 13, 18, 50, 79
YOIR 3

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**HMIP: Expectations**
• there is representation at all training planning and remand management meetings and reviews from the relevant local authority for children and young people who are in the care of, or looked after, by the local authority, or are entitled to leaving care services. Training planning and remand management meetings do not replace statutory looked-after children (LAC) reviews, which continue to take place throughout the young person’s sentence. There are clear links between the two systems and plans are well coordinated

• training planning records are comprehensive and contain details of the young person’s progress against targets, as well as general wellbeing, including any difficulties about coping in custody.

Observation: check that:
• meetings take place in a suitable venue, e.g. private, of a suitable size, appropriately furnished, etc.

• children and young people are fully supported to contribute to discussions at their training planning meetings and reviews.

• all relevant departments within the establishment and the youth offending team are represented at reviews and meetings and make an appropriate contribution towards setting and reviewing training and remand management planning targets.

• there is a good level of discussion about the young person’s progress against targets as well as general wellbeing, including any difficulties around coping in custody, facilitated by a competent chairperson.

Staff: speak to personal officers and staff from a range of disciplines about their attendance at training and remand management planning meetings and reviews. Check:
• whether there are any difficulties or constraints that prevent their attendance or ability to make useful contributions.

• that there are administrative arrangements to ensure that all relevant parties attend training planning meetings and that written reports are submitted to the chair in advance of the meeting.

• that the establishment monitors attendance by all departments and youth offending teams, that this is routinely reported to the Youth Justice Board, and that action is taken when poor attendance is identified.

Children and young people: ask:
• if they feel supported at their reviews and meetings and are enabled to contribute, including submitting written contributions in advance.

• if they find the meetings useful.

Cross-reference with personal officer, health services and learning and skills inspectors.
3. **The establishment takes active steps to encourage and facilitate the attendance and participation of parents and/or carers at training planning and remand management meetings.**

**Evidence**

**Documentation:** check that:
- parents are sent helpful written information about the importance of planning meetings and what they are entitled to by way of assisted travel
- the establishment monitors attendance by parents/carers and efforts are made to make improvements when poor attendance is identified.

**Observation:** during planning meetings parents/carers are assisted and encouraged to make a useful contribution. Ask parents/carers after the meeting for their views of the planning process and if they feel supported and encouraged to contribute.

**Staff:** check that staff (particularly personal officers) maintain contact with parents/carers between meetings and reviews to encourage involvement.

*Cross-reference with personal officers and residential units inspectors.*

4. **Link and support services are available to parents/carers of children and young people during custody and post-release.**

**Evidence**

**Documentation:** check the documentation available and what is given to parents/carers and young people.

**Staff:** ask about the extent of their work with families/carers.

**Parents/carers:** speak to parents/carers where possible about what is available.
5. A clear post-release plan is agreed at a pre-release meeting setting out the needs and expectations of the child/young person as well as the responsibilities of and the services to be delivered by relevant community agencies, in particular the youth offending team and local authority.

**Evidence**

- A pre-release meeting takes place at least 10 days before the young person is released. All relevant agencies attend to ensure that all aspects of pre- and post release care are catered for. A careers guidance worker contributes to pre-release planning and attends meetings appropriately.
- The pre-and post release arrangements include key issues such as health, finance, transport, accommodation, education/training/employment placements, and careers guidance and information. The roles and responsibilities of staff are clearly assigned.
- A portfolio of the young person’s achievements during custody is compiled, which they can take with them on release.

**Observation:**

- Pre-release training planning meetings produce clear reintegration plans, with responsibilities clearly assigned.
- There are additional plans for young people who are looked after by the local authority or are leaving care which take account of their particular status.

**Staff:**

- Speak to personal officers, YOT workers and staff from a range of disciplines involved in pre-release planning. Check for any difficulties or constraints that prevent good reintegration planning.

**Children and young people:**

- Ask those about to be released whether they feel sufficiently prepared and if they are clear about their post-release arrangements.

*Cross-reference with resettlement pathways, learning and skills and health services inspectors.*

6. Children and young people who are to be transferred to an adult prison during their sentence are well prepared and supported for this transition.

**Evidence**

- Training planning takes account of the particular needs and anxieties of young people who will be transferred to an adult prison.
**Section 8 – resettlement**

**Training planning and remand management**

- pre-transfer reviews take place to ensure that the young person is well-informed and properly prepared and supported to move on. A representative from the receiving prison attends the review.
- plans include continuation of existing provision such as learning and skills.

**Staff:** check that staff, in particular personal officers, are clear about their role in preparing young people for transfer to an adult prison.

**Children and young people:** ask those who will be transferred at some point what help and support they have received.

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7. **A member of the establishment staff who knows the child or young person attends the post-release training planning meeting that takes place within 10 days of the child or young person’s return to the community.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that attendance at post-release meetings is monitored and reported to the YJB.</td>
<td>RPJDL 79, 80</td>
</tr>
<tr>
<td><strong>Observation:</strong> check that arrangements are in place to enable/encourage staff to attend whenever possible.</td>
<td>ERJO 100.1, 102</td>
</tr>
</tbody>
</table>

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8. **Children and young people who may present a risk to the public on their release are managed appropriately during the custodial part of their sentence in order to minimise their risk both during custody and on release, as well as their likelihood of re-offending.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>RPJDL 79</td>
</tr>
<tr>
<td>• that the resettlement policy and the safeguarding policy include guidance on the management of young people subject to public protection measures</td>
<td>ERJO 50, 51, 100</td>
</tr>
<tr>
<td>• that there are procedures in place to ensure identification on admission</td>
<td>YOIR 3</td>
</tr>
<tr>
<td>• that individual risk assessments take full account of the risk to the public</td>
<td></td>
</tr>
<tr>
<td>• that all relevant documentation, including ASSETs and pre- and post-sentence reports, are used as part of the risk assessment process</td>
<td></td>
</tr>
<tr>
<td>• that training plans and any relevant care plans take full account of the risk that the young person presents</td>
<td></td>
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</tbody>
</table>
• a sample of individual files to ensure that relevant restrictions are applied where necessary
• that telephone calls and letters sent and received are properly checked
• that individuals posing a risk to children who receive visits from children are properly vetted and that practices operating within the visits area are safe
• that the management of children and young people subject to public protection measures is part of the remit and terms of reference of the resettlement policy committee and the safeguarding committee
• that individual cases are reviewed and monitored regularly within a specialist multi-disciplinary forum, including relevant representatives from YOTs and other community agencies. Risk levels are regularly reviewed and updated. Appropriate arrangements are agreed to allow the supervision/licence requirements to be met
• that links exist between establishment staff and community-based colleagues, such as police, YOTs and probation, for sharing information. Appropriate information sharing protocols are in place
• that staff attend relevant MAPPA meetings before and after release.

Staff: ask:
• the custody clerk, in-house YOT staff or social worker how they make sure that young people who might present a serious risk to the public are identified early on
• residential staff if they are conversant with the risk assessments of the young people they are in regular contact with who are subject to public protection measures.

Children and young people: ask:
• if they are informed of the arrangements for managing their risk, the implications for them personally and the avenues available to them for challenge
• if they are aware of sources of support, including personal officers and advocates.

Cross-reference with first days in custody, contact with the outside world and safeguarding inspectors.
9. **Children and young people who are serving an indeterminate sentence (including those serving sentences for public protection) and those on long sentences are managed appropriately.**

### Evidence

**Documentation:** check that:
- the management of children and young people subject to indeterminate and long sentences is part of the remit and terms of reference of the resettlement policy committee and the safeguarding committee
- there are good procedures in place to ensure identification and support on admission, including young people on remand who potentially face an indeterminate or long sentence
- age-appropriate information leaflets about indeterminate or long sentences are provided for young people and their families
- individual assessments take full account of the young person’s specific needs, the risk s/he poses to others and risks to the young person related to the indeterminate nature or length of their sentence
- all relevant documentation, including ASSETs and pre- and post-sentence reports, are used as part of the risk assessment process
- training plans, any relevant care plans and lifer documentation take full account of the individual needs and risks that the young person presents
- individual cases are reviewed and monitored regularly within a specialist multi-disciplinary forum, including relevant representatives from YOTs and other community agencies
- there is a range of interventions to meet the complex criminogenic risks and needs of young people serving indeterminate or long sentences
- all documents, including life documentation and parole reports, are prepared on time
- there are good transition arrangements in place for young people moving to the young adult estate which includes, for instance, continuation of learning and skills provision.

### Staff:

**Staff:** ask staff, including lifer staff:
- whether they have had relevant training for their role
- what they contribute to plans and reviews
- how they support children and young people through this process.

### References

- R (2003) 23, 2, 9, 10, 11
- RPJDL 27
- ERJO 50, 53
- YOIR 3
**Children and young people:** ask if:

- they are informed of the arrangements for managing their sentence and have suitable access to their plans, reports and lifer documentation
- they are aware of sources of support, including personal officers and lifer officers, and have easy access to it.

*Cross-reference with the safeguarding inspector.*
HMIP: Expectations
Children and young people with substance-related needs are identified at reception and receive effective support and treatment throughout their stay in custody, including pre-release planning. All children and young people are safe from exposure to and the effects of substance use while in the establishment.

Expectations

1. **A multi-disciplinary substance use strategy team implements and monitors a written strategy, and ensures that substance use is addressed in an age appropriate, comprehensive and holistic manner.**

   **Evidence**

   **Observation**: check:
   - that the substance misuse team meets the specification
   - that internal and external providers offer an integrated service (i.e. joint protocols and multi-disciplinary team meetings).

   **Documentation**: check:
   - the written substance use strategy details
   - the annual delivery plan
   - the minutes of substance misuse multi-disciplinary meetings
   - that the strategy meets the YJB’s national specification for substance misuse for juveniles in custody.

   **References**

   R (98) 7, 10, 29, 43, 44, 45, 47
   RPJDL 21(e), 27, 51, 54
   ERJO 69.1, 73c, 74

2. **Children and young people receive initial substance screening and a related risk assessment by a healthcare professional on arrival. Those identified as drug or alcohol dependent have their immediate needs for symptom relief met according to clinical protocols, and are referred to specialist staff for a comprehensive assessment.**

   **Evidence**

   **Documentation**: check:
   - policy and protocols
   - that screening addresses dimensions as per the specification
   - that previous treatment is confirmed
   - that adequate detoxification procedures are in place.

   **References**

   R (98) 7, 1, 43, 44, 45
   RPJDL 21(e), 27, 50, 51, 54
   ERJO 62.2g, 73c
Staff: speak to staff about:
• procedures for initial screening
• risk assessment
• referral procedures to specialist staff if necessary
• procedures for provision of symptom relief.

Children and young people: ask young people about their experience of reception screening. Speak to a sample who needed symptom relief.

Cross-reference to first days in custody and health services inspectors.

3. Specialist staff complete a comprehensive assessment within 24 hours of the child or young person’s arrival to determine a suitable stabilisation, detoxification or maintenance prescribing programme for the young person. Prescribing decisions conform to national and YJB clinical guidelines and take into account the wishes of the child/young person and their parents/carers.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check:</td>
<td>R (98) 7, 1, 10, 43, 44, 45</td>
</tr>
<tr>
<td>• staff training records</td>
<td>RPJDL 22(e), 54</td>
</tr>
<tr>
<td>• initial assessments</td>
<td></td>
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<tr>
<td>• the prescribing policy and protocols</td>
<td></td>
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<tr>
<td>• that clinical records show that consent has been gained from those with parental responsibility, or the young person (following an assessment of competence), before medication is administered</td>
<td></td>
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<tr>
<td>• if contact is made with community substance misuse workers or the young person’s GP to ensure continuity of care.</td>
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</tr>
</tbody>
</table>

Children and young people: ask if they have provided informed consent.

Cross-reference to first days in custody and health services inspectors.
Section 8 – resettlement

4. The prescribing clinician is competent in treating substance-dependent children or young people and works as part of a multi-disciplinary team and under the supervision of the local specialist substance misuse treatment service.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation</strong>: check for evidence of multi-disciplinary team meetings.</td>
<td>R (98) 7, 7, 10, 43, 44, 45, 47</td>
</tr>
<tr>
<td><strong>Staff (clinician)</strong>: check:</td>
<td></td>
</tr>
<tr>
<td>• training and experience</td>
<td>RPJDL 49, 54</td>
</tr>
<tr>
<td>• access to specialist advice.</td>
<td>ERJO 72, 74</td>
</tr>
</tbody>
</table>

5. Arrangements for the observation of substance-dependent children and young people and guidelines for inpatient admission are in place.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation</strong>: check arrangements (i.e. the location of children and young people).</td>
<td>R (98) 7, 7, 10, 43, 44, 45, 47</td>
</tr>
<tr>
<td><strong>Documentation</strong>: check the clinical management policy and procedures.</td>
<td>RPJDL 54</td>
</tr>
<tr>
<td><strong>Staff</strong>: interview staff from a range of disciplines.</td>
<td>ERJO 74</td>
</tr>
</tbody>
</table>

6. Clinical interventions are delivered alongside psychosocial treatment interventions. Joint working protocols between health services and the Young People’s Substance Misuse Service are in place, and there is evidence of coordinated care planning to meet the needs of the child or young person.

<table>
<thead>
<tr>
<th>Evidence</th>
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</tr>
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<tbody>
<tr>
<td><strong>Documentation</strong>: check:</td>
<td>R (98) 7, 7, 10, 43, 44, 45, 47</td>
</tr>
<tr>
<td>• joint working protocols</td>
<td>RPJDL 54</td>
</tr>
<tr>
<td>• care plans</td>
<td>ERJO 74</td>
</tr>
<tr>
<td>• that education assessments and allocation to activity are included in the care plan and are sensitive to the needs of the young person.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff</strong>: ask:</td>
<td></td>
</tr>
<tr>
<td>• how joint care planning takes place</td>
<td></td>
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<tr>
<td>• if there are any obstacles to delivering a coordinated care plan.</td>
<td></td>
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<tr>
<td><strong>Children and young people</strong>: ask:</td>
<td></td>
</tr>
<tr>
<td>• if they know what their plan is</td>
<td></td>
</tr>
<tr>
<td>• if they experience a coordinated approach.</td>
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</tbody>
</table>

Cross-reference with the health services inspector.
7. **Children and young people are informed of substance-related services at the beginning of and throughout their time in custody.** Substance use education and prevention programmes are available to all children and young people. **A range of effective tobacco and alcohol avoidance strategies are in place.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check the availability of:</td>
<td>R (98) 7, 26, 27, 29, 44, 45</td>
</tr>
<tr>
<td>• posters and information on wings</td>
<td>RPJDL 54</td>
</tr>
<tr>
<td>• nicotine replacement therapy</td>
<td>ERJO 71</td>
</tr>
<tr>
<td>• smoking cessation programmes</td>
<td></td>
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<tr>
<td>• health promotion regarding alcohol</td>
<td></td>
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</tbody>
</table>

**Documentation:** check:
- what input is available from the Young People’s Substance Misuse Service (YPSMS) as part of the induction programme, including the Substance Misuse Awareness Programme (SMAP)
- that age-appropriate literature is available
- referral procedures
- programme details
- attendance
- whether programmes take place as planned or whether they are subject to regular cancellation
- smoking policy and strategies
- links with other health promotion activities.

**Staff:** ask:
- whether they are DANOS-competent to deliver interventions, including education and prevention programmes
- how smoking cessation and alcohol programmes are linked to other health promotion initiatives.

**Children and young people:** ask:
- when and how they were given the information about substance-related services
- if it was in a format they could understand
- how soon after arrival they could access programmes and if they were useful
- about their experience of health promotion in the establishment.

*Cross-reference with first days in custody, PE, health services, learning and skills and training planning inspectors.*
8. **Children and young people with substance use problems can access a range of treatment and support services which meet their developmental, gender and culturally-specific needs. Services are delivered by competent practitioners who are appropriately qualified and supervised.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Questionnaire</td>
<td>R (98) 7, 27, 43, 44, 45, 47</td>
</tr>
<tr>
<td><strong>Observation:</strong> observe a young person’s initial assessment with the YPSMS.</td>
<td>RPJDL 51, 54</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>ERJO 73c</td>
</tr>
<tr>
<td>• the YPSMS delivery plan</td>
<td></td>
</tr>
<tr>
<td>• what services are on offer, the level of access and throughput, including ethnic monitoring</td>
<td></td>
</tr>
<tr>
<td>• professional qualifications, DANOS competencies and the supervision arrangements of staff.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• residential staff if they have received awareness training</td>
<td></td>
</tr>
<tr>
<td>• how they ensure that treatment and support services are culturally sensitive and meet individual needs.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• if substance use is addressed at training planning meetings</td>
<td></td>
</tr>
<tr>
<td>• if they are satisfied with the treatment and support services available</td>
<td></td>
</tr>
<tr>
<td>• if they feel their individual needs are being met.</td>
<td></td>
</tr>
</tbody>
</table>

*Cross-reference with first days in custody, residential units, diversity and training planning inspectors.*

9. **Substance-related work is integrated and coordinated with health promotion initiatives and other interventions undertaken with children and young people, and managed effectively.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check that assessments and care plans are discussed at training planning meetings and documented in training plans and individual learning plans.</td>
<td>R (98) 7, 7, 27, 29, 43, 44, 45</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check training planning and care plan documentation and check that it evidences multi-agency input.</td>
<td>RPJDL 54</td>
</tr>
<tr>
<td><strong>Staff:</strong> ask how they liaise with others to ensure that all interventions and care plans for young people are coordinated, which model of care planning is used and how this is linked with training planning.</td>
<td>ERJO 74</td>
</tr>
</tbody>
</table>

*Cross-reference with PE, health services, training planning and learning and skills inspectors.*

**HMIP: Expectations**
10. **Children and young people are able to participate in voluntary drug testing (VDT) programmes which form part of the motivational work undertaken by the substance misuse team. Those who choose not to participate are not discriminated against.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td>R (98) 7, 144, 45, 46</td>
</tr>
<tr>
<td>• VDT compacts</td>
<td>RPJDL 54</td>
</tr>
<tr>
<td>• testing frequency</td>
<td></td>
</tr>
<tr>
<td>• that the rewards and sanctions scheme makes no reference to VDT.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask about dedicated VDT staff and if they work jointly with the SMT.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask if they have accurate information about VDT. Ask those who have refused VDT if there were any penalties.</td>
<td></td>
</tr>
<tr>
<td><em>Cross-reference with the rewards and sanctions inspector.</em></td>
<td></td>
</tr>
</tbody>
</table>

11. **There are effective and age-appropriate security measures that guard against the trafficking of drugs or alcohol.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check the effectiveness and appropriateness of the security measures in operation.</td>
<td>ERJO 53.2, 88</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check:</td>
<td></td>
</tr>
<tr>
<td>• security policy</td>
<td></td>
</tr>
<tr>
<td>• the extent of the problem from data analysis of security information reports with regard to drug or alcohol trafficking</td>
<td></td>
</tr>
<tr>
<td>• that mandatory drug testing is not part of the policy.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask if they feel safe from the pressures of drug trafficking.</td>
<td></td>
</tr>
<tr>
<td><em>Cross-reference with behaviour management and security inspectors.</em></td>
<td></td>
</tr>
</tbody>
</table>
Resettlement pathways

The individual resettlement needs of children and young people are met through multi-agency working which promotes their successful reintegration at the end of their time in custody.

Expectations – Pathway One: accommodation

1. **All children and young people have suitable, sustainable and safe accommodation arranged prior to their release.**

   **Evidence**
   - **Documentation:** check:
     - what steps have been taken to secure suitable accommodation on release
     - for close links with the YOT accommodation services and their role in ensuring accommodation needs are addressed before release in conjunction with the local authority
     - the use of ROTL for young people to attend accommodation interviews
     - establishment data regarding the number/proportion of children and young people released from custody without stable accommodation and the number/proportion released to stable accommodation
     - the number of young people who did not get early release as a result of having no suitable accommodation.

   **Observation:** check future accommodation arrangements are routinely discussed and issues noted are followed up at training planning meetings.

   **Staff:** ask in what circumstances and how referrals are made to the home local authority children’s services department.

   **Children and young people:** speak to a sample of children and young people who are about to be released and ask how confident they feel about their accommodation arrangements.

   *Cross-reference with the training planning inspector.*
Expectations – Pathway Two: education, training and employment

Cross-refer to the learning and skills inspector.

2. Children and young people are supported in preparing for their future in the community by ensuring they make good progress in education, learning and skills and have access to careers advice.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that:</td>
<td></td>
</tr>
<tr>
<td>• children and young people achieve qualifications at levels appropriate to their abilities and potential</td>
<td>RJPDL 79, 80</td>
</tr>
<tr>
<td>• children and young people engage in education, training and employment that is linked to realistic career opportunities available to them in the area to which they will be released</td>
<td>ERJO 100, 101, 102, 103</td>
</tr>
<tr>
<td>• that the qualifications on offer are useful and relevant, i.e. qualifications enable young people to prepare for their future economic wellbeing, are linked to the employment market and promote a work ethic</td>
<td>YOIR 3</td>
</tr>
<tr>
<td>• ROTL is used to good effect to organise future employment and/or education or training placements.</td>
<td></td>
</tr>
<tr>
<td><strong>Observation:</strong> check training planning and education plan review meetings.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> check that:</td>
<td></td>
</tr>
<tr>
<td>• children and young people have good access to careers advice within the establishment and from external careers agencies</td>
<td></td>
</tr>
<tr>
<td>• sufficient attention is given to learning and skills.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> check that:</td>
<td></td>
</tr>
<tr>
<td>• they are working towards a qualification which they think will help them on release</td>
<td></td>
</tr>
<tr>
<td>• they have had good careers advice</td>
<td></td>
</tr>
<tr>
<td>• training planning meetings are sufficiently focused on their immediate future on release and longer-term aspirations in their view.</td>
<td></td>
</tr>
</tbody>
</table>

Cross-reference with resettlement strategy, training planning and personal officers inspectors.
3. **Children and young people are able to continue with their education or training programme following their release into the community.**

**Evidence**

**Documentation:** check that:
- training plans take account of long-term education, training and employment objectives
- pre-release planning with YOTs and post-release plans enable young people to continue with and/or build on their education or training on release, especially if they are partway through a GCSE or A/AS level course
- a portfolio of achievements is prepared that children and young people can take with them on release.

**Children and young people:** ask about their future plans and whether they have been told about opportunities or plans that have been made for them to continue with their education or training following their release from custody.

*Cross-reference with the training planning inspector.*

**References**

RPJDL 38, 39, 79, 80
ERJO 78.5, 79, 100, 103
YOIR 3

4. **All children and young people leave custody with finalised arrangements for their education, work and/or training, which will begin on return to the community.**

**Evidence**

**Documentation:** check:
- a sample of pre-release training planning meeting documents to ensure that a placement has been secured that is a manageable distance from planned accommodation
- establishment data regarding the numbers released from custody with placements.

**Observation:** check that future education and/or training arrangements are routinely discussed at training planning meetings.

**Children and young people:** speak to a sample of children and young people who are about to be released about their plans with regard to future education, training or employment.

*Cross-reference with the training planning inspector.*

**References**

RPJDL 79, 80
ERJO 100, 101, 102, 103
YOIR 3
5. **Prior to release, children and young people who have been identified as having ongoing health needs receive a multi-disciplinary assessment.** Staff make contact with relevant agencies that support children and young people during their first weeks in the community to ensure integration of child-focused care.

**Evidence**

**Documentation:** check that:
- case conferences and multi-disciplinary planning meetings have taken place in appropriate cases and include all relevant establishment staff and YOT representation
- clinical records confirm that all relevant planning has taken place
- there is evidence of a good level of multi-disciplinary engagement and integrated care planning.

**Staff:** speak to health services managers about the systems in place to ensure that children and young people who require a multi-disciplinary assessment are identified.

**Children and young people:** speak to those who are shortly to be released and ask if:
- they have contributed to an assessment
- they are clear about how their healthcare needs will be met on release.

Check that particular attention has been given to explaining arrangements to those with learning disabilities and/or mental health needs.

*Cross-reference with the training planning inspector.*

6. **Children and young people are given information on how to access primary care services on their release, and support in accessing the services if required.**

**Evidence**

**Documentation:** check that:
- responsibilities for healthcare post-release are clearly assigned in post-release plans and included in clinical records
- information is available in a range of formats to assist children and young people to access community primary care services.

**References**

R (98) 7, 10
RPJDL 80
ERJO 100.1, 102
YOIR 3
Section 8 – resettlement  

Pathway Three: mental and physical health

Observation: check that:
• the role of the health practitioner from the Youth Offending Team in assisting the child or young person to access primary care services is explained at pre-release meetings
• health promotion packs are provided to children and young people prior to their release.

Children and young people: speak to those who are shortly to be released and check that:
• they have been given information about primary health services and how to access them on their release
• they have been given health promotion packs
• they are clear about the role of the health practitioner in their local YOT in this regard.

Cross-reference with the training planning inspector.

7. A mechanism is in place to ensure that children and young people with mental health problems who would be subject to the care programme approach in the community receive this.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check that post-release plans, clinical records and mental health records, if separate from the clinical records, confirm that all relevant planning has taken place.</td>
<td>R (98) 7, 10 RPJDL 79, 80 ERJO 100.1, 102 YOIR 3 SfBH C6</td>
</tr>
<tr>
<td>Staff: ask about arrangements for consulting with community mental health teams in planning for release.</td>
<td></td>
</tr>
</tbody>
</table>

8. There is a palliative and end of life care policy that has been developed in partnership with local care services to move children and young people to appropriate care facilities.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation: check that there is a comprehensive policy which includes commissioning arrangements, particularly with reference to the specific arrangements for palliative care.</td>
<td>R (98) 7, 51</td>
</tr>
</tbody>
</table>
Expectations – Pathway Four: drugs and alcohol

Cross-refer to the substance use inspector.

9. Effective working practice is established between YOTs, community services and the Young People’s Substance Misuse Service (YPSMS) to ensure that pre-release planning is effective and post-release care is properly planned.

**Evidence**

- training planning records, including individual pre-and post-release plans, describe arrangements that have been made for post release care for children and young people who require substance misuse services
- the YOT health or substance misuse worker has contributed to post-release planning and has been assigned to coordinate the ongoing services required and to assist the young person
- information on how to avoid drug- or alcohol-related injuries and death, including written overdose prevention information, is given at the pre-release stage.

**Staff:** ask how effective joint working is facilitated through the training planning process and whether YPSMS workers attend post-release meetings in appropriate cases.

**Children and young people:** ask young people who have received substance use services and are about to be released:

- if they are clear about the services that will be available to them in the community
- how they will be supported by their YOT worker.

Cross-reference with the training planning inspector.
Section 8 – resettlement

Pathway Five: children and families

Expectations – Pathway Five: children and families

_Cross-refer to the contact with the outside world inspector._

10. **Children and young people are supported to restore and/or build their family relationships, where appropriate, in preparation for release.**

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Observation:</strong> check that maintaining family ties is routinely discussed at training planning meetings with consideration given to the range of relationships, such as young carer, parent, child, sibling, etc, and the support that may be needed.</td>
<td>RPJDL 79</td>
</tr>
<tr>
<td><strong>Documentation:</strong> check that:</td>
<td>ERJO 100.1, 102.1</td>
</tr>
<tr>
<td>• children and young people are able to have family days and accumulated visits and that information about these opportunities is accessible</td>
<td>YOIR 3</td>
</tr>
<tr>
<td>• those who have family members in prison have inter-prison visits and telephone calls.</td>
<td></td>
</tr>
<tr>
<td><strong>Staff:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• if family days are offered and how often they are held</td>
<td></td>
</tr>
<tr>
<td>• how children and young people who might benefit from accumulated visits or inter-prison visits or telephone calls are identified and assisted to apply</td>
<td></td>
</tr>
<tr>
<td>• whether staff liaise with YOT workers where contact with parents/carers is problematic due to family breakdown, to ensure that conciliation work is coordinated and that it is taken into account in all aspects of care planning for the young person</td>
<td></td>
</tr>
<tr>
<td>• if there are arrangements to ensure that children and young people are encouraged and enabled to maintain family ties and if they are assisted with difficult relationships.</td>
<td></td>
</tr>
<tr>
<td><strong>Children and young people:</strong> ask:</td>
<td></td>
</tr>
<tr>
<td>• what help is available to help them maintain good relationships with their family and what is available to assist them with family conflict</td>
<td></td>
</tr>
<tr>
<td>• whether they are aware of family days and of the scheme for accumulated visits and inter-prison visits and telephone calls.</td>
<td></td>
</tr>
</tbody>
</table>

_Cross-reference with the training planning inspector._
11. Young people with children of their own are provided with additional visits and support in order for them to build and maintain family contact and help them to improve their parenting skills.

**Evidence**

**Documentation:** check that:
- approval for additional visits is efficiently and fairly carried out
- parenting courses such as Storybook Dads are available and check how often they are run
- training plans record evidence of the support provided.

**Observation:** check there is a suitably private venue for young people to spend time with their children. Observe courses if they are running.

**Staff:** ask staff what specialist support is available for young people who have children of their own and about programmes available to help young people to develop good parenting skills.

**Children and young people:** ask them what opportunities there are for extra visits with their children or gaining assistance in developing good parenting skills.

*Cross-reference with learning and skills and training planning inspectors.*

12. There is a qualified family worker who encourages and supports contact between children and young people, their parents or carers and their children.

**Evidence**

**Documentation:** check that:
- information is available to children and young people and their families about the services on offer from the family worker
- the family worker is suitably qualified.

**Observation:** check that the family worker offers appropriate support when visits take place.

**Staff:** check that the family worker’s role includes arranging children’s visits, supervising visits when required by a court order, arranging representation or attendance at childcare hearings, supporting those undergoing separation and advising on child protection issues and ROTT to fulfil parental responsibilities.

**Children and young people:** ask whether a family worker is available to help them to have reasonable contact with their children and if they know how to access support to arrange contact.

*Cross-reference with the legal rights inspector.*
13. **Prison staff maintain regular contact with social workers of children and young people who are in the care of or looked after by the local authority, particularly with regard to arrangements for transfer to the community and those who are entitled to leaving care services.**

**Evidence**

**Documentation:** check:

- that there are records of numbers of children in the care of the local authority
- records of visits made on behalf of the local authority in the last three months, particularly the attendance at training planning reviews
- that training planning meetings take account of the need for contact with the local authority, as well as appropriate contact with family and friends
- that looked-after children statutory reviews take place
- that support plans are in place for looked-after children sufficiently in advance of their release
- that appropriate child in need referrals are made.

**Staff:** ask personal officers about their role and understanding in relation to young people in the care of, or looked after, by the local authority.

**Children and young people:** ask about the frequency and quality of contact with their social worker.

*Cross-reference with the personal officers inspector.*

**References**

- RPJDL 79, 80
- ERJO 101.1, 102
- YOIR 3

14. **Children and young people and their immediate family or partners, with appropriate instructions or permission, are informed sensitively of significant news about each other within 24 hours. In these circumstances personal officers always liaise with the allocated YOT worker.**

**Evidence**

**Documentation:** check wing files for evidence that significant events are recorded.

**Observation:** check that appropriate private facilities are available in the visits area and are used.

**References**

- RPJDL 56, 57, 58
- ERJO 85.3
- YOIR 3
Staff: ask:
• about their understanding of the need to balance the rights/needs of children and young people in accordance with the Fraser Competencies
• about recent examples and the procedures used, e.g. what constitutes ‘significant news’ and are there any published criteria defining this?

Cross-reference with safeguarding and personal officers inspectors.

Expectations – Pathway Six: finance, benefit and debt

Cross-refer to the contact with the outside world inspector.

15. All children and young people are given advice and support on how to manage their money.

<table>
<thead>
<tr>
<th>Evidence</th>
<th>References</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Documentation:</strong> check that:</td>
<td></td>
</tr>
<tr>
<td>• children and young people who arrive in reception without private money are offered an advance of one week’s pay to buy shop goods, with repayment realistically staged over a period of time and guidance given on how to budget for this repayment</td>
<td>RPJD 31</td>
</tr>
<tr>
<td>• individual financial records are maintained</td>
<td>ERJO 53.3</td>
</tr>
<tr>
<td>• children and young people are taught budgeting/money management skills in preparation for release and that they are given information and support</td>
<td></td>
</tr>
<tr>
<td>• ROTL is used to allow children and young people to make financial arrangements in preparation for, and prior to, release.</td>
<td></td>
</tr>
</tbody>
</table>

Children and young people: ask what information and support is given and whether they can access their financial records.

Cross-reference with the learning and skills inspector.
# Glossary of acronyms

## International Human Rights Instruments

### Legally binding

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Instrument Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>CRC</td>
<td>Convention on the Rights of the Child</td>
</tr>
</tbody>
</table>

### Normative

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Instrument Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDRB</td>
<td>Declaration on the Elimination of All Forms of Intolerance and of Discrimination Based on Religion or Belief</td>
</tr>
<tr>
<td>DHRIN</td>
<td>Declaration on the Human Rights of Individuals Who are not Nationals of the Country in which They Live</td>
</tr>
<tr>
<td>DRM</td>
<td>Declaration on the Rights of Persons Belonging to National or Ethnic, Religious and Linguistic Minorities</td>
</tr>
</tbody>
</table>

**HMIP: Expectations**
## Glossary of abbreviations

### Regional Human Rights Instruments

<table>
<thead>
<tr>
<th>Normative</th>
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<tbody>
<tr>
<td>ERJO</td>
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<tr>
<td>R(98)7</td>
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<tr>
<td>R (2003) 23</td>
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</table>

- **Regional Human Rights Instruments**
  - **Normative**
    - **ERJO** Recommendation CM/Rec (2008)11 of the Committee of Ministers to member states on the European Rules for juvenile offenders subject to sanctions or measures (adopted by the Committee of Ministers on 5 November 2008 at the 1040th meeting of the Ministers’ Deputies)
    - **R(98)7** Recommendation No R (98) 7 of the Committee of Ministers to Member States Concerning the Ethical and Organisational Aspects of Health Care in Prison (adopted by the Committee of Ministers on 8 April 1998 at the 627th meeting of the Ministers’ Deputies)

### National Legislation

<table>
<thead>
<tr>
<th>Legally binding</th>
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<tbody>
<tr>
<td>Children's NSF</td>
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<tr>
<td>DDA</td>
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<tr>
<td>DPA</td>
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<td>HIP</td>
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<td>HRA</td>
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<td>HSA</td>
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<td>HSfW</td>
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<td>PMH</td>
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<td>RRAA</td>
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<td>SfBH</td>
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<td>VP</td>
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<tr>
<td>WSI</td>
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<tr>
<td>YOIR</td>
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</tbody>
</table>

- **Legally binding**
  - **Children's NSF** National service framework for children, young people and maternity services: Core standards
  - **DDA** Disability Discrimination Act 2005
  - **DPA** Data Protection Act 1998
  - **HIP** National Children’s Bureau Healthier Inside Programme
  - **HRA** Human Rights Act 1998
  - **HSA** Health and Safety Act 1974
  - **HSfW** Healthcare Standards for Wales 2005
  - **PMH** Promoting mental health for children held in secure settings: A framework for commissioning services, 2007
  - **RRAA** Race Relations (Amendment) Act 2000
  - **SfBH** Standards for Better Health 2004
  - **WSI** When to share information: best practice guidance for everyone working in the youth justice system, 2008
  - **YOIR** Young Offender Institution Rules 2000