

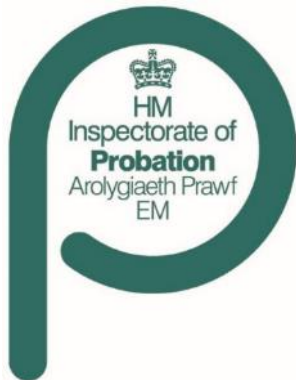
Report on an unannounced inspection of

# **HMYOI Cookham Wood**

by HM Chief Inspector of Prisons

**9 – 20 September 2019**

This inspection was carried out with assistance from colleagues at the General Pharmaceutical Council and in partnership with the following bodies:



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### **Glossary of terms**

We try to make our reports as clear as possible, but if you find terms that you do not know, please see the glossary in our 'Guide for writing inspection reports' on our website at: <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

# Introduction

This report details findings from our latest inspection of HMYOI Cookham Wood, a facility holding up to 188 boys aged between 15 and 18. In common with all young offender institutions (YOIs), and recognising the risks and accountabilities relating to the imprisonment of children, Cookham Wood is subject to independent inspection annually.

When we inspected last year, we reported outcomes for children that were insufficient in three of our healthy prison tests and reasonably good in only one, 'care'. At this inspection, the situation had deteriorated to the extent that outcomes were now insufficiently good against all our healthy prison tests. Despite these disappointing verdicts, local managers sought to provide some context in terms of their frustration at being unable to recruit and retain sufficient staff. New recruitment initiatives were underway and there was some hope that the impending closure of the adjacent Medway Secure Training Centre (STC) would lead to an influx of transferred staff in the new year. Staff shortages, however, could not have come at a worse time as the institution was running near capacity as children were diverted away from Feltham A YOI, as that institution responded to the Urgent Notification we issued to it earlier in the year.

Cookham Wood was still not safe enough. Children were received into the institution reasonably well but induction arrangements were undermined by extended periods of inactivity and lock-up. Safeguarding procedures were sound and levels of self-harm were lower than at comparable prisons, with those in crisis telling us they felt supported. Levels of violence, however, some of which was serious, remained high. Work was in place to resolve conflict, supported by a comprehensive behaviour management strategy, but much of this was impeded by the shortage or regular re-deployment of staff. In addition, too much low-level poor behaviour went unchallenged and too little was done to encourage fuller engagement among children. Safety was further undermined by overreliance on reactive 'keep apart' lists, which hindered a full and smoothly-run regime, and by significant amounts of lock-up.

Use of force had increased and was high, and more than half of incidents required the full deployment of restraint techniques. Children could also find themselves segregated on at least two units, Bridge and Phoenix, or on normal location. The purpose of these units required clarification and the regime for children on them was too limited, despite the attention of caring and supportive staff. The accommodation on Phoenix was poor.

Relationships between staff and children generally were not good enough. Barely two-thirds of children felt respected and staff rarely had sufficient time to meaningfully engage with them. Relationships were better on the Cedar unit. Accommodation was modern but its upkeep poor: the environment was often grubby and standards of cleanliness and general maintenance required improvement. The quality of food was reasonable but most children were required to eat their meals in their cells. Consultation arrangements needed more support and children experienced limited access to application and complaints procedures. The promotion of equality was poor, but the quality of health provision remained good.

We found 28% of children locked in cell during the school day, with most accessing just five hours a day out of cell during the week and two hours at weekends. Access to the gym and library was restricted. Despite some improvements to provision, punctuality and attendance at education and vocational training were poor, which limited education hours and contributed to the fact that only half those engaged on courses completed them. Overall, our colleagues in Ofsted judged the learning and skills provision as 'requires improvement', their second lowest assessment.

Oversight of resettlement work was similarly disappointing, lacking focus and coordination. The casework department operated in isolation, many case managers needed better training and only half of children told us they thought they had a custody plan. Those plans that were completed often failed to consider risk of harm or usefully support resettlement. Release on temporary licence

(ROTL) assessments and public protection work were not sufficiently robust and in our survey just a quarter of children told us they thought someone was helping them with their release. The lack of suitable accommodation for children being released was very concerning.

In the coming year, progress at Feltham will hopefully ease population pressures at Cookham Wood and the prospect of new staff provides some assurance that managers will be better placed to resolve the problems we identified. At this inspection we saw many hard-working staff and managers, and some improvements were evident, but so was some deterioration. We leave the institution with a number of recommendations which we hope will assist improvement. Priorities we identify include an insistence on higher standards of living conditions and children's behaviour, a need for a more active regime that incentivises and engages young people and a more robust and better coordinated delivery of effective resettlement services.

**Peter Clarke CVO OBE QPM**  
HM Chief Inspector of Prisons

September 2019

# Fact page

## Task of the establishment

Young offender institution for boys aged 15 to 18

## Certified normal accommodation and operational capacity<sup>1</sup>

Prisoners held at the time of inspection: 171

Baseline certified normal capacity: 188

In-use certified normal capacity: 161

Operational capacity: 188

## Notable features from this inspection

*31 children were remanded or sentenced for murder or attempted murder*

*28% of children were on remand*

*75% of children had had involvement with children's social care*

*Almost two-thirds of the children were from a black and minority ethnic background*

*There were 20 young adults over the age of 18, eight of whom were awaiting placements in the adult estate*

*There had been 466 instances of ROTL in the last six months, 39% of which were used for education and training purposes.*

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

Public

## Region/Department

Youth Custody Service

## Date of last full inspection

December 2018

## Brief history

HMYOI Cookham Wood was built in the 1970s, originally for young men, but its use was changed to meet the growing need for secure female accommodation at the time. In 2007-8, it changed its function to accommodate 15 to 17-year-old young men to reduce capacity pressures in London and the south-east for this age group.

In January 2014, a new purpose-built residential unit was opened incorporating integrated facilities and designed to meet the needs of the young people and improve safety.

## Short description of residential units

176 single cells with integral telephone and showers, spread over six self-contained landings. One room to accommodate a young person with a disability.

<sup>1</sup> Baseline CNA is the sum total of all certified accommodation in an establishment except cells in segregation units, health care cells or rooms that are not routinely used to accommodate long stay patients. In-use CNA is baseline CNA less those places not available for immediate use, such as damaged cells, cells affected by building works, and cells taken out of use due to staff shortages. Operational capacity is the total number of prisoners that an establishment can hold without serious risk to good order, security and the proper running of the planned regime.

Phoenix unit – seven bed separation unit  
Cedar unit – 17 bed resettlement unit

**Name of governor/director**

Paul Durham

**Escort contractor**

GeoAmey

**Health service commissioner and providers**

Primary care – Oxleas NHS Foundation Trust

Health and well-being – Central and North West London NHS Foundation Trust

Substance Misuse Service – Open Road Substance Misuse

**Learning and skills providers**

Novus (The Manchester College)

**Independent Monitoring Board chair**

Anne Finlayson



# About this inspection and report

A1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police custody.

A2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.

A3 All Inspectorate of Prisons reports include a summary of an establishment's performance against the model of a healthy prison. The four tests of a healthy prison are:

<b>Safety</b>	Children, particularly the most vulnerable, are held safely.
<b>Care</b>	Children are cared for, their needs are met and they are treated with respect for their human dignity.
<b>Purposeful activity</b>	Children are able, and expected, to engage in education and other activity that is likely to benefit them.
<b>Resettlement</b>	Children are prepared for their release into the community and helped to reduce the likelihood of reoffending.

A4 Under each test, we make an assessment of outcomes for children and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed nationally.

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

- A5 Our assessments might result in one of the following:
- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
  - **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for children.
- A6 Five key sources of evidence are used by inspectors: observation; surveys of children; discussions with children; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.
- A7 All of our inspections are unannounced, other than in exceptional circumstances, and follow up recommendations from the last full inspection.
- A8 All inspections of prisons are conducted jointly with Ofsted or Estyn (Wales), the Care Quality Commission, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

## This report

- A9 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of children and conditions in prisons*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.
- A10 Details of the inspection team and the establishment population profile can be found in Appendices I and IV respectively.
- A11 Findings from the survey of children and a detailed description of the survey methodology can be found in Appendix V of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.<sup>2</sup>

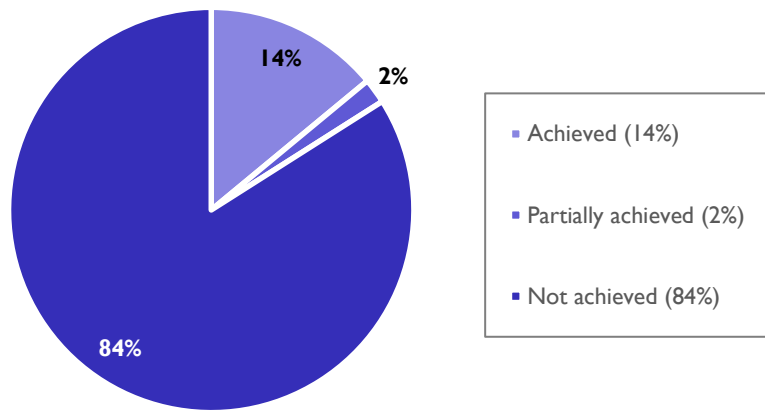
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<sup>2</sup> The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

# Summary

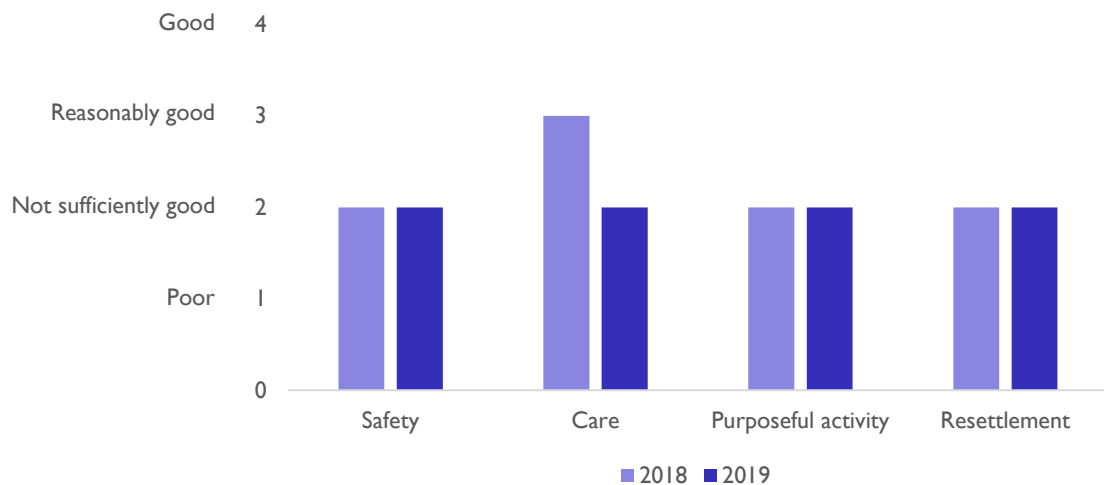
- S1 We last inspected HMYOI Cookham Wood in 2018 and made 50 recommendations overall. The prison fully accepted 37 of the recommendations and partially (or subject to resources) accepted 11. It rejected two of the recommendations.
- S2 At this follow-up inspection we found that the prison had achieved seven of those recommendations, partially achieved one recommendation and not achieved 42 recommendations.

Figure 1: HMYOI Cookham Wood progress on recommendations from last inspection (n=50)



- S3 Since our last inspection outcomes for children remained not sufficiently good in the areas of safety, purposeful activity and resettlement. Outcomes declined from reasonably good to not sufficiently good in the area of care.

Figure 2: HMYOI Cookham Wood healthy prison outcomes 2018 and 2019<sup>3</sup>



<sup>3</sup> Please note that the criteria assessed under each healthy prison area were amended in November 2018. Healthy prison outcomes reflect the expectations in place at the time of each inspection.

## Safety

**S4** Reception processes at Cookham Wood were reasonable but a full induction was undermined by excessive periods of lock-up. Safeguarding had improved since the previous inspection. There was good care for children at risk of self-harm. Levels of violence remained too high. Management of the perpetrators of violence and support for victims were reasonable but undermined by redeployment of the conflict resolution team. The instant rewards and sanctions system was less effective. Use of force was high and there were weaknesses in oversight. The regime for separated children was poor despite good efforts by staff on Phoenix and Bridge units. Living conditions on Phoenix unit remained poor. **Outcomes for children were not sufficiently good against this healthy prison test.**

**S5** At the last inspection in December 2018 we found that outcomes for children in Cookham Wood were not sufficiently good against this healthy prison test. We made 18 recommendations about safety. At this follow-up inspection we found that three of the recommendations had been achieved and 15 had not been achieved.

**S6** Children continued to arrive late in the evening which limited the time available for them to engage with the reception and first night processes and settle in before being locked up for the night. Reception was a calm, welcoming environment. Processes were reasonably swift. Children had an interview with a member of staff but only a third of children who had worries or concerns when they arrived said staff helped them to deal with these. Induction cells were adequately equipped for new arrivals. A full induction programme was provided but fewer children than at the previous inspection said they were told everything they needed to know about Cookham Wood in their first few days. Children spent a lot of time locked up during their induction period.

**S7** All required safeguarding policies and procedures were in place, but we could not be sure that every use of force incident was reviewed because of staff shortages. Timeliness of referrals to the designated officer (DO)<sup>4</sup> had improved. All serious allegations that were identified were referred to the DO for independent scrutiny.

**S8** Levels of self-harm remained lower than at comparable establishments. Children subject to ACCT<sup>5</sup> monitoring felt supported by staff and the quality of ACCT documentation remained generally good. However, health care staff and other departments did not contribute to all scheduled reviews. The use of defensible decision logs when separating a child on an ACCT had improved and was good.

**S9** Security intelligence was processed swiftly but not all actions took place, including searching and drug testing. Some security procedures were too restrictive which affected the delivery of the regime and important interventions. An example included the significant number of children who were kept apart from others to reduce the risk of violence. This affected the time all children spent out of their cell engaging in purposeful activity.

**S10** As at the previous inspection, Cookham Wood had a comprehensive behaviour management strategy which gave weight to incentives and was clearly linked to violence reduction, bullying and conflict resolution initiatives. We found that too much low-level poor behaviour was not challenged by staff, despite clear guidelines about what was and was not acceptable. Children were less positive about the incentives and earned privileges (IEP) scheme than at the previous inspection and we found that staff used instant rewards and sanctions less

<sup>4</sup> The designated officer, or DO, (formerly known as the local authority designated officer, or LADO) works within Children's Services and gives advice and guidance to employers, organisations and other individuals who have concerns about the behaviour of an adult who works with children and young people.

<sup>5</sup> Assessment, care in custody and teamwork case management of children at risk of suicide and self-harm.

frequently. Children could achieve the enhanced level of the IEP scheme quickly after their arrival and could progress to the enhanced landing or Cedar unit which provided a better environment and regime. However, the significant numbers of enhanced children living on other units did not receive the incentives they were entitled to.

- S11 The use of disciplinary hearings had risen since the last inspection but remained lower than in similar establishments. The quality of the records of disciplinary hearings varied, with some demonstrating little enquiry by the adjudicating governor. There were now good links with the police to progress incidents referred to them for criminal investigation.
- S12 Our survey of children indicated that the proportion who reported feeling unsafe remained similar to our findings at the last inspection. The establishment had improved its recording of data about violence since the previous inspection, and the number of violent incidents, some of which were serious, remained high. The establishment had continued to develop conflict resolution work, and included using children as unit champions. However, the redeployment of specialist staff to support the regime meant that some children waited longer for interventions. Work to manage perpetrators of bullying and support for victims was reasonable.
- S13 Use of force had increased and was very high. The use of approved restraint techniques had increased to more than half of all incidents. Managers had not identified the reasons for this. De-escalation was evident in nearly all footage that we reviewed and the use of force was justified. We found a large backlog of paperwork which prevented the completion of quality assurance. Only 76% of staff were trained in the approved restraint techniques. Independent scrutiny had improved with weekly DO visits and an annual review by Medway Safeguarding Children Board was in progress.
- S14 Children could be separated in various units: Phoenix (a designated segregation unit); the Bridge landing (the reintegration unit); or on normal location. In practice, however, the purpose of these units required clarification as it was unclear why a particular child would be separated in a particular location. Regimes for children who were separated remained very limited and those separated on the main residential units had the worst experience. The Phoenix unit remained unsuitable accommodation for children, albeit some spent extended periods there. Relationships between staff and children were good and staff took opportunities to give children additional time out of their cells. The Bridge unit offered better accommodation and good staff support for some complex and vulnerable children. We saw some very good de-escalation of incidents that could have led to restraint. Both units had good input from psychologists. The quality of separation paperwork had improved since the establishment was visited for a thematic review earlier in 2019.

## Care

- S15** *On most wings staff simply did not have the time to develop meaningful relationships with the children in their care. Communal areas and cells were grubby and graffiti remained a significant problem. Cells were reasonably well equipped and children appreciated the in-cell showers and telephones. Food remained reasonably good, but most children ate all their meals in their cells. Consultation was reasonable but weaknesses remained in the complaints system. The promotion of equality was inadequate which was a significant concern in an establishment holding such a diverse population. Child-focused health services remained good. **Outcomes for children were not sufficiently good against this healthy prison test.***
- S16** *At the last inspection in December 2018, we found that outcomes for children in Cookham Wood were reasonably good against this healthy prison test. We made 15 recommendations about care. At*

*this follow-up inspection we found that one of the recommendations had been achieved and 14 had not been achieved.*

- S17 In our survey, less than half the children said they felt cared for by staff and only 61% said that most staff treated them with respect. On most units, staff simply did not have the time to develop meaningful relationships with the children in their care and most of the relationships that we observed were limited. Relationships were better on the Cedar unit and B3 where children were regularly out of their cells and able to interact with staff. Not all staff tried to make use of association periods to keep children engaged with introducing activities that they could do together. Custody support plans had been implemented on the Cedar unit and B3 but were in their early stages.
- S18 Accommodation was modern, but maintenance and upkeep required improvement. Cells, serveries and communal areas were grubby. Cells were generally well equipped and children continued to appreciate in-cell showers and telephones. Graffiti, some of which was offensive, remained a significant problem across the establishment. Toilets had seats but remained heavily scaled. Some children had not been shown how to keep their cells clean and did not have ready access to cleaning materials. Responses to emergency cell bells by staff continued to take too long and management oversight to address this was inadequate. In our survey, only 34% of children said it was quiet enough to sleep at night.
- S19 The quality and quantity of the food were reasonably good, but most children ate all their meals in their cells. The main kitchen, kitchen floor and trolleys used to transport food were dirty and children were not always wearing overalls and hats when serving meals. Children were able to purchase a reasonable range of goods from the canteen.
- S20 The monthly youth council meeting remained constructive, but more support was required from prison managers to oversee the actions being taken and children needed help to produce the minutes. Monthly wing meetings were poor, with most recording just the discussion without attributing actions and responsibilities. The poor regime limited the ability of children to submit an application or complaint. Many responses to complaints did not fully address the issue raised or involve the child.
- S21 The promotion of equality and diversity was weak with little oversight and limited resources. Equality meetings lacked purpose and direction and there was no meaningful action plan. Similarly, there was no consultation or deployment of equality peer representatives. Equality monitoring data were minimal and not discussed at a senior level. The lack of consultation or monitoring left managers unable to understand or address differences in treatment or perceptions. There were no discrimination complaints boxes on individual units and the process was underused by children. Investigations into discrimination complaints were very weak and many had not been responded to. The establishment was not meeting the needs of children who could not speak English.
- S22 The overall quality of health care remained good and was delivered by a caring health care team. Contract review processes and oversight of individual providers were effective. Waiting times were good but problems remained in getting children to appointments and accessing confidential space. This led to a significant waste of clinical resources. Age-appropriate health promotion intervention, screening and advice were consistently available to the children. Despite the challenges of staffing deficits and regime restrictions, the mental health team delivered a responsive, caring service. Children, however, waited far too long for mental health transfers when needed. No children required clinical substance misuse treatment at the time of the inspection. There was good, child-centred psychosocial support for those who might need it. Medicines management was well organised on site. The arrival

of medicines was mostly timely and oversight and governance provided by HMP Rochester were reasonable. The dental service was innovative and met the needs of the children well.

## Purposeful activity

**S23** *Time out of cell remained limited for most children. Library and gym facilities were good but access to the gym was restricted. Leaders and managers understood the shortcomings of the education provision and an action plan was in place. However, this had not yet improved outcomes for children. Chronic poor punctuality undermined teaching, learning and behaviour management. Most children in mainstream education and outreach did not receive the education hours that they were entitled to. Only 50% of children who started courses completed them and achieved the target qualification. This was worse in functional skills and particularly bad in mathematics. **Outcomes for children were not sufficiently good against this healthy prison test.***

**S24** *At the last inspection in December 2018, we found that outcomes for children in Cookham Wood were not sufficiently good against this healthy prison test. We made 11 recommendations about purposeful activity. At this follow-up inspection we found that three of the recommendations had been achieved, one had been partially achieved and seven had not been achieved.*

**S25** We found that, on average, children had about five hours out of cell a day during the week and just two hours at the weekend. However, some had far less than this. During our roll checks we found that 28% of children were locked up during the school day. On most wings evening association was regularly cancelled and there was chronic regime slippage.

**S26** In our survey, only 15% of children said they went to the gym or played sport once a week or more against the comparator of 54%. The gym and fitness timetable reflected the needs of the population, but access remained restricted. The library was well managed with a good range of books. Managers monitored use but were unable to identify which groups of children did not attend or those who needed support or encouragement to access the library.

**S27** Despite some progress since the previous inspection, leadership and management required improvement. Managers had performance, management and monitoring arrangements in place and understood the weaknesses in the provision. They had recently implemented a range of improvement actions to address these issues but these had not yet had a measurable impact.

**S28** Leaders' actions to improve children's punctuality at education and vocational sessions had been ineffective. Children frequently arrived at their allocated session up to an hour after its scheduled start. The movement of children back to their wings too often began barely an hour after they had arrived. Leaders' initiatives to increase the proportion of children starting, completing and achieving qualifications had been ineffective but their actions to improve children's attendance at sessions had seen modest success.

**S29** Children's access to the 21 education and vocational pathways on offer was limited because their allocation to a pathway was narrowly determined by risk factors or the availability of places rather than what suited them best. A full-time engagement and resettlement team was developing its role, not least in securing links with community support agencies and providers. Leaders recognised that their key challenges were to reduce conflict in the prison and tackle the culture and causes of violence among the children. They had commissioned several innovative projects which encouraged children to explore and reflect on how violence shaped their lives and find enduring ways to change this negative culture. These

projects were all at early stages but were clearly and positively engaging the children participating.

- S30 Leaders and managers from the education provider had concentrated very well on improving teachers' professional practice. Despite widespread improvement, this had not eliminated all the inconsistencies in the quality of teaching, learning and assessment. Too many children spent too little time in learning. Teachers' planning was frequently disrupted by children arriving late or not at all. In non-vocational sessions, children too often learned little or nothing of value. In contrast, children following vocational subjects quickly became involved in learning, however limited their time in the classroom. The most engaged and proficient learners were in social enterprise, peer mentoring, music technology, prison radio and Cedar unit classes.
- S31 Children's induction to education was comprehensive. Education staff recorded children's additional needs effectively and put additional support in place where needed. The small number of children using outreach education provision were taught subjects appropriate to their aspirations and ability. However, most did not receive the full complement of planned outreach teaching.
- S32 Most children did not arrive for sessions on time. They were at least an hour late in the worst cases and were sent back to the wings early. Their behaviour in non-vocational sessions was often poor. While most teachers managed children's poor behaviour well, it occurred too frequently in non-vocational sessions and required constant attention. Children's behaviour in vocational sessions was generally good. Children demonstrated a high respect for their teachers and co-operated well. They rose to the challenges they had been set and most were rightly proud of their achievements.
- S33 On average only half the children who started a course completed it and achieved the target qualification. This was no better than at the previous inspection. In functional skills, only about a third of children who started a course completed and achieved it. The proportion achieving a functional skills qualification in mathematics was very low. About a quarter of all children had gained the mandatory qualification allowing them to work on building sites. Others had learned useful, practical Barista skills and were competent in handling food safely.

## Resettlement

- S34 *Children and families work had improved since the previous inspection, although visits facilities remained basic. Casework was not coordinated with the rest of the establishment and oversight of resettlement required significant improvement. Only half the children knew they had a training or remand plan. Many of the plans that we reviewed lacked focus on resettlement and risk management in the community. Cedar unit (the resettlement unit) was a good initiative and there was frequent use of release on temporary licence (ROTL). However, ROTL risk assessments required improvement. Long running weaknesses in the management of public protection continued. Access to a potentially good range of interventions was undermined by staff shortages. The lack of suitable accommodation on release remained a serious concern. **Outcomes for children were not sufficiently good against this healthy prison test.***
- S35 *At the last inspection in December 2018, we found that outcomes for children in Cookham Wood were not sufficiently good against this healthy prison test. We made six recommendations about resettlement. At this follow-up inspection we found that none of the recommendations had been achieved.*



- S36 There was good support to help children keep in touch with family and friends. Family days were held regularly with themed presentations to improve awareness. Visitors had been consulted and their feedback reflected with an additional visits slot added. However, the visits room remained in need of refurbishment. The appointment of a family therapist was an excellent initiative to improve or maintain family ties. Children continued to wait too long to obtain security clearance for telephone numbers to be added to their phone lists. There was still no intervention to support young fathers in custody.
- S37 A co-ordinated approach to resettlement was absent. Poor attendance by some departments at the resettlement meeting continued and the action plan was therefore limited and did not adequately address the resettlement needs of children.
- S38 The casework department was fully staffed. Caseloads were manageable and staff were keen to help children progress. However, they lacked the necessary training and case supervision to be fully effective in their role. The casework department worked in isolation from other departments. It was concerning that some resettlement plans lacked sufficient consideration of the management of serious risk of harm in the community. In our survey, only 50% of children stated that they had a training plan, significantly lower than other YOIs. Contact with children was variable and case records were inconsistent. There was little use of the Youth Justice Application Framework and very limited information was available to community agencies as a result. Not all plans were focused on resettlement. Targets were not written in child-appropriate language. The custodial element of the child's sentence was prioritised at meetings which focused on behaviour management rather than resettlement planning.
- S39 ROTL risk assessments were not sufficiently robust. The provision and regime for children on the Cedar unit were good. Access to purposeful ROTL opportunities was more frequent than we usually see, which was encouraging. Home detention curfew and early release were being managed well. Work to manage transitions to adult prisons required improvement. There was a significant number of complex and challenging over 18-year olds awaiting a transfer to the adult estate. This unnecessarily took up staff time and resource, added to the keep-apart issues and had a negative impact on outcomes for children at Cookham Wood.
- S40 The monthly interdepartmental risk management team meeting remained poorly attended and minutes did not demonstrate sufficient oversight of work to reduce risk before release. There was no escalation process for confirming MAPPA levels (multi-agency public protection arrangements) in sufficient time before release. Mail monitoring and child contact restriction processes were proportionate.
- S41 A significant number of children were facing a very long time in custody. Individual and group support for these children was improving.
- S42 Three-quarters of the children at Cookham Wood had current involvement with children's social care. A team of social workers reminded local authorities of their statutory responsibilities to support children in custody. Despite this, it was disappointing that some children still did not receive their full entitlements.
- S43 In our survey, fewer than a quarter of children said that someone was helping them to prepare for release, considerably lower than other YOIs. A good range of accredited programmes were available for children. However, there was a limited number of facilitators to deliver these programmes, and some children waited long periods before starting interventions. There was good support for children presenting with sexually harmful behaviours.

- S44 The lack of suitable accommodation for children in sufficient time before release remained a serious concern. It was inappropriate that some children did not know where they would be living in the community at their final review meeting. This prevented meaningful reintegration planning. During the previous six months, four children had been released to bed and breakfast or hostel accommodation which was very poor. Work on finance, benefits and debt was adequate. Children were given support to open bank accounts, obtain their National Insurance numbers and apply for universal credit before release.

## Key concerns and recommendations

- S45 Concern: Too much low-level poor behaviour went unchallenged by staff. Examples included play fighting and covering door observation panels. Information about acceptable and unacceptable behaviour was included in the induction information given to children but not adhered to by them or enforced by staff. This risked the development of a culture in which it was seen by children as permissible to ignore rules and push boundaries.

**Recommendation: Clear and consistent standards and expectations of behaviour should be set and communicated to children. Poor behaviour by children should be challenged by staff.**

- S46 Concern: The number of violent incidents remained too high and the need to keep children apart from each other had a negative impact on their regime. Staffing shortages and redeployment of specialist conflict resolution staff to support the regime compounded the problem. Violence was less prevalent on B3 and Cedar units, but this was not being used to inform the approach to violence reduction across the establishment.

**Recommendation: Managers should ensure that conflict resolution work is prioritised to reduce levels of violence at Cookham Wood.**

- S47 Concern: The lack of a full complement of staff in minimising and managing physical restraint (MMPR) had resulted in a significant backlog of paperwork, inadequate quality assurance and a reduction in staff training. It was unclear if all staff using MMPR techniques were competent to do so or that child safeguarding issues were always identified.

**Recommendation: Oversight of use of force should ensure that staff using MMPR are trained to do so and all safeguarding concerns are identified.**

- S48 Concern: Despite in principle having different purposes, Phoenix and Bridge units each held children who were separated on rule 49, some for lengthy periods. In practice there was no clear reason why a child would be placed on one unit rather than the other or remain on normal location while on rule 49. The regimes and contributions by other agencies were similarly poor on both units and some children alternated between the two without appearing to make much progress.

**Recommendation: Children separated on rule 49 should have their needs identified and met.**

- S49 Concern: Positive relationships between staff and children were stifled by the poor regime and limited time out of cell. Staff were unable to spend sufficient time with children to develop meaningful and effective relationships.

**Recommendation: Staff should have the time to develop meaningful relationships with the children in their care.**

S50 Concern: Maintenance and general repairs took too long to resolve and caused significant problems such as the inability to use the sensory room or the two-group rooms on the Bridge landing. The prison was generally quite grubby and the offensive graffiti rendered the overall environment unpleasant.

**Recommendation: The establishment should be well maintained, clean and free of graffiti.**

S51 Concern: The oversight of equality work was weak and no resource was dedicated to equality issues. The Public Sector Equality Duty requires public bodies to consider how their policies or decisions affect people who are protected under the Equality Act. We found managers were not meeting this duty, there was no equality monitoring to identify differences in access to the regime or services, consultation did not take place and equality action team meetings lacked purpose and did not address key deficiencies in provision effectively.

**Recommendation: Managers should ensure that the diverse needs and entitlements of children are met.**

S52 Concern: Time out of cell was too limited at about five hours on weekdays and two hours on Saturday and Sunday, with significantly less for keep-apart children who did not have daily exercise. Regime restrictions and controlled movement affected the time available to children for education and exercise and attendance at health appointments and worship.

**Recommendation: The issues of controlled movement in small groups around the prison should be resolved to ensure that all children receive their entitlements and time out of cell is increased to 10 hours a day.**

S53 Concern: Senior leaders had not ensured that children's movement to education and skills sessions improved. The very great majority arrived late or very late for their scheduled sessions and were not ready to learn.

**Recommendation: Senior leaders should implement a new system so that children arrive on time for learning and skills sessions, are ready to learn and receive at least their minimum statutory entitlement to learning.**

S54 Concern: Children's behaviour in non-vocational sessions was frequently poor, with a minority causing violence or disturbance to lessons and others' learning. Senior leaders' initiatives to reduce violence were at an early stage.

**Recommendation: Senior leaders should eliminate poor behaviour in non-vocational sessions so that violence or disturbance to lessons ceases. They should deal effectively with the culture of violence and antagonism in the prison.**

S55 Concern: It was still the case that, on average, just under half of all children who started an accredited course in any subject completed it and gained the qualification. In functional skills only about a third completed and achieved the qualification.

**Recommendation: Senior leaders should find out why so few children gain their target qualification in any subject and take decisive actions to ensure that all children's attainment improves substantially.**

S56 Concern: A significant number of 18-year olds at Cookham Wood required a placement in the adult estate, some of whom had waited long periods. Some adult establishments refused to accept some 18-year olds, which was inappropriate. These delays in sourcing a placement

prevented sentence progression and had a negative impact on outcomes for children at Cookham Wood. The process in place to escalate concerns about transitions to the adult estate was ineffective and did not ensure timely transitions.

**Recommendation: All 18-year olds held in children's establishments should be able to transition to the adult estate in a safe and timely manner.**

S57 Concern: The casework department was not well integrated across the prison. Some initial planning meetings were not timely and some records were inconsistent. Poor use was made of information recording systems to share progress with youth offending teams and community partners. Training and remand plans were not always central to children's progression and targets did not always focus on resettlement. Caseworkers lacked the necessary training and supervision to be fully effective in their roles. Some resettlement work that had been completed with children was not always shared with other departments in the prison to ensure a coordinated approach before release.

**Recommendation: The casework department should deliver a coordinated approach to resettlement to meet children's needs before release.**

S58 Concern: Public protection arrangements were still not sufficiently robust and the interdepartmental risk management team meeting did not function well. There was inadequate oversight of high-risk cases, and some children had outstanding MAPPA levels that required confirmation before release. There was no escalation process to manage this. Some resettlement plans lacked detail on the management of serious risk of harm in the community, and ROTL risk assessments required improvement.

**Recommendation: Risk management and public protection processes should ensure safe release planning for children leaving custody.**

# Section 1. Safety

## Early days in custody

### Expected outcomes:

**Children transferring to and from custody are safe and treated decently. On arrival children are safe and treated with respect. Their individual needs are identified and addressed, and they feel supported on their first night. Induction is comprehensive.**

- 1.1 Children continued to arrive at Cookham Wood late in the evening which limited the time for reception staff to engage with them and first night staff to settle them before they were locked up for the night. On the first day of the inspection, three new arrivals did not reach the establishment until after 8pm. Escort vans were reasonably clean, although there was graffiti in the cells. Food was not offered on journeys from court. Early morning discharges to court were prompt and video-link facilities were used adequately for court appearances.
- 1.2 The reception area remained well organised with a calm, welcoming atmosphere. Procedures on both entry and exit were reasonably swift and children were not subject to routine strip-searching. New receptions had an individual interview with staff to identify vulnerability and gang affiliations. In our survey, three-quarters of children said they had worries or concerns but only 39% of these children said that staff had helped them with their concerns. A private health screening was carried out and children were given a pack of basic grocery and toiletry items and a microwave meal after changing into prison-issue clothing.
- 1.3 The induction unit had moved since the previous inspection from A1 to A3 landing where new arrivals were less visible to other children while settling in and staff could enquire with whom they could safely mix. Cells on A3 were adequately prepared for new arrivals, but some children were diverted elsewhere for their first night if children who had completed their induction had not been moved. This was caused by population pressures since the temporary closure of Feltham to new arrivals and a lack of management action to ensure that children were moved promptly following induction. New arrivals were checked hourly during their first night, and these enhanced checks continued for children who had arrived without background information. New arrivals were allowed a free three-minute phone call, but some had to wait until the following day to make their phone call. Children continued to experience delays in getting family and friends approved as contacts and added to their phone account.
- 1.4 A peer mentor on A3 assisted with practical advice, and a useful induction booklet was given to all new arrivals. This had recently been updated and included pictorial information. The induction programme was comprehensive with multi-agency contributions. However, children were not kept fully occupied for the whole day and spent too much time locked up. Not enough support was given on reception and induction to ensure that children who did not speak English could raise concerns or understand how Cookham Wood operated. In our survey, 42% of children said they were told everything they needed to know about life at Cookham Wood compared with 63% at the previous inspection. Feedback given by children at the end of their induction was not used to develop the provision.
- 1.5 Several children remained on A3 unit after their induction while a cell on a suitable unit was found for them. Their daily regime was inadequate. They went to education on

weekdays while the rest of the children had exercise in the fresh air and no alternative provision was made for them.

## Recommendation

- 1.6 Children should have an induction that keeps them fully occupied and provides them with all they need to know about life at Cookham Wood.**

## Safeguarding of children

### Expected outcomes:

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

- 1.7** There was a good safeguarding policy which was well advertised to staff. The designated officer (DO)<sup>6</sup> attended the prison weekly and offered advice to the safeguarding team.
- 1.8** A monthly safeguarding meeting was well attended, including by the governor, and good analysis was carried out. The governor also sat on the Medway Children Safeguarding Board.
- 1.9** The safeguarding team now referred every case that they were aware of to the DO, most within 24 hours of notification. There had been 60 referrals during the previous six months compared with 39 at the last inspection.
- 1.10** The majority of referrals involved excessive use of force. Most were returned with no further action, but there were cases where staff had been challenged and action taken. All video footage was viewed, but there were delays in quality assuring all use of force (see paragraph 1.38).
- 1.11** Referrals to the team were made through safeguarding team incident reports which were logged and investigated by one of the six safeguarding officers (see paragraph 1.33).

## Suicide and self-harm prevention

### Expected outcomes:

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

- 1.12** Levels of self-harm had risen sharply since our last inspection but remained lower than in comparable establishments. There had been 95 acts of self-harm in the previous six months compared with 45 at the last inspection. Prolific acts of self-harm by one child had accounted for about 55% of these incidents.
- 1.13** The number of ACCT<sup>7</sup> documents opened had increased slightly since our last inspection from 72 to 88.

<sup>6</sup> The designated officer, or DO, (formerly known as the local authority designated officer, or LADO) works within Children's Services and gives advice and guidance to employers, organisations and other individuals who have concerns about the behaviour of an adult who works with children and young people.

<sup>7</sup> Assessment, care in custody and teamwork case management of children at risk of suicide and self-harm.

- 1.14 Most ACCT documents were of a good standard, and good quality interactions by staff were recorded regularly. Care plans were good and most actions, apart from recent additions, had been completed. Case management was good and case managers contributed throughout the process. Reviews were timely but involvement by some agencies was inadequate. Health care staff had attended about two-thirds of the examples that we looked at and documents were still being closed with no health care staff present.
- 1.15 Children in crisis told us that they felt well supported and that staff cared about them.
- 1.16 Comprehensive defensible decision logs were now in place when a child on an ACCT was separated and the examples we saw were of good quality. Separation had been used as a last resort in these cases.
- 1.17 Constant watch<sup>8</sup> had been used three times in the previous six months, a considerable reduction from 38 times at our previous inspection. The purpose-built safer cell on B3 landing was used for constant watch and the use of all other constant watch accommodation had ceased, which was an improvement.
- 1.18 No investigations had been carried out into serious acts of self-harm or near misses, although a report had been commissioned to improve the understanding and management of one very complex child who self-harmed prolifically.

## Security

### Expected outcomes:

**Children are kept safe through attention to physical and procedural matters, including effective security intelligence and positive relationships between staff and children.**

- 1.19 Security intelligence was well managed and processed swiftly by a team of collators. During the previous six months, 2,598 information reports had been submitted which was comparable to similar establishments and our previous inspection. Shortages of staff prevented the prison from responding to about half the information reports where the response required a search or drug test.
- 1.20 The prison had developed good relationships with the local police, who dealt with assaults and criminal matters in the establishment and provided a liaison officer. However, despite numerous attempts by the prison, there was no sharing of information on gang activity or organised crime groups from the Metropolitan Police or their specialist Trident gangs unit.
- 1.21 Despite good work by the conflict resolution team to reduce the number of keep-apart groups (see paragraphs 1.35 and 1.36), security procedures remained oppressive and continued to limit opportunities for children to develop and progress. Movements from the wings to areas such as education, health care, visits or offender management meetings were routinely late. In the case of education classes, children often spent longer getting to and from school than they did in class (see paragraph 3.10).
- 1.22 Children who could not mix with any of their peers were separated. They spent most of the day locked up and had no interaction with any other children.

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<sup>8</sup> A constant supervision cell is designated accommodation where a person in crisis can be supervised within sight at all times. The supervision is usually conducted by a nurse or a prison officer and requires round-the-clock observation documenting any changes in circumstances or significant events in the child's ACCT book.

- 1.23** Drug use was very low and only one positive mandatory drug test had been recorded in the previous six months. There had been no positive tests for NPS.<sup>9</sup> There was a good supply reduction policy in place.

## Behaviour management

### Expected outcomes:

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

- 1.24** The approach to managing behaviour remained comprehensive and linked to other relevant strategies. The behaviour management policy emphasised the importance of incentives, the impact of sanctions on vulnerable children and the importance of good relationships between staff and children. Children were given clear information during induction about behaviour that was and was not acceptable, but too much low-level poor behaviour that we observed was not challenged. This included playfighting, the required standard of dress and covering observation panels (see key concern and recommendation S45).
- 1.25** In our survey, 34% of children said that the incentives available encouraged them to behave well compared with 53% at the previous inspection, and 25% said that staff told them when their behaviour was good against the comparator of 40%. Children were able to move to the enhanced level of the IEP scheme on completion of their induction and children transferring from other establishments could retain enhanced status if they had already achieved it. At the time of the inspection, 42% of children were on the enhanced level and 12% on the basic level. The enhanced level had some clear benefits, but not all children received their full entitlements. B3 and Cedar units provided meaningful benefits including better regimes and facilities than other units. They could accommodate 47 enhanced level children, but this was only two-thirds of those who were eligible. Enhanced level children on other units were not receiving the full benefits of the level they had worked for, including wearing their own clothes and consistent access to association.
- 1.26** The instant reward and sanctions scheme, which used green and yellow cards, continued to operate but was being used less frequently to recognise good and poor behaviour and so was less effective than at the time of the previous inspection. More green cards were issued to reward good behaviour than yellow to sanction poor behaviour. Green cards could be exchanged by recipients for additional phone credit or canteen/toiletries. Yellow cards led to immediate sanctions by a supervising officer which often involved not eating with other children or loss of association for a night or two. Oversight and monitoring of the card scheme needed strengthening to ensure consistency.
- 1.27** During the previous six months, the use of adjudications had increased from 1,134 at the previous inspection to 1,292. This was still lower than at comparable establishments. In the sample of adjudications that we reviewed, the recorded level of enquiry during the hearings was variable. In one case, for example, the adjudicating governor explored with a child who had admitted carrying a sharpened prison knife whether he was the victim of bullying, but in another, when a child said he had started a fire 'because of bad news', no exploration of potential causes was recorded. Quality assurance of adjudications had

<sup>9</sup> New psychoactive substances: generally, refers to synthetic cannabinoids, a growing number of man-made mind-altering chemicals that are either sprayed on dried, shredded plant material or paper so they can be smoked or sold as liquids to be vapourised and inhaled in e-cigarettes and other devices.



recently passed from the governor to the deputy governor. Individual feedback was given but this had not yet improved the quality of adjudications to consistently good.

- 1.28** Links with the police had improved (see paragraph 1.20) and the establishment was much better informed on the progress of assaults referred to them. Some staff had been trained by the police in evidence gathering and had a clearer understanding of which incidents to refer for criminal investigation. Regular joint meetings took place to review the progress of cases referred to the police.

## Recommendation

- 1.29** There should be incentives for good behaviour regardless of the child's location.

## Bullying and violence reduction

### Expected outcomes:

**Everyone feels safe from bullying and victimisation. Active and fair systems to prevent and respond to bullying behaviour are known to staff, children and visitors.**

- 1.30** In our survey, 11% of children said that they felt unsafe at the time of the inspection and 39% had felt unsafe at some time at Cookham Wood. In individual interviews children told us that they felt most unsafe in places where unit-based rival gangs might mix without warning. The visits hall was cited as an example of this, and a serious incident took place there during the inspection.
- 1.31** The recording of violent incidents had been strengthened since the previous inspection. Analysis of data for use at safeguarding meetings was developing, with some evidence that attempts were being made to understand better the data and trends, using this understanding in changes to local policy. Overall, the number of violent incidents over the previous six months was similar to that at the previous inspection, remaining high. There had been 109 assaults on staff, 128 assaults on other children and 80 fights between children. Some incidents were serious and had resulted in injury to staff or children (see key concern S46).
- 1.32** Violence was less prevalent on Cedar and B3 units. Children told us that unit allegiances were put to one side when they moved to these units because there was more to lose there. These perceptions were not, however, being used to inform the establishment's approach to reducing violence. The identification and management of children most in need of additional support had recently been developed.
- 1.33** The response to bullying remained the same. Safeguarding officers investigated safeguarding team incident reports which identified bullying to determine the best course of action. Bullying support plans could be opened for perpetrators and victims of bullying at one of three levels, starting with monitoring and progressing to individual interventions with psychologists or conflict resolution staff. During the previous six months, 63 bullying support plans had been opened, most of which were at the monitoring level.
- 1.34** A database was used to monitor the safeguarding concerns identified for each child and children with the most concerns were discussed at the weekly safety meeting and actions agreed and allocated to support them.
- 1.35** Conflict resolution (CR) work continued to be organised well but was hampered by the redeployment of the trained CR officers to generic supervising officer work. CR officers

were allocated to specific units which aided the development of relationships with children on those units. They were assisted by peer conflict resolution champions who had personal experience of working with the CR team. Some initiatives had been taken to resolve conflict between children which often involved them working together in activities, such as restorative play (see paragraph 3.14). The team delivered a programme of events, involving family members where possible, as well as working individually with children to resolve conflicts.

- 1.36** Over a six-month period, the CR team had managed almost to halve the number of 'keep apart' (where children had to be located, move and engage in activity separately to the children they were in conflict with). Despite this good work, 245 keep apart remained in place at the time of the inspection. This had a negative effect on the regime for some children who had to move separately to education and, on one unit, were divided into two groups who had to share the time available for association and eating together. The management of these children was difficult and time consuming for staff and children were concerned about being unlocked with the 'wrong' children. The temporary closure of Feltham A to new receptions since July 2019 had exacerbated the situation for Cookham Wood which had to manage additional children who had had known conflicts in the community.

## The use of force

### Expected outcomes:

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

- 1.37** Levels of use of force were very high. During the previous six months, force had been used on 832 occasions compared with 578 at our last inspection. This was higher than in other comparable establishments. Leaders and managers explained this increase through a combination of factors including the lack of regime, which impeded the formation of good relationships, and an inexperienced staffing group.
- 1.38** De-escalation was evident in every case that we reviewed and children were returned to their cells in most instances, which was good. During the previous six months, the number of times pain-inducing techniques had been used on children had reduced from eight incidents at the previous inspection to two at this inspection. The use of these techniques on children was inappropriate.
- 1.39** Oversight of the use of force had deteriorated. Cookham Wood had lost two of the four managing and minimising physical restraint (MMPR)<sup>10</sup> coordinators and the administrative support officer since our last inspection. There were now 562 outstanding reports compared to 108 at the previous inspection and 226 quality assurance reports were also outstanding (see key concern and recommendation S47). The risk to child safeguarding presented by this backlog had been identified and all use of force footage was viewed quickly. However, we were not satisfied that all incidents had the same level of scrutiny with the risk that safeguarding concerns were missed.
- 1.40** Staff training had also been affected and the HMPPS target of 80% of staff being refreshed in MMPR every six months was consistently not met.

<sup>10</sup> MMPR (minimising and managing physical restraint) is the system of restraint used in YOIs.

- 1.41** A restraint minimisation meeting took place every week. Incidents were reviewed for safeguarding and learning points, which was good, but there was little discussion on minimising restraint or the reasons for use of force around the establishment. There was no evidence of action planning or any feedback on actions from previous meetings.
- 1.42** Every child who was restrained was debriefed by an MMPR coordinator or safeguarding officer within 24 hours and all complaints were referred to the DO immediately. The Barnardo's advocacy service saw each child who had been restrained for the first time and referred safeguarding issues to the DO through a separate process.
- 1.43** MMPR staff referred a few cases following their review of incidents and the DO attended the prison to investigate these. We saw an excellent example of the DO identifying a staff member who had been the subject of several referrals. Additional training had been organised which was monitored and a subsequent report submitted to the DO.
- 1.44** At the time of the inspection, Medway Children Safeguarding Board were starting an annual review of the use of force at Cookham Wood. This external scrutiny presented an opportunity to identify and address deficiency.
- 1.45** Restraint minimisation plans<sup>11</sup> were thorough and eight were in operation at the time of the inspection. They were held in several key locations and staff were aware of them.

## Separation/removal from normal location

### Expected outcomes:

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

- 1.46** Children could be placed on Rule 49<sup>12</sup> and separated from other children in the Phoenix or Bridge units, or on an ordinary residential unit. Phoenix was a designated segregation unit while the Bridge was a reintegration unit for children who were unable to mix with their peers. In practice it was unclear why an individual child would be separated on one of these units rather than the other. Figures provided by the establishment showed that, over the previous six months, the Phoenix unit had been used 63 times, the Bridge unit 65 times and normal residential units 57 times to separate children. Some children had been separated more than once during this period and four children accounted for more than a third of the days children spent separated on Bridge unit. Other children moved between Bridge and Phoenix units (see key concern and recommendation S48).
- 1.47** The average time separated was 14 days on Phoenix and Bridge units and 11 days on residential units. These averages included some lengthy periods of separation. One child had spent 89 days in the Phoenix unit before transferring to a mental health facility.
- 1.48** Periods of separation were properly authorised and regular, multidisciplinary reviews were carried out. Since our thematic review of separation in May 2019, the printed records of separation had been improved and were now held in bound books which provided a coherent picture of the time children spent separated and plans to reintegrate them. A psychologist carried out a short-term assessment of risk and need which included helpful behavioural triggers. Authorisation was sought from the prison group director for each period of separation that lasted longer than 21 days. In most cases, there were records of daily checks on the welfare of separated children by the duty

<sup>11</sup> Plans that detail any physical conditions that staff may need to be aware of in case force is used on a child.

<sup>12</sup> Young Offender Rule 49 enables managers to segregate any child who, by their behaviour, presents a risk to the maintenance of good order or discipline or who is themselves at risk of harm from other children.

governor, a chaplain and a member of health care staff. However, some records were too cursory to be meaningful or to provide sufficient reassurance of the child's well-being.

- I.49** Phoenix unit staff had good knowledge of the children and interactions that we observed were responsive. Children spoke positively of the staff and their experience on the unit. Despite this, we remained of the view that the Phoenix unit was at odds with the modern accommodation elsewhere on the site and was an unsuitable environment for children. Phoenix unit continued to require investment to bring it up to the same standard as the modern accommodation on other units. Cells were adequately prepared for new arrivals and walls were painted, but graffiti was evident on fixtures that could not be painted. Children who were on standard level of the IEP scheme could have a television in their cell. The one communal shower had mould and rust on the ceiling (see Appendix IV) and required deep cleaning and refurbishing.
- I.50** Each child used the exercise area on their own. There was no equipment or activity other than painted chalkboards on the fence on which children could write or draw. Some of their contributions were offensive or directed at another child and we could not be certain that these were routinely checked and removed before another child used the area.
- I.51** The regime on the unit was limited. Each morning children could ask to have a shower, phone call and exercise when they collected their breakfast. Outreach education was offered in the mornings, but the teaching time available for each child was limited. Kinetic Youth workers (a contracted youth services team working in the prison) visited the unit each day and offered activity packs and individual sessions with children. The psychologist attached to the unit was a frequent visitor to carry out assessments and work with individual children. Unit staff did their best to give children additional time out of their cells, for example giving them the opportunity to paint other cells or to wash the chalkboards in the exercise area. Staff and children also said that additional periods of outside exercise were offered where possible and individual enrichment sessions with an officer during the afternoon. There was a small selection of books and we saw some children having individual PE sessions.
- I.52** Children living on the Bridge unit were either subject to Rule 49 and separated from their peers or were part of a small group who undertook activities together. This included exercise, outreach education, PE and association. Staff and managers did their best to form children into groups but these often broke down and children were separated again. The regime for children in groups was better than for those who were separated: in-cell showers and telephones enabled separated children to access these daily entitlements without leaving their cells. The facilitation of individual daily exercise and access to outreach education, psychologists, youth workers and case workers could be difficult with higher numbers of separated children and some children spent too long locked up each day. Other children lost the opportunity to mix with their group.
- I.53** Staffing levels were good and officers were rarely deployed elsewhere. We observed very patient interaction and de-escalation with children in situations that could have led to restraint elsewhere. Children located on the Bridge unit were complex and vulnerable and many found it difficult to integrate on the other residential units. The purpose of the unit remained unclear and it afforded a similar experience to the Phoenix unit for children located there. This was exacerbated when other units were full by accommodating some children on the unit who did not need to be there.
- I.54** Children who were separated on the residential units had the worst experience of separation. The staff were less attuned to looking after separated children and ensuring that they had daily exercise and other opportunities to leave their cells. There was also less routine provision of, for example, outreach education or PE sessions. Some moved to

a different residential unit or were supported by the conflict resolution team to resolve issues they had on their unit, and others moved to Bridge unit.

## Recommendation

- 1.55** Separated children should receive a regime that is equivalent to their non-separated peers.

## Good practice

- 1.56** *The introduction of bound books for Rule 49 documentation provided a well organised, coherent record of children's experience of separation.*



## Section 2. Care

### Relationships between staff and children

#### Expected outcomes:

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

- 2.1 In our survey, only 40% of children told us they felt cared for by staff and just 61% said that staff treated them with respect. Sixty-nine per cent said they could turn to a member of staff if they had a problem. We found staff were courteous when speaking to children but many requests took too long to address and were put aside as prison officers struggled to juggle the complexities of keeping some children apart from others. Children became frustrated as a result and did not feel listened to by staff.
- 2.2 Children spent too much time locked in their cells. This affected relationships between staff and children because there was little time to build trust and respect to form the foundation of positive professional relationships (see key concern and recommendation S49).
- 2.3 Relationships were better on Cedar and B3 than on other landings. For example, the staff on Cedar helped children to paint and maintain communal areas and many children said they enjoyed the quiz organised by B3 staff. Children on both landings frequently ate together with staff and their association periods were very rarely cancelled. The children separated on Phoenix also spoke highly of the staff who worked there. However, disappointingly, these standards of good relationships and staff and children eating together regularly had not been extended to the other landings.
- 2.4 Children on the other landings did not receive regular predictable association periods and most sessions were haphazard and/or curtailed at short notice. The curtailment of association was not monitored which created anxiety for many children who did not know when they were going to be unlocked. When they were unlocked, the association that we observed on A2 and B2 landings was loud and chaotic, which was not surprising. Children told inspectors they felt overexcited to be unlocked, and low-level poor behaviour, such as shouting, climbing on furniture and play fighting, was not always challenged by landing officers.
- 2.5 Not all staff made use of association to keep children engaged by introducing creative activities that they could do together. On B2 during association, we observed some staff sitting a distance away from children at the opposite end of the landing which made them less approachable.
- 2.6 The personal officer scheme outlined expectations of regular contact between children and their designated personal officer. However, the scheme was not being adhered to and case notes showed that most children had not spoken to their personal officer for weeks. Some children had had recent contact with their allocated custody support plan officers who were replacing personal officers.
- 2.7 The custody support plan (CuSP) had been rolled out on Cedar unit in July 2019 and on B3 in recent weeks. This was a more intensive scheme of weekly structured meetings between children and their CuSP officer. There had been problems with the

implementation of the plan, in particular the scheduling of time for officers to conduct custody support plan work on B3 was not clear. Children on Cedar unit had been seeing their CuSP officer for an hour each week since roll out and we observed good quality interactions. The officers helped children to address their concerns and the booklets completed by children were user friendly and understood by children. It was too early to assess the effectiveness of the CuSP and at the time of the inspection it was only available to a few children. However, early indicators were positive.

## Daily life

### Expected outcomes:

**Children live in a clean and decent environment and are aware of the rules and routines of the establishment. They are provided with essential basic services, are consulted regularly and can apply for additional services and assistance. The complaints and redress processes are efficient and fair.**

### Living conditions

- 2.8 The living area was predominantly in one house block consisting of six main landings: A3 induction, A1, A2 and B2 ordinary location, B3 enhanced and B1 (the Bridge landing). There were two stand-alone units: Cedar, the resettlement/release on temporary licence unit, and Phoenix, the segregation unit.
- 2.9 Accommodation was modern but poorly maintained as the prison struggled with the government facilities services to address basic repairs such as damaged cell furniture or replacing the door to the sensory room on B1 (see key concern and recommendation S50).
- 2.10 The main landings on A and B units, the cells, gates leading to wings, food distribution and association areas were all grubby and required cleaning (see Appendix IV). Exercise yards were bleak and outdoor equipment had not been replaced on one yard.
- 2.11 Graffiti remained a significant issue in cells and in communal areas such as the education department toilets and C wing exercise yard, where we saw religiously and racially offensive graffiti featuring a swastika.
- 2.12 All cells apart from Phoenix had showers and in-cell telephones which children appreciated. However, many showers on A and B were filthy and, although most toilets now had lids, they needed descaling (see Appendix IV). Some children had not been shown how to keep their cells clean and did not have access to cleaning materials. Staff told us they found it difficult to obtain cleaning materials and senior managers said they would address this when we brought it to their attention.
- 2.13 Cell bells took too long to answer and we heard them ringing for lengthy periods on A and B wings. The cell call log showed that many cell bells were not answered within five minutes and it was evident that prison leaders had not given sufficient attention to ensuring that all cell bells were answered promptly. This caused frustration for many children and we were very concerned that a child needing urgent assistance might not receive it.
- 2.14 Most children we spoke to said they had adequate clothing and bedding each week and our observations reflected this. All children had to wear prison clothes with the



exception of those on Cedar and B3. This was disappointing as all children were entitled to wear their own clothes.

- 2.15** Half the children in our survey said the temperature in their cell was adequate but children told us that during the colder months the cells were too cold. Only 34% of children said it was quiet enough to sleep at night and children told us that it was noisier at weekends. Night patrol staff said they challenged children who prevented others from sleeping but more robust action was needed.

## Recommendations

- 2.16 All areas of the prison should be consistently cleaned and all graffiti removed.**
- 2.17 Delays in answering cell bells should be investigated and monitored to ensure that all cell bells are answered within five minutes.**

## Residential services

- 2.18** The main kitchen, kitchen floor and trolleys used to transport food were dirty and required deep cleaning.
- 2.19** Children could choose their own menus which met a wide range of dietary needs. However, the menus had not been reviewed for more than a year. The kitchen supplied extra portions so that landing staff could eat with the children, which was positive.
- 2.20** Meals were delivered to the wings before 5pm which was too early. However, the food remained in the trolleys for up to an hour because of regime slippage, which was unacceptable.
- 2.21** With the exception of B3 and Cedar, children had their evening meal delivered to their cells by staff to prevent conflict. This was a time-consuming task for officers and kept children locked up for longer than necessary.
- 2.22** There were opportunities for two children to help in the kitchen, but no qualification was available and only one post was filled. Children working on the serveries did not always wear hygienic overalls and hats.
- 2.23** The variety of items available from canteen was reasonable but children continued to wait too long to receive their purchases after arrival. They still received a reception pack but with limited contents which were not enough to last for more than a week.

## Consultation, application and redress

- 2.24** The monthly youth council meeting championed by Kinetic Youth remained productive but prison leaders did not provide enough oversight of the actions being taken or support for children in producing the minutes. Discussions at monthly wing meetings were recorded but actions were not attributed to managers who could effect change.
- 2.25** The number of complaints had reduced since our last inspection. However, children told us that the additional time they spent locked up reduced the likelihood of making a complaint because they had to ask staff to unlock them to pick up the forms. The

complaint boxes were still located behind the gates to the landings which inhibited confidentiality and ready access to children.

- 2.26** The tracking system for complaints was good and, in most cases, complaints were responded to in reasonable time. Robust quality assurance was conducted by the deputy governor, but in many cases the responses did not fully address the complaint or involve the child in its resolution.
- 2.27** There was no system to inform children how to access legal rights and services. Only about half the children we spoke to knew that Barnardo's<sup>13</sup> provided this service on site. At the time of the inspection, Barnardo's did not have a full staff complement.

## Equality and diversity

### Expected outcomes:

**The establishment demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no child is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The diverse needs of each child are recognised and addressed.**

### Strategic management

- 2.28** The oversight of work to promote equality was weak and this was compounded by the lack of resource allocated to this area. There was no dedicated equality officer in post and no prisoner equality representatives. The establishment was failing to deliver its Public Sector Equality Duty, which requires public bodies to eliminate discrimination and advance equality of opportunity for all, including those in protected characteristic groups.
- 2.29** The equality policy incorporated procedures to manage children in protected groups, Equality action team (EAT) meetings were held regularly with good attendance, although the meetings lacked purpose and direction. The meeting had not addressed key deficiencies in provision, such as inadequate staffing in the equality team and poor consultation. Action planning was poor (see key concern and recommendation S51).
- 2.30** Data were not analysed adequately or discussed at a senior level. Equality monitoring tool data were not made available for discussion at EAT meetings or other key meetings such as restraint minimisation. In consequence, any potential under- or over-representation of children in protected groups was not identified or addressed.
- 2.31** During the previous six months, 17 discrimination incident report forms (DIRFs) had been submitted. Investigations into DIRFs were inadequate: some had not been responded to in the appropriate time and had been dismissed; others involved the use of racist and homophobic language with no sanction for the perpetrator. We also saw examples of DIRFs which had not been investigated or a response made to the complainant. There was minimal quality assurance and no independent external scrutiny of DIRFs and inadequacies in the process were not identified.
- 2.32** Boxes containing DIRF forms were not available on individual units but were located in communal hallways. Children could not access the boxes easily or confidentially and the DIRF procedure was underused.

<sup>13</sup> Barnardo's is a national charity commissioned to provide advocacy in children's YOIs.

## Protected characteristics

- 2.33** Children with protected characteristics were identified on arrival. Health care staff identified neurodevelopmental disorders and education identified behavioural difficulties, but these were not coordinated to ensure a collaborative approach to child care.
- 2.34** At the time of the inspection, nearly two-thirds of the population were from a black and minority ethnic background. In our survey, these children broadly said that they were treated consistently with their white counterparts, with the exception of Muslim children. Thirty-nine per cent of Muslim children said they had been threatened or intimidated by staff compared to 8% of non-Muslim children (see key concern and recommendation S51).
- 2.35** Consultation for children in protected characteristic groups was poor. No focus groups had taken place which left the establishment poorly placed to understand negative perceptions in our survey, for example, of Muslim children.
- 2.36** At the time of the inspection, 19 children were registered as foreign nationals, some of whom spoke little or no English. The establishment was not meeting the needs of these children and we came across three children who were admitted to the establishment without the use of an interpreter. This was unacceptable (see key concern and recommendation S51).
- 2.37** A free five-minute phone call overseas had not been offered to all children entitled to it, and some children did not have regular contact with their family. Children met the Home Office immigration enforcement officer who attended the establishment as required. Some children we spoke to had not found this meeting beneficial, describing it as a one-way consultation rather than an opportunity to discuss their immigration status. A new service from Citizen's Advice had been introduced in March 2019, and a representative attended every two months to provide advice and information. The service was not yet fully accessible to children.
- 2.38** At the time of our inspection, 20 children had been identified as having a disability. Staff we spoke to on the residential units were unaware of the children with these disabilities in their care and there were no plans to help staff understand or manage their behaviour. The psychology team completed relevant assessments, but these were not accessible to residential staff. Staff were not sure which children were subject to a personal emergency evacuation plan and therefore what help would be needed in an evacuation.
- 2.39** The promotion of equality work for protected groups had been weak and no celebratory events were held in line with the HMPPS diversity calendar.
- 2.40** Faith provision was good and 79% of respondents in our survey said their religious beliefs were respected. New arrivals were visited every morning and duty chaplains visited each wing every day and were visible during movements for children to request a meeting.
- 2.41** The chaplaincy covered both numerically large and small faiths. There were weekly services for Roman Catholic, Church of England and Muslim children and a Jehovah's Witnesses chaplain attended each week to see a Jehovah's Witness child. Children of no faith were invited to attend prayer sessions and services.
- 2.42** The chaplaincy was well integrated into the establishment. The managing chaplain attended all key establishment meetings, including the senior management meeting, and, if attendance was not possible, a written contribution was provided.

- 2.43** Any child suffering a bereavement or requiring other support could see a chaplain in private, irrespective of religious denomination, which was good practice.

## Health services

### Expected outcomes:

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

- 2.44** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)<sup>14</sup> and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. The CQC found there were no breaches of the relevant regulations.

### Strategy, clinical governance and partnerships

- 2.45** Oxleas NHS Foundation Trust delivered primary care services, Central and North West London NHS Trust (CNWL) delivered child and adolescent mental health services (CAMHS), and The Forward Trust and Open Road substance use services. The GP contract was held by Kent Healthcare Consortium, the optician was provided by John Rose Eyecare and Alva House Dental Practice delivered dental services.
- 2.46** Health services were commissioned by NHS England through separate provider contracts and monitored through regular contract review processes, including progress on the newly contracted secure stairs<sup>15</sup> model within mental health (see paragraph 2.65). Governance oversight and partnership working required more regular engagement at a strategic level. The quality of health care remained good and was delivered by a caring health care team. Waiting times were good overall, but there were still problems in getting children to appointments and finding a confidential area which led to a significant waste of clinical resources.
- 2.47** There were very few complaints and responses to complaints were focused and apologetic when appropriate. There was little evidence of a separate health complaints system on the wings except for Cedar unit and the head of health care planned to rectify this. Service user feedback was minimal following the temporary loss of the User Voice contract, and commissioners told us that this would be resolved imminently.
- 2.48** Reporting and learning from clinical incidents remained in place but there was evidence that some appropriate incidents had not been reported. Treatment rooms were clinically appropriate and cleaned each day. Infection control had improved and actions were being progressed.
- 2.49** Staff said they felt well supported and there was good evidence of managerial and clinical supervision. Training was up to date and monitored, including life support training.

<sup>14</sup> CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

<sup>15</sup> Secure Stairs (the Framework for Integrated Care) addresses the needs of children in secure children's homes, secure training centres and young offender institutions. This framework allows for a joined-up approach to assessment, sentence/intervention planning and care, including input from mental health staff regardless of previous diagnosis, as well as from social care professionals, education professionals and the operational staff working on a day-to-day basis at the setting. <https://www.england.nhs.uk/commissioning/health-just/children-and-young-people>.

- 2.50** There was evidence of follow-up mechanisms to review children who had been injured or had attended hospital following an incident. Emergency response arrangements had changed since our last inspection and processes for calling an emergency ambulance were less robust. Monitoring of equipment and training levels of officers had improved to a satisfactory level.
- 2.51** At the time of our inspection, no children were in receipt of social care. There was no referral or assessment pathway if a child required social care support, and no arrangements to support 18-year-olds in line with the Care Act 2014. Disabilities and the need for support with daily living were screened for during the health care reception process. There was no procedure for determining action to be taken if support needs were identified.

## Recommendations

- 2.52** **Emergency response arrangements should be improved and ambulances called without delay when necessary.**
- 2.53** **A memorandum of understanding should be developed with the local authority and social care provider to ensure that arrangements are in place if a child requires social care.**

## Promoting health and well-being

- 2.54** Age-appropriate health promotion intervention, screening and advice were consistently available to the children.
- 2.55** A support, time and recovery worker had lead responsibility for child focused health promotion. A weekly health promotion induction was delivered to all children new to the prison which included dental care, healthy eating and sleep hygiene. The national health awareness calendar was followed and joint awareness days were undertaken.
- 2.56** A range of health promotion material was displayed in education and on landings. Information was relevant to the population, such as emotional resilience. There were effective links with the gym for children who needed individual work to address health or weight concerns.
- 2.57** A sexual health nurse provided appropriate health screening and treatments. Health screening and immunisation services were age appropriate, including MMR and meningitis vaccines. Work was in progress to increase the uptake of blood-borne virus testing.
- 2.58** Smoking cessation support was available and nicotine replacement patches were offered.
- 2.59** There was no local communicable disease outbreak policy and staff used the national policy. This did not include local contact details which could delay appropriate notifications.

## Primary care and inpatient services

- 2.60** Access and waiting times for primary care services were good. The comprehensive health assessment tool (CHAT) continued to be used to screen and assess the needs of the children. CHAT was undertaken by trained nurses across the health providers and

included a neuro-disability assessment for all children to identify dysfunction. Health care assistants also undertook a sight and hearing screening equivalent to schools in the community, which was positive.

- 2.61** Applications to see health care were made through an electronic kiosk which was available during key periods of the day and supplemented by health care paper applications. These were managed promptly by the primary care administrator or health care assistants. Inspectors noted that the information uploaded on to the prison kiosk system by the children was not managed in line with national standards for managing health information which all health providers are required to address.
- 2.62** Oxleas offered a full range of primary care clinics appropriate to the needs of children including asthma, epilepsy, GP consultations, nurse-led clinics and physiotherapy.
- 2.63** A local GP practice continued to provide three sessions a week, including Saturday morning for emergencies, which was sufficient to meet need. Routine GP appointments were available within two to seven days and emergency cover was provided at the same level as in the community. Long-term conditions were managed by the GPs with referral to specialists as necessary. During the previous three months, the Thursday GP clinic slot had been filled by an advanced nurse practitioner which reflected community services.
- 2.64** External hospital appointments were now more frequently cancelled because of operational pressures. Cancellations were as high as 24% in some months, although these were often rebooked within a very short timeframe.

## Mental health

- 2.65** The health and wellbeing team operated as a psychology-based, trauma-informed service which was delivered from Monday to Friday between 9am and 5pm. There were plans to extend the working day to 8pm and provide a limited additional service on a Saturday as part of the new secure stairs staffing model (see paragraph 2.46). The secure stairs project had been introduced in April 2019, additional staff were being recruited and it was anticipated that the service would be fully implemented by July 2020.
- 2.66** Primary mental health care was delivered by both the primary care provider and the health and wellbeing team. Primary health care nursing staff provided low-level support for children on sleep, hygiene and anxiety and referred to the health and wellbeing team for psychological support.
- 2.67** The team consisted of a wide range of skilled, motivated, caring staff and comprised a part-time psychiatrist, a band 6 CAMHS nurse, clinical psychologists and a part-time speech and language therapist. A CAMHS nurse was due to take up post as clinical team lead and there were plans to appoint a nurse prescriber. The team was working with 72 individual children and 15 in group work.
- 2.68** All children were screened by the mental health team on arrival using the CHAT. Staff gathered information from community mental health teams and youth offending teams to assist with developing care plans. Care plans were child centred and detailed and took account of risks to children and staff. The team met each day to prioritise work, allocate clinical attendance at ACCT reviews and discuss incidents and risks. Children were discussed at the weekly allocation meeting which ensured a person-centred approach.
- 2.69** The health and wellbeing team resource was adversely affected by lack of access to the children and space to deliver assessments and interventions. Peer mentors were active in

motivating children to engage with the team. Prison operational staff completed training modules on mental health awareness, as part of the new prison officer induction and suicide and self-harm training.

- 2.70** There had been one transfer under the Mental Health Act in the previous nine months which had not been facilitated within agreed timescales. A further child was awaiting assessment at the time of the inspection.

## Recommendation

- 2.71** **The transfer of patients to community mental health services under the Mental Health Act should occur within the national guideline timescale.**

## Substance misuse

### Expected outcomes:

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

- 2.72** The drug and alcohol strategy was up to date, but a whole-prison strategic approach to drugs and alcohol was absent. This was mitigated in part by the limited use of illicit drugs on site. There were effective partnership arrangements between drug support workers and the health and wellbeing team.
- 2.73** The Forward Trust delivered clinical treatment for substance misuse and sub-contracted the delivery of psychosocial interventions to Open Road. However, no children were receiving clinical treatment at the time of the inspection. Clinical treatment was provided as required by a nurse located in a neighbouring prison who worked for The Forward Trust.
- 2.74** The psychosocial service was delivered between 8am and 4pm by a team of three drug recovery workers and a team manager. The core work of the team was drug and alcohol misuse and the team was supporting 40 children in structured treatment, 16 in brief interventions and 91 in child-centred group work. Regime curtailments sometimes prevented the delivery of interventions and appointments had to be rescheduled.
- 2.75** All children were screened for individual needs on arrival at the prison by a drug recovery worker using the CHAT assessment. Care records were child-focused and of good quality and included CHAT screens, care plans and risk assessments. Children were provided with harm reduction information and advice during a weekly induction group and they received age-appropriate interventions including one-to-one and group work. Individual sessions covered a range of topics such as cannabis and alcohol awareness and harm minimisation, the consequences of drug dealing and offending behaviour.
- 2.76** The substance misuse team also attended a monthly family day and an evening drop-in service during association. Two peer mentors co-facilitated group work, providing general advice and information on substances, including risks and effects.
- 2.77** Drug recovery staff received regular training and supervision and team meetings were held regularly.

## Medicines optimisation and pharmacy services

- 2.78** Medicine management was well organised by the primary care nurses. Medicines were supplied by the pharmacy at HMP Rochester and arrived punctually. Medicines were stored appropriately and stock was checked and ordered each week. There were no incident reports by the clinical team of delayed arrivals of medicines.
- 2.79** The pharmacy team visited once a month which was less frequent than at our previous inspection. The pharmacist at Rochester screened most of the prescriptions remotely which was good. The medicines and therapeutics committee met regularly to review standing operational instructions, the formulary and prescribing trends, but this meeting was not always well enough attended.
- 2.80** Prescribing was age appropriate and most medicines were administered twice a day. Flexible arrangements were made when medicines had to be administered outside these times. Officers supervised medicine administration, but most officers did not limit the number of children at the hatch or ensure that they arrived with identification. This was particularly difficult when administering controlled drugs.
- 2.81** Nurses used patient group directions<sup>16</sup> on a limited basis to supply and administer medicines. Over-the-counter medicines administered by nurses were appropriately recorded on SystmOne (electronic patient records). Almost all medicines were not in possession, although some children kept medicines, such as inhalers and ointments, in their cells.
- 2.82** The continued provision by officers of pain relief at night for children experiencing dental pain was good. Medicines such as insulin pens (for diabetes) and EpiPens (to counteract allergic reactions) were kept by nursing or custody staff and given to children to prevent delays to treatment, which was commendable.

## Recommendation

- 2.83** **The oversight of medicines management should be strengthened by improved attendance at medicines and therapeutics committee meetings and improved audit schedules.**

## Dental services and oral health

- 2.84** A local dentist was commissioned to provide an appropriate range of NHS treatments. A dental nurse delivered weekly dental triage and prioritised children's requests to see a dentist based on dental risk. There was a good range of oral health promotion information and advice on oral hygiene and disease prevention was provided during dental consultations.
- 2.85** Waiting times to see the dentist were good with an average wait of four weeks. Consent to treatment was obtained and comprehensively recorded on SystmOne.
- 2.86** The dental suite was fit for purpose and met infection control standards. There was no separate decontamination area. However, dental equipment was well maintained and certified appropriately. The compressor had broken during the week before our

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<sup>16</sup> Patient group directions authorise appropriate health care professionals to supply and administer prescription-only medicine.



inspection. This was being addressed and the dentist told us that extra sessions would be held when the clinic was fully operational to clear any waiting lists.

- 2.87** Local governance processes and infection prevention control arrangements were effective. The dentist and dental nurse were appropriately trained and qualified.



## Section 3. Purposeful activity

### Time out of cell

#### Expected outcomes:

**Children spend most of their time out of their cell, engaged in activities such as education, leisure and cultural pursuits, seven days a week.<sup>17</sup>**

- 3.1 We found 28% of children locked up during the day, slightly more than at the previous inspection. Two-thirds of the remaining children were at education and 6% had gone to appointments or refused to attend.
- 3.2 Children had about five hours out of cell a day during the week and two hours at the weekend. Movements around the prison were strictly controlled and in small groups to keep appropriate children apart. This caused considerable slippage of the regime throughout the day (see key concern and recommendation S52).
- 3.3 Most children had half an hour's exercise in the open air on weekdays and an hour at weekends. Exercise took place early in the morning before education. Children who were being kept apart from others to reduce violence and bullying did not exercise every day (see paragraph I.36).
- 3.4 The library was a warm and welcoming environment run by Medway Library Services. There was a good range of books from novels to non-fiction and books could be requested. There were some books in different languages, but there were no books to support the education curriculum. The easy reading section for children with limited literacy skills had been appropriately reworded to avoid bringing attention to their development needs. The library service organised visits by authors and reading challenges.
- 3.5 Children could use the library every week for a half-hour session, although these sessions were cancelled if there were curtailments to the regime. Attendance data indicated that 1,560 children had attended the library during the previous six months. The data were not sufficiently detailed to identify protected characteristics (see paragraph 2.30) or the proportion of the population who attended so that the service could be promoted more effectively.
- 3.6 Children living on the separation unit were now afforded the opportunity to visit the library once a week and the librarian visited other units each week for children whose access to the library was limited.
- 3.7 The gym was well managed and facilities were good. There was a sizeable sports hall and outdoor weather pitches and a good range of gym equipment. All new arrivals received an induction to the gym and a comprehensive induction assessment incorporating a wide range of health demographics. A training plan had been devised for implementation. Gym orderlies were being recruited but the role was not yet active.
- 3.8 Children who attended education were scheduled to attend the gym each week, but provision for those not in education was inadequate. There were limited opportunities for these children to participate in gym and sports activities because gym sessions were regularly cancelled when the regime was curtailed. Attendance data did not include a breakdown of protected characteristics (see paragraph 2.30) and there was no

<sup>17</sup> Time out of cell, in addition to formal 'purposeful activity', includes any time children and young people are out of their cells to associate or use communal facilities to take showers or make telephone calls.

mechanism to promote the service to children who did not attend. In our survey, only 15% of children said they went to the gym or played sport once a week or more against the comparator of 54%. Children continued to be unable to access qualifications in the gym.

## Education, learning and skills

### Expected outcomes:

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

Ofsted<sup>18</sup> made the following assessments about the learning and skills and work provision:

<b>Overall effectiveness of learning and skills and work:</b>	<b>Requires improvement</b>
<i>Outcomes for children and young people engaged in learning and skills and work activities:</i>	<i>Requires improvement</i>
<i>Quality of learning and skills and work activities, including the quality of teaching, training, learning and assessment:</i>	<i>Requires improvement</i>
<i>Personal development and behaviour:</i>	<i>Requires improvement</i>
<i>Effectiveness of leadership and management of learning and skills and work activities:</i>	<i>Requires improvement</i>

## Management of education and learning and skills

**3.9** Leadership and management were more effective than at the previous inspection but still required improvement. Prison and education leaders had addressed two of the main recommendations with some success. They had implemented close, productive working arrangements and effective new performance, management and monitoring systems for education, learning and skills. They regularly made good use of children's views and acted on their suggestions. However, while leaders were working well in partnership to implement a range of perceptive, well-planned and carefully considered improvement projects, most of these were recent and showed no measurable impact.

**3.10** Key recommendations remained unresolved, for example leaders' actions to improve children's punctuality at education and vocational sessions were ineffective. The timing of movements to education were dominated by keep-apart rules which were too complex and long-winded and caused very long delays. We observed about a third of children arriving at their allocated sessions up to an hour after the scheduled start, so that they missed the first lesson completely. Children's movement back to their respective wings

<sup>18</sup> Inspection of the provision of education and educational standards, as well as vocational training in YOIs for young people, is undertaken by the Office for Standards in Education Children's Services and Skills (Ofsted) working under the general direction of HM Inspectorate of Prisons. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.

often started barely an hour later. Only a very small minority of children received their statutory entitlement to education and, on average, children received no more than 12 hours a week, and the majority much less (see key concern and recommendation S53).

- 3.11** Leaders had ensured that the number of activity spaces remained greater than the number of children. They offered 21 education pathways but allocation to these pathways was determined by the wing children were based on or what was available, rather than what best matched their aspirations or previous experience. About two-thirds of children could not follow the vocational pathways offered because they were classified as high risk. Leaders were reviewing their risk assessment strategy to determine how more children could be allocated safely to these popular vocational activities. The virtual campus<sup>19</sup> was not operational and children had no opportunity to do their own academic research.
- 3.12** Leaders' initiatives to increase the number of children starting and achieving qualifications had not been effective.
- 3.13** A full-time engagement and resettlement team was developing its role. The team now maintained contact with each child from arrival through to their release or transition to an adult prison, although contacts were not sufficiently regular or formal. The team was developing better links with community support agencies and training providers to provide children with effective support after release.
- 3.14** Leaders recognised that their principal challenges were to reduce conflict and address the culture and causes of violence among the children. Several small-scale, innovative projects had been commissioned to start tackling these problems. A recent pilot project based on football had successfully promoted team building and cooperation between a small group of otherwise antagonistic children. The outcomes demonstrated to the participants and their peers that they could work as a team to overcome challenges without resorting to fighting. Leaders had since commissioned a longer project involving more children. Leaders had appointed highly experienced youth workers to run daily sessions for children over the coming academic year exploring the causes and culture of violence and ways to manage them. These sessions were highly participative and were quickly gaining the trust and engagement of the children involved. A music-making and lyric writing project successfully encouraged children on the enhanced wing to develop their self-awareness, promoted their perseverance and broadened their perspectives on life. Children respected the facilitators of this project, a few of whom had made direct contact with children after their release.

## Recommendations

- 3.15** **Prison and education leaders should ensure that children's allocation to learning pathways is determined by what best matches their aspirations or previous experience.**
- 3.16** **Prison and education leaders should ensure that the engagement and resettlement team provides comprehensive support to children during and after their time in the prison.**
- 3.17** **Prison leaders should review the risk assessment process to establish how more children can take up vocational courses.**

<sup>19</sup> The virtual campus provides prisoner access to community education, training and employment opportunities via the internet.

## Quality of provision

- 3.18** Education leaders and managers had improved the professional practice of teachers. However, the quality of teaching and learning remained uneven. Most staff had benefited from focused professional development during the year and support from on-site curriculum champions.
- 3.19** Too few children spent time learning in non-vocational sessions. Lesson plans were frequently rendered pointless by children arriving late, arriving and then leaving for another appointment, or not arriving at all. In these sessions, children too often learned little or nothing of value because they were not paying attention or caused distractions. Most teachers managed this behaviour well, but their attention was frequently diverted from others in the class. A very small minority of teachers did not challenge poor behaviour or bad language.
- 3.20** Outreach teachers provided useful support to a few children directly on their accommodation blocks. This support was narrow in scope and did not reflect the learners' needs and abilities adequately. Resources were often poor. Most children did not attend the outreach provision for all the scheduled hours. However, teachers did help a few children to develop new skills and knowledge appropriate to their aspirations and ability and at a pace that suited their needs.
- 3.21** Most children following vocational subjects quickly became involved in learning. The most engaged of these children were in social enterprise, peer mentoring, music technology, prison radio and Cedar unit classes. In these sessions, the vast majority of teachers knew their learners well and planned carefully to meet the needs of individual children. Teachers used questioning well to probe and challenge learners to think deeply and provided the children with useful feedback on the quality of their work. Teachers' written feedback was constructive and supportive.
- 3.22** Education staff ensured that children's induction to education was comprehensive. Induction included a confidential and effective individual interview. Children felt able to speak openly about how they felt and discuss individual barriers to their learning.
- 3.23** Education staff recorded and responded to children's additional needs effectively. Additional support was put in place for children with special educational need or education and health care plans but was not always timely. Most teachers encouraged learners to develop their English speaking, reading and listening skills. Peer mentors were trained well and, where available, teachers used them effectively in education sessions to support their peers.

## Recommendations

- 3.24** Education leaders should maintain their focus on developing the skills of teaching staff, ensuring particularly that all teachers manage instances of poor behaviour or bad language well.
- 3.25** Prison and education leaders should improve the quality of outreach provision and extend the time that children can access it.

## Personal development and behaviour

- 3.26** Only a very small minority of children were punctual at education sessions. Unpunctuality was the norm for the great majority of children and beyond them to influence, so that teachers could neither challenge lateness nor promote the value of punctuality.
- 3.27** Too few children developed an appreciation of the value of education and most were unconcerned about developing this skill essential for employment. On arrival at the education department it was common to see a minority of children ambling down the corridor, attempting to enter the wrong class, banging on doors and windows and shouting to each other along the corridors. Those who were assigned to non-vocational sessions were frequently the most disruptive or inattentive (see key concern and recommendation S55).
- 3.28** The level of violence in the education department was high. Just under one in five of the violent acts recorded at the prison in the past academic year had taken place during education sessions.
- 3.29** Children's behaviour in vocational sessions was generally good or very good. In these sessions, children demonstrated strong respect for their teachers and co-operated well. They valued the training they were receiving. They were attentive and rose to the challenges that teachers set them and most were, rightly, proud of their achievements and the standard of their work.

## Education and vocational achievements

- 3.30** On average, only half the children who started an accredited course completed it and achieved the target qualification which was no better than at the previous inspection. Only about a third of children who started a course in functional skills went on to complete and achieve it. The proportion achieving a functional skills qualification in mathematics was very low (see key concern and recommendation S54).
- 3.31** About a quarter of all children had gained the mandatory qualification allowing them to work on building sites. Others had learned highly marketable Barista and customer service skills, and others had become competent in handling food safely. Koestler Trust<sup>20</sup> award judges had recently rated the great majority of children's work entered for this competition as 'commended' or 'highly commended'.

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<sup>20</sup> Art awards scheme for offenders, secure patients and detainees.





## Section 4. Resettlement

### Children, families and contact with the outside world

#### Expected outcomes:

**Managers support children in establishing and maintaining contact with families, including corporate parents, and other sources of support in the community.**

**Community partners drive training and remand planning and families are involved in all major decisions about detained children.**

- 4.1 Support for children and families had improved since the previous inspection. The family strategy and action plan were still not finalised, but progressive and innovative practices were under review, for example a drop-in session for families to raise concerns and the use of video-link for visitors from far afield.
- 4.2 The provision of in-cell telephones subject to the availability of phone credit remained an excellent initiative to maintain contact with family and friends. This also allowed children easy access to Childline and the Samaritans, which were both free of charge. However, long delays remained for phone numbers to be approved which caused unnecessary anxiety to children, particularly in their early days in custody (see paragraph 1.3).
- 4.3 Family days continued to be held each month. These afforded an excellent opportunity to maintain ties and effective communication with the establishment, particularly caseworkers. These events had progressed since the previous inspection, with themed presentations delivered to families, for example from the conflict resolution team and 'most valuable player' (a non-accredited intervention designed to address the offending behaviour of children within the criminal justice system). Consideration was being given to involving the education department in themed presentations and integrating family days with a parents' evening.
- 4.4 A family therapist had been appointed. This was a promising initiative and, during the previous six months, 87 sessions had been delivered to 15 children and their families. The service offered family and systemic therapy sessions and worked with the establishment to improve understanding of the impact of family relationships. It was excellent practice to see that these therapy sessions were not perceived as a privilege for good behaviour nor a punitive sanction, for example a visitor banned from a visit was not banned from therapy sessions.
- 4.5 The establishment had identified five children known to be fathers, but there was still no provision to support and prepare young fathers in custody for their parenting role. The establishment was in the process of arranging an antenatal class for young fathers.

#### Recommendation

- 4.6 **Appropriate resource should be allocated to ensure swift security clearance of the contact numbers of children's family members.**

## Good practice

- 4.7** *The appointment of a family therapist to deliver family and systemic therapy helped to support and maintain family ties for children in custody. Access to family therapy provided children with an opportunity to rebuild and maintain relationships while in custody.*

## Pre-release and resettlement

### Expected outcomes:

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

- 4.8** A co-ordinated, whole-prison approach to resettlement was still lacking. The management of pre-release and resettlement work had drifted since the previous inspection and there had been no significant improvements. The establishment used the needs analysis from 2018 which addressed all the relevant resettlement pathways adequately.
- 4.9** The monthly resettlement meeting did not discuss each pathway in enough detail, which was disappointing. Only three meetings had taken place in the last six months and attendance by some departments remained poor. The action plan was limited and generic and did not adequately address all children's resettlement needs. An example of this was transitions for over 18-year olds to the adult estate which was discussed frequently at resettlement meetings as a problem, but no recorded action was taken to address the issue (see paragraph 4.16 and key concern and recommendation S56).
- 4.10** The casework team consisted of operational and non-operational caseworkers and was well resourced. Caseworkers held manageable caseloads of about 15 children, fewer than at the previous inspection. Caseworkers were keen to help children progress, but they lacked the necessary training and supervision from managers to be fully effective. Contact between children and caseworkers was variable. Some engagement with children still took place through cell doors which prevented caseworkers from ensuring consistently meaningful contact, focused on rehabilitation and resettlement. Some contacts were made on the telephone.
- 4.11** There was little oversight of these contacts and some children told us of difficulty in contacting their caseworker. One child had made repeated requests by email to contact his caseworker, who was on extended leave with nobody monitoring his messages.
- 4.12** At the time of our inspection, 15 children lived on the Cedar unit (the resettlement unit), five of whom were undertaking release on temporary licence (ROTL). The regime for children on the Cedar unit was good and the environment was relaxed. Most children we spoke to were positive about being on the unit and having more time out of their cells.
- 4.13** ROTL risk assessments were not sufficiently robust. Detailed contributions from community and internal agencies were discussed at the ROTL board, but risk management was largely discussed in the context of custody rather than the child's potential risk of harm in the community. There was no formal risk assessment to analyse potential risk in the community while children were on ROTL.
- 4.14** Children's access to purposeful ROTL for resettlement purposes was more frequent than we usually see. During the previous six months, 39% of ROTL had involved education or

training in the community. Over the same period, 466 instances of ROTL had been used by 21 children, an improvement since the previous inspection. At the time of our inspection, one child was doing a work experience placement with Timpson's and another was regularly attending college.

- 4.15** Home detention curfew (HDC) and early release processes were managed well. In the last six months, 12 children had been deemed eligible for HDC, five of whom were considered unsuitable due to the nature of their offence. Seven children had been approved and all but one was released within three days of their HDC eligibility date. Over the previous six months, 46% of eligible children had been granted early release.
- 4.16** Work to manage transitions for 18-year olds to adult prisons required improvement. Adequate planning was not always in place early enough to enable a thorough transition process and the support provided by adult prisons was inconsistent. Some establishments continually refused to accept some young adults, which resulted in long delays, and escalation processes were ineffective. At the time of our inspection, six 18-year olds were awaiting transition to the adult estate, one of whom had been waiting seven months for an appropriate placement. This delay was having a negative impact on outcomes for children at Cookham Wood (see key concern and recommendation S56).
- 4.17** The casework department had recently started to contact community agencies to monitor outcomes for children on release. However, meaningful data were not yet available.

## Recommendation

- 4.18** **Managers should ensure that ROTL risk assessments are comprehensive, taking full account of potential risk in the community.**

## Training planning and remand management

### Expected outcomes:

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

- 4.19** The casework department worked in isolation and was not sufficiently integrated across the prison. Training and remand plans for children were not coordinated into one plan and we found that different departments held different plans for children. In one case that we reviewed, there were two copies of the same child's plan and the copy held in education had different objectives. Targets in training and remand plans were not written in child-focused language and children we spoke to did not always understand their plans or the meetings they attended or how to progress (see key concern and recommendation S57).
- 4.20** Initial sentence planning meetings did not always take place within the first 10 days of arrival in custody. These delays rendered resettlement planning inadequate for children with short sentences. Youth offending team (YOT) staff attended most sentence and remand meetings, but joint working between caseworkers and YOT workers lacked challenge and did not ensure sufficiently good outcomes for children leaving custody. Meetings that we observed for children on remand were poorly structured and not all

were attended by a social worker. When planning meetings were combined with looked-after child reviews, resettlement needs were not a priority.

- 4.21** We remained concerned that some resettlement plans lacked sufficient consideration of the management of risk of serious harm in the community which was compounded by inadequate communication with the YOT. Escalation and quality assurance processes were not always effective and we found examples of problems persisting with no resolution at a sufficiently senior level. In one case that we reviewed, a child with high risk of harm and safety and wellbeing needs was due to be released imminently to a new location out of the area.
- 4.22** In our survey, only 50% of children said that they had a training plan, against the comparator of 65%.
- 4.23** Case records remained inconsistent and there was still little use of the Youth Justice Application Framework to inform the planning process or to record planning meetings. Sentence plans were rarely uploaded to the system and limited information was available to community agencies before a child's release date.
- 4.24** The quality of plans varied and not all were focused on resettlement. The targets in plans that we looked at prioritised the custodial element of the child's sentence and focused on behaviour management rather than resettlement planning. When we spoke to case workers, it was evident that they had often given more consideration to resettlement needs than was indicated in the plans which did not always reflect the work done with children.
- 4.25** Some children did not have their licence conditions explained to them in sufficient time before release, which was inappropriate. In some cases, where there were difficulties in contacting the YOT or finding accommodation, licence conditions could not always be agreed in adequate time. Children whom we spoke to were frustrated about this lack of information before release.

## Public protection

- 4.26** The monthly interdepartmental risk management team (IDRMT) meeting remained poorly attended by some departments and minutes did not indicate sufficient oversight of work to reduce risk before release. A member of the casework team contacted the relevant YOT in an attempt to confirm MAPPAs (multi-agency public protection arrangements) levels for children before release. Children who were within two months of their release date with confirmation of MAPPAs levels still outstanding were discussed at the IDRMT meeting. Despite this, at the time of our inspection four children were within two months of release and still did not have confirmed MAPPAs levels. There was no escalation process to address these problems with the potential for some very high-risk children to be released from Cookham Wood without confirmed MAPPAs levels. This created a potential risk to the public (see key concern and recommendation S58).
- 4.27** Mail monitoring and child contact restriction processes were proportionate.
- 4.28** The MAPPAs-F forms that we reviewed were adequate, but most contained unwieldy information copied from other assessments rather than a succinct analysis of risk.

## Indeterminate and long-sentenced children

- 4.29** A significant number of children were facing a very long time in custody. At the time of our inspection, nine children were serving life sentences and the longest tariff was 21 years. Thirty-one children were on remand or were sentenced for murder or attempted murder.
- 4.30** Support for these children was improving. The health and wellbeing team had started an outcome measured, weekly meeting to discuss issues of relevance to them such as worries about moving to the adult estate, guilt and remorse, and how to manage romantic relationships while in custody. At the time of our inspection, eight children were using this service and the children we spoke to were positive about the support they received.

## Looked-after children

- 4.31** In our survey, 43% of children who had been in the care of the local authority said they received a visit once a week from family or friends. At the time of our inspection, three-quarters of the children had involvement with children's social care and 19 children were subject to a full care order.
- 4.32** There was a process to identify children on arrival who were entitled to support. A team of three social workers reminded local authorities of their statutory responsibilities to support children in custody. Social workers challenged local authorities where necessary but, despite this, it was disappointing that most of the outcomes for these children were inadequate and some still did not receive their full entitlements.
- 4.33** The social workers also screened for referrals to the national referral mechanism (NRM) and encouraged local authorities to refer children. In the last six months, 23% of children entering Cookham Wood had been referred to the NRM. Four children had had a positive outcome from the Home Office and were subsequently identified as victims compelled to commit the offence as a result of exploitation.

## Reintegration planning

### Expected outcomes:

**Children's resettlement needs are addressed prior to release. An effective multi-agency response is used to meet the specific needs of each individual child to maximise the likelihood of successful reintegration into the community.**

- 4.34** Over the last six months, an average of 24 children had left the establishment each month. In our survey, 23% of children said that someone was helping them to prepare for release against the comparator of 38%.
- 4.35** Accommodation was usually discussed when a child arrived at the establishment, but the availability of suitable accommodation for children in sufficient time before release remained a serious concern. In the previous six months, four children had been released to bed and breakfast or hostel accommodation, which was unacceptable. It was also unacceptable that some children did not know where they would be living in the community at their final review meeting before release. This prevented meaningful reintegration planning. To track the frequency of the problem, the prison had recently started to record this information more consistently, but this was yet to have an impact on practice.

## Recommendation

- 4.36 Children leaving custody should be provided with suitable accommodation in time for other elements of release planning to be completed.** (Repeated recommendation 4.37)

## Interventions

### Expected outcomes:

**Children can access interventions designed to promote successful rehabilitation.**

- 4.37** Work on finance, benefits and debt remained the same as at the previous inspection. All children had the opportunity to contact the Department for Work and Pensions for advice and a Jobcentre Plus worker visited once every six weeks to help children obtain their National Insurance numbers and apply for Universal Credit. If needed, children were given support to open bank accounts at Barclays bank.
- 4.38** The establishment was able to deliver a reasonable range of accredited offending behaviour programmes. However, staff shortfalls had led to long waits. At the time of our inspection, 42 children were on the waiting list, with the longest wait of more than a year. This meant that some children were released without having an identified offending behaviour need met.
- 4.39** Despite managers arranging awareness raising sessions, some residential staff did not have a good understanding of the interventions which limited their ability to reinforce learning with children.
- 4.40** There was good support for children presenting with sexually harmful behaviours and the increased use of family therapy to support resettlement was promising (see paragraph 4.4). Some of this good work was not evident in case records on the Youth Justice Application Framework which meant that YOTs and community partners would be unable to identify the work undertaken in custody. This presented difficulties in consolidating and following up learning after release.

## Recommendation

- 4.41 Managers should ensure that children are able to access the appropriate interventions before release to promote successful rehabilitation.**

## Health, social care and substance misuse

- 4.42** Health care planning before release included information on community sexual health clinics, GPs and dentist.
- 4.43** Pre-release arrangements for substance misuse were effective. The team liaised with YOT teams, Open Road community substance misuse teams and other community substance teams before release.

## Section 5. Summary of recommendations and good practice

The following is a listing of repeated and new key concerns and recommendations, general recommendations and examples of good practice included in this report. The reference numbers at the end of each refer to the paragraph location in the main report, and in the previous report where recommendations have been repeated.

Key concerns and recommendations		Directed to:
S45	<p>Concern: Too much low-level poor behaviour went unchallenged by staff. Examples included play fighting and covering door observation panels. Information about acceptable and unacceptable behaviour was included in the induction information given to children but not adhered to by them or enforced by staff. This risked the development of a culture in which it was seen by children as permissible to ignore rules and push boundaries.</p> <p><b>Recommendation: Clear and consistent standards and expectations of behaviour should be set and communicated to children. Poor behaviour by children should be challenged by staff.</b></p>	<b>The Governor</b>
S46	<p>Concern: The number of violent incidents remained too high and the need to keep children apart from each other had a negative impact on their regime. Staffing shortages and redeployment of specialist conflict resolution staff to support the regime compounded the problem. Violence was less prevalent on B3 and Cedar units, but this was not being used to inform the approach to violence reduction across the establishment.</p> <p><b>Recommendation: Managers should ensure that conflict resolution work is prioritised to reduce levels of violence at Cookham Wood.</b></p>	<b>The Governor</b>
S47	<p>Concern: The lack of a full complement of staff in minimising and managing physical restraint (MMPR) had resulted in a significant backlog of paperwork, inadequate quality assurance and a reduction in staff training. It was unclear if all staff using MMPR techniques were competent to do so or that child safeguarding issues were always identified.</p> <p><b>Recommendation: Oversight of use of force should ensure that staff using MMPR are trained to do so and all safeguarding concerns are identified.</b></p>	<b>The Governor</b>
S48	<p>Concern: Despite in principle having different purposes, Phoenix and Bridge units each held children who were separated on rule 49, some for lengthy periods. In practice there was no clear reason why a child would be placed on one unit rather than the other or remain on normal location while on rule 49. The regimes and contributions by other agencies were similarly poor on both units and some children alternated between the two without appearing to make much progress.</p>	<b>The Governor</b>

	<b>Recommendation: Children separated on rule 49 should have their needs identified and met.</b>	
S49	<p>Concern: Positive relationships between staff and children were stifled by the poor regime and limited time out of cell. Staff were unable to spend sufficient time with children to develop meaningful and effective relationships.</p> <p><b>Recommendation: Staff should have the time to develop meaningful relationships with the children in their care.</b></p>	<b>The Governor</b>
S50	<p>Concern: Maintenance and general repairs took too long to resolve and caused significant problems such as the inability to use the sensory room or the two-group rooms on the Bridge landing. The prison was generally quite grubby and the offensive graffiti rendered the overall environment unpleasant.</p> <p><b>Recommendation: The establishment should be well maintained, clean and graffiti free.</b></p>	<b>The Governor</b>
S51	<p>Concern: The oversight of equality work was weak and no resource was dedicated to equality issues. The Public Sector Equality Duty requires public bodies to consider how their policies or decisions affect people who are protected under the Equality Act. We found managers were not meeting this duty, there was no equalities monitoring to identify differences in access to the regime or services, consultation did not take place and equality action team meetings lacked purpose and did not address key deficiencies in provision effectively.</p> <p><b>Recommendation: Managers should ensure that the diverse needs and entitlements of children are met.</b></p>	<b>The Governor</b>
S52	<p>Concern: Time out of cell was too limited at about five hours on weekdays and two hours on Saturday and Sunday, with significantly less for keep-apart children who did not have daily exercise. Regime restrictions and controlled movement affected the time available to children for education and exercise and attendance at health appointments and worship.</p> <p><b>Recommendation: The issues of controlled movement in small groups around the prison should be resolved to ensure that all children receive their entitlements and time out of cell is increased to 10 hours a day.</b></p>	<b>The Governor</b>
S53	<p>Concern: Senior leaders had not ensured that children's movement to education and skills sessions improved. The very great majority arrived late or very late for their scheduled sessions and were not ready to learn.</p> <p><b>Recommendation: Senior leaders should implement a new system so that children arrive on time for learning and skills sessions, are ready to learn and receive at least their minimum statutory entitlement to learning.</b></p>	<b>The Governor</b>



S54	<p>Concern: Children’s behaviour in non-vocational sessions was frequently poor, with a minority causing violence or disturbance to lessons and others’ learning. Senior leaders’ initiatives to reduce violence were at an early stage.</p> <p><b>Recommendation: Senior leaders should eliminate poor behaviour in non-vocational sessions so that violence or disturbance to lessons ceases. They should deal effectively with the culture of violence and antagonism in the prison.</b></p>	<b>The Governor</b>
S55	<p>Concern: It was still the case that, on average, just under half of all children who started an accredited course in any subject completed it and gained the qualification. In functional skills only about a third completed and achieved the qualification.</p> <p><b>Recommendation: Senior leaders should find out why so few children gain their target qualification in any subject and take decisive actions to ensure that all children’s attainment improves substantially.</b></p>	<b>The Governor</b>
S56	<p>Concern: A significant number of 18-year olds at Cookham Wood required a placement in the adult estate, some of whom had waited long periods. Some adult establishments refused to accept some 18-year olds, which was inappropriate. These delays in sourcing a placement prevented sentence progression and had a negative impact on outcomes for children at Cookham Wood. The process in place to escalate concerns about transitions to the adult estate was ineffective and did not ensure timely transitions.</p> <p><b>Recommendation: All 18-year olds held in children’s establishments should be able to transition to the adult estate in a safe and timely manner.</b></p>	<b>The Governor</b>
S57	<p>Concern: The casework department was not well integrated across the prison. Some initial planning meetings were not timely and some records were inconsistent. Poor use was made of information recording systems to share progress with youth offending teams and community partners. Training and remand plans were not always central to children’s progression and targets did not always focus on resettlement. Caseworkers lacked the necessary training and supervision to be fully effective in their roles. Some resettlement work that had been completed with children was not always shared with other departments in the prison to ensure a coordinated approach before release.</p> <p><b>Recommendation: The casework department should deliver a coordinated approach to resettlement to meet children’s needs before release.</b></p>	<b>The Governor</b>
S58	<p>Concern: Public protection arrangements were still not sufficiently robust and the interdepartmental risk management team meeting did not function well. There was inadequate oversight of high-risk cases, and some children had outstanding MAPPA levels that required confirmation before release. There was no escalation process to manage this. Some resettlement plans lacked detail on the management of serious risk of</p>	<b>The Governor</b>

	harm in the community, and ROTL risk assessments required improvement.  <b>Recommendation: Risk management and public protection processes should ensure safe release planning for children leaving custody.</b>	
<b>General recommendations</b>		<b>Directed to:</b>
1.6	Children should have an induction that keeps them fully occupied and provides them with all they need to know about life at Cookham Wood.	<b>The Governor</b>
1.29	Good behaviour should be incentivised regardless of the child's location.	<b>The Governor</b>
1.55	Separated children should receive a regime that is equivalent to their non-separated peers.	<b>The Governor</b>
2.16	All areas of the prison should be consistently cleaned and all graffiti removed.	<b>The Governor</b>
2.17	Delays in answering cell bells should be investigated and monitored to ensure that all cell bells are answered within five minutes.	<b>The Governor</b>
2.52	Emergency response arrangements should be improved and ambulances called without delay when necessary.	<b>The Governor</b>
2.53	A memorandum of understanding should be developed with the local authority and social care provider to ensure that arrangements are in place if a child requires social care.	<b>The Governor</b>
2.71	The transfer of patients to community mental health services under the Mental Health Act should occur within the national guideline timescale.	<b>The Governor</b>
2.83	The oversight of medicines management should be strengthened by improved attendance at medicines and therapeutics committee meetings and improved audit schedules.	<b>The Governor</b>
3.15	Prison and education leaders should ensure that children's allocation to learning pathways is determined by what best matches their aspirations or previous experience.	<b>The Governor</b>
3.16	Prison and education leaders should ensure that the engagement and resettlement team provides comprehensive support to children during and after their time in the prison.	<b>The Governor</b>
3.17	Prison leaders should review the risk assessment process to establish how more children can take up vocational courses.	<b>The Governor</b>
3.24	Education leaders should maintain their focus on developing the skills of teaching staff, ensuring particularly that all teachers manage instances of poor behaviour or bad language well.	<b>The Governor</b>

3.25	Prison and education leaders should improve the quality of outreach provision and extend the time that children can access it.	<b>The Governor</b>
4.6	Appropriate resource should be allocated to ensure swift security clearance of the contact numbers of children's family members.	<b>The Governor</b>
4.18	Managers should ensure that ROTL risk assessments are comprehensive, taking full account of potential risk in the community.	<b>The Governor</b>
4.36	Children leaving custody should be provided with suitable accommodation in time for other elements of release planning to be completed.	<b>Ministry of Justice and Youth Custody Service</b>
4.41	Managers should ensure that children are able to access the appropriate interventions before release to promote successful rehabilitation.	<b>The Governor</b>
<b>Examples of good practice</b>		
1.56	The introduction of bound books for Rule 49 documentation provided a well organised, coherent record of children's experience of separation.	
4.7	The appointment of a family therapist to deliver family and systemic therapy helped to support and maintain family ties for children in custody. These sessions were not used as a reward for good behaviour nor a sanction for poor conduct.	



## Section 6. Appendices

### Appendix I: Inspection team

Martin Lomas	Deputy chief inspector
Angus Mulready-Jones	Team leader
David Foot	Inspector
Angela Johnson	Inspector
Esra Sari	Inspector
Rebecca Stanbury	Inspector
Nadia Syed	Inspector
Rahul Jalil	Researcher
Chloe Moore	Researcher
Helen Ranns	Researcher
Joe Simmonds	Researcher
Claudia Vince	Researcher
Tania Osborne	Health services inspector
Kathleen Byrne	Care Quality Commission inspector
Andrea Crosby-Joseph	Care Quality Commission inspector
Nick Crombie	Ofsted inspector
Judy Lye-Forster	Ofsted inspector
Mark Freeman	HMI Probation inspector
Fiona Hay	HMI Probation inspector
Yvonne McGuckian	HMI Probation inspector



## Appendix II: Progress on recommendations from the last report

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

### Safety

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

*At the last inspection in 2018, early days work at Cookham Wood was reasonably good. There were weaknesses in the safeguarding referral process. Levels of self-harm were low and there was good care for children in crisis. Levels of violence remained too high. The behaviour management strategy focused appropriately on reward. Management of the perpetrators of violence and support for victims were mostly good. Use of force was high and there were weaknesses in governance. Living conditions in the segregation unit were poor. Children separated on the Bridge unit were locked up for too long, although support and the delivery of interventions on the unit had improved. Outcomes for children were not sufficiently good against this healthy prison test.*

#### Main recommendations

Processes in place to collect and analyse data on violence should be improved to ensure that managers have an accurate picture of safety. Accurate data should be used to inform strategies to reduce violence. (S41)

##### **Not achieved**

Children should not be segregated in the Phoenix unit. Those who need to be separated for their own or others' safety should be accommodated in a positive environment which provides them with a constructive regime and motivates and supports them to address the issues that led them to segregation. (S42)

##### **Not achieved**

#### Recommendations

The escort contractor should ensure that children are offered refreshments and comfort breaks on all long journeys to the establishment. (I.9)

##### **Not achieved**

The escort contractor should ensure that children arrive at the prison before 8pm. (I.10)

##### **Not achieved**

All child protection allegations should be referred to the local authority designated officer within 24 hours. (I.15)

##### **Achieved**

Management of suicide and self-harm should be developed and improved to ensure that managers know where self-harm is taking place and why. (I.24)

##### **Not achieved**

Serious or repeated acts of self-harm should be investigated so that lessons learned could inform the prison safety strategy. (1.25)

**Not achieved**

The segregation unit should not routinely be used for constant supervision. (1.26)

**Achieved**

All cell bells should be responded to within five minutes. (1.27)

**Not achieved**

Procedures controlling movement around the establishment should be kept under regular review to increase children's access to purposeful activity. (1.33)

**Not achieved**

Prison managers should ensure that a child has full access to advocacy support following authorisation of a strip-search. (1.34)

**Not achieved**

Effective quality assurance systems should be in place to ensure that sanctions are applied fairly. (1.43)

**Not achieved**

Management of the police referral system should be improved to ensure that serious offences are expedited quickly and appropriately. (1.44)

**Achieved**

All use of force documents should be completed promptly and comprehensively after incidents have taken place.

**Not achieved**

The restraint minimisation meeting should achieve its stated aims of reviewing all uses of force to improve practice and reduce the need for force to be used on children. (1.61)

**Not achieved**

Alternatives to segregation should be identified to reintegrate children who have been segregated for extensive periods. (1.73)

**Not achieved**

Living conditions in the segregation unit should be improved and cells and communal areas should be kept clean, free of graffiti and well maintained. (1.74, repeated recommendation 1.87)

**Not achieved**

Regimes for children on good order and discipline across the establishment should be improved, with more purposeful activity and time out of cell. (1.75)

**Not achieved**



## Respect

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

*At the last inspection in 2018, relationships between children and staff were good. Communal areas were well maintained. Most cells were adequate but some required refurbishment. A small but significant number of cells contained offensive graffiti. The provision of in-cell showers and telephones was excellent. Food was relatively good but too few children could eat together. General consultation was reasonably good and the youth council was very effective. There were weaknesses in the complaints system. Equality work was still underdeveloped. Faith provision and support from the chaplaincy were good. Child-focused health services were impressive. Outcomes for children were reasonably good against this healthy prison test.*

### Recommendations

All personal officers should meet children weekly and contact should be meaningful and relevant to the child's needs. (2.5)

**Not achieved**

Graffiti should be eliminated from all cells. (2.15)

**Not achieved**

All toilets should have seats with lids and should be cleaned and descaled. (2.16)

**Not achieved**

All children should be able to wear and wash their own clothes. (2.17)

**Not achieved**

All meals should be issued at the servery and eaten in association. (2.20, repeated recommendation 2.97)

**Not achieved**

Children should be able to make and receive a shop order within 24 hours of arrival. (2.21)

**Not achieved**

Children should be able to make a complaint without asking officers. (2.26)

**Not achieved**

All complaints should be thoroughly investigated and quality assurance procedures should ensure that replies to complaints address all the issues raised. (2.27, repeated recommendation 2.37)

**Not achieved**

The governor should ensure that there is regular consultation and consistent, effective promotion of equality and diversity to develop understanding, encourage tolerance and embrace difference. (2.33)

**Not achieved**

A local equality strategy should identify the needs of children with protected characteristics and set out how those needs will be met. (2.34)

**Not achieved**

The equality officer and child equality representatives should be clear about their role and how they can contribute to the equality agenda. (2.35)

**Not achieved**

Residential staff should be able to identify children in their care with a disability and understand the impact of the disability on the child. Reasonable adjustments should be made to meet the child's needs. (2.46)

**Not achieved**

Residential staff should know which children on their unit are subject to a personal emergency evacuation plan and understand what they are required to do for the child should there be an evacuation. (2.47)

**Not achieved**

Patients' access to health care should not be curtailed by prison issues and they should arrive promptly for consultations and therapy. (2.63)

**Not achieved**

All automated external defibrillators should be in good working order with a clear audit trail to ensure they are regularly checked and maintained. (2.64)

**Achieved**

## Purposeful activity

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

*At the last inspection in 2018, time out of cell was insufficient for too many children. Library and gym facilities were good but access was sometimes restricted. There were enough education places to meet the needs of the population and the range of provision was good. However, managers had failed to identify and address weaknesses in the provision overall. Attendance at education was still not adequate. Too many children did not complete functional skills courses. The quality of teaching and assessment required improvement. Behaviour in vocational training courses was good. Most of those who completed their courses achieved a qualification. Outreach work was effective but did not meet the demand across the establishment. Outcomes for children were not sufficiently good against this healthy prison test.*

### Main recommendations

Children should be able to access 10 hours out of their cell each day. (S43, repeated (as two separate recommendations) main recommendation S42)

**Not achieved**

The regime should be predictable to enable children to use punctually the services designed to support their wellbeing and help to reduce their risk of reoffending. (S43, repeated (as two separate recommendations) main recommendation S42)

**Not achieved**

Prison managers, in conjunction with the psychology team, should consult children to learn more about their propensity to fight and to understand why the 'rules of the game' change when they move to Cedar or the enhanced units. Learning from this consultation should form the basis of a review to significantly reduce the number of keep-apart protocols in place so that more children can access a full regime and receive important interventions. (S44)

**Not achieved**

Senior prison leaders should ensure that all children attend education. Movement times should further improve to ensure children's punctuality at activities. Working with education managers, senior prison leaders should be more challenging in their monitoring of education performance so that weaknesses are rectified at an early stage. (S45)

**Partially achieved**

## Recommendations

The number of PE staff should be increased to ensure that children have appropriate access to the gym. (3.10)

**Not achieved**

The number of PE staff should be increased to enable planned accredited courses and opportunities for ROTL to be provided. (3.11)

**Not achieved**

Managers should improve links between the resettlement and engagement team and the prison so that children receive appropriate support once released. (3.22)

**Not achieved**

Education managers should ensure that all teachers are competent in classroom management techniques. (3.31)

**Achieved**

Teachers should routinely draw on the information held about children's individual needs to plan their teaching. (3.32)

**Achieved**

Prison and education managers should ensure that all children are able to access practical life skills training to support their resettlement before release. (3.39)

**Achieved**

Education staff should review short-course provision, especially in functional skills, to tackle very high rates of non-completion of courses. (3.45)

**Not achieved**

## Resettlement

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

*At the last inspection in 2018, work to support children and families was reasonably good. The establishment now had an up-to-date needs analysis but there was a lack of strategic direction in resettlement work. Casework lacked resettlement focus and work between departments was not well integrated. Cedar unit was effective in helping children who were preparing for release. Home detention curfew, release on temporary licence and early release were all used well. Sentence plans were not always focused on risk. Contact with caseworkers was frequent but records of meetings were poor. There were weaknesses in the management of public protection. The range of interventions available had improved. The lack of suitable accommodation on release was a serious concern for some children. Outcomes for children were not sufficiently good against this healthy prison test against this healthy prison test.*

### Main recommendation

The work of the casework team should be clearly defined and given priority. Remand and training plans should be central to a child's progression and their targets should address identified risks of offending. Caseworkers should coordinate the work of all relevant departments to support children to achieve their targets. Progress should be recorded on a central IT platform to ensure that information is communicated effectively in custody and on release. (S46)

**Not achieved**

### Recommendations

Young fathers should be encouraged to participate in the fathers in prison and healthy relationships course in an effort to break the cycle of intergenerational offending. (4.7)

**Not achieved**

The role of the interdepartmental risk management board should be reviewed to ensure that it is a forum which consistently identifies and manages risk. (4.23, Repeated recommendation 4.15)

**Not achieved**

Children's progress after release should be followed up as a measure of the effectiveness of resettlement work across the YCS and the findings used to inform future provision at local and national level. (4.15)

**Not achieved**

Children leaving custody should be provided with suitable accommodation in time for other elements of release planning to be completed. (4.36)

**Not achieved** (recommendation repeated, 4.35)

Children's learning from participation in programmes to address their offending behaviour should be reinforced by staff across the establishment. (4.38)

**Not achieved**

## Appendix III: Establishment population profile

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

### Population breakdown by:

Status	Number of young people	%
Sentenced	99	57.9%
Recall	3	1.8%
Convicted unsentenced	0	0.0%
Remand	46	26.9%
Detainees	0	0.0%
Other	23	13.5%
<b>Total</b>	<b>171</b>	<b>100%</b>

Age	Number of young people	%
15 years	8	4.7%
16 years	47	27.5%
17 years	96	56.1%
18 years	20	11.7%
Other	0	0.0%
<b>Total</b>	<b>171</b>	<b>100.0%</b>

Nationality	Number of young people	%
British	149	87.1%
Foreign nationals	19	11.1%
Non stated	3	1.8%
<b>Total</b>	<b>171</b>	<b>100.0%</b>

Ethnicity	Number of young people	%
White		
British	46	26.9%
Irish	2	1.2%
Gypsy/Irish Traveller	0	0.0%
Other white	11	6.4%
Mixed		
White and black Caribbean	5	2.9%
White and black African	2	1.2%
White and Asian	0	0.0%
Other mixed	8	4.7%
Asian or Asian British		
Indian	0	0.0%
Pakistani	4	2.3%
Bangladeshi	4	2.3%
Chinese	0	0.0%
Other Asian	2	1.2%
Black or black British		
Caribbean	29	17.0%
African	24	14.0%
Other black	21	12.3%

Other ethnic group		
Arab	0	0.0%
Other ethnic group	3	1.8%
Not stated / code missing	1	0.6%
<b>Total</b>	<b>171</b>	<b>100.0%</b>

<b>Religion</b>	<b>Number of young people</b>	<b>%</b>
Baptist	1	0.6%
Church of England	7	4.1%
Roman Catholic	36	21.1%
Other Christian denominations	42	24.6%
Muslim	38	22.2%
Sikh	0	0.0%
Hindu	0	0.0%
Buddhist	0	0.0%
Jewish	0	0.0%
Other	0	0.0%
No religion	45	26.3%
Not Stated	0	1.2%
<b>Total</b>	<b>171</b>	<b>100%</b>

<b>Other demographics</b>	<b>Number of young people</b>	<b>%</b>
Gypsy/Romany/Traveller	0	0.0%
<b>Total</b>	<b>0</b>	<b>0%</b>

#### Sentenced only – length of stay by age

<b>Length of stay</b>	<1 mth	1–3 mths	3–6 mths	6–12 mths	1–2 yrs	2 yrs +	4 yrs +	<b>Total</b>
<b>Age</b>								
15 years	0	1	3	0	0	0		3.6%
16 years	4	7	3	7	3	0		21.8%
17 years	11	15	9	15	13	1		58.2%
18 years	1	3	2	6	6	0		16.4%
<b>Total</b>	<b>16</b>	<b>26</b>	<b>17</b>	<b>28</b>	<b>22</b>	<b>1</b>		<b>100%</b>

#### Unsentenced only – length of stay by age

<b>Length of stay</b>	<1 mth	1–3 mths	3–6 mths	6–12 mths	1–2 yrs	2 yrs+	4 yrs +	<b>Total</b>
<b>Age</b>								
15 years	4	0	0	0	0	0		6.6%
16 years	17	3	2	1	0	0		37.7%
17 years	13	11	5	3	0	0		52.5%
18 years	0	0	1	0	1	0		3.3%
<b>Total</b>	<b>34</b>	<b>14</b>	<b>8</b>	<b>4</b>	<b>1</b>	<b>0</b>		<b>100.0%</b>

Main offence	Number of young people	%
Violence against the person	78	45.61
Sexual offences	3	1.75
Burglary	9	5.26
Robbery	25	14.61
Theft and handling	2	1.17
Fraud and forgery	0	0
Drugs offences	10	5.84
Other offences	44	25.76
Offence not recorded / holding warrant	0	0
<b>Total</b>	<b>171</b>	<b>100</b>

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

Sentence	4 mths	6 mths	8 mths	10 mths	12 mths	18 mths	24 mths	Recall	Total
<b>Age</b>									
15 years	0	0	0	0	0	0	1		2.6%
16 years	1	0	0	2	5	2	4		35.9%
17 years	3	0	3	3	7	4	3		59.0%
18 years	0	0	0	0	0	0	1		2.6%
<b>Total</b>	<b>4</b>	<b>0</b>	<b>3</b>	<b>5</b>	<b>12</b>	<b>6</b>	<b>9</b>		<b>100.0%</b>

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

Sentence	Under 2 yrs	2–3 yrs	3–4 yrs	4–5 yrs	5 yrs +	Recall	Total
<b>Age</b>							
15 years	0	0	2	0	0	0	2
16 years	0	0	0	1	0	0	1
17 years	0	4	3	3	10	1	21
18 years	0	0	0	2	1	0	3
<b>Total</b>	<b>0</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>11</b>	<b>1</b>	<b>27</b>

#### Number of indeterminate sentences under Section 226b (extended determinate sentence) by age and length of tariff

Sentence	Under 2 yrs	2–5 yrs	5–10 yrs	10–15 yrs	15–20 yrs	Recall	Total
<b>Age</b>							
15 years	0	0	2	0	0	0	2
16 years	0	1	2	1	0	0	4
17 years	0	0	2	0	0	0	2
18 years	0	0	1	0	1	0	2
<b>Total</b>	<b>0</b>	<b>1</b>	<b>7</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>10</b>

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

<b>Sentence</b>	<b>Under 2 yrs</b>	<b>2–5 yrs</b>	<b>5–10 yrs</b>	<b>10–15 yrs</b>	<b>15–20 yrs</b>	<b>20 yrs +</b>	<b>Total</b>
<b>Age</b>							
15 years	0	0	0	0	0	0	0
16 years	0	0	0	0	0	0	0
17 years	0	0	0	4	1	2	7
18 years	0	0	0	0	2	0	2
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>9</b>



## Appendix IV: Photographs



Separation unit shower



A2 dirty landing



Dirty shower area

## Appendix V: Summary of questionnaires and interviews

### Children’s survey methodology

A confidential survey of children is carried out at the start of every inspection. A self-completion questionnaire is offered to every child resident in the establishment on the day of the survey. The questionnaire consists of structured questions covering the child’s ‘journey’ from admission to release together with demographic and background questions which enable us to compare responses from different sub-groups (numbers permitting). There are also a few open questions which provide opportunities for children to express in their own words what they find most positive and negative about the establishment.

The survey results are used in inspections, where they are triangulated with inspectors’ observations, discussions with children and staff and documentation held in the establishment. More detail can be found in the inspection report.

The current questionnaire has been in use since October 2018 and is being used to support inspections of both STCs and YOIs holding children. The questionnaire was developed in consultation with HMIP and Ofsted inspectors. Draft questions were tested with children in both types of establishment and their input and feedback was invaluable in improving the relevance and accessibility of questions.

### Distribution and collection of questionnaires

HMIP researchers distribute and collect the questionnaires in person. So that children can give their informed consent<sup>21</sup> to participate, the purpose of the survey and the inspection is explained. We make clear that the questionnaire can also be administered via a face-to-face interview for those who have literacy difficulties and via a telephone interpreting service for those with limited English.

Children are made aware that participation in the survey is voluntary. We also explain that, while they do not need to put their name on the questionnaire, individual respondents can be identified via a numbering system which is only accessible to the inspection team. This is so that any child protection and safeguarding concerns can be followed up (see section below for further information).

Children who agree to participate in the survey are provided with a sealable envelope for their completed questionnaire, which will later be collected by researchers.

### Child protection and safeguarding

All completed questionnaires are checked by researchers for potential child protection and safeguarding issues on the day of the survey. Any concerns are followed up by inspectors and passed on to establishment staff if necessary.

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<sup>21</sup> For further information about the ethical principles which underpin our survey methodology, please see ‘Ethical principles for research activities’ which can be downloaded from HMIP’s website <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

## Survey results

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### Response rate

At the time of the survey on 9 September 2019 the population at HMYOI Cookham Wood was 157. Using the approach described above, questionnaires were distributed to 152 children.<sup>22</sup>

We received a total of 121 completed questionnaires, a response rate of 80%. Fourteen young people declined to participate in the survey and 17 questionnaires were not returned.

### Survey results and analyses

Over the following pages we present the survey results for HMYOI Cookham Wood.

First a full breakdown of responses is provided for each question. Percentages have been rounded and therefore may not add up to 100%.

We also present the following comparative analyses:

- The current survey responses from HMYOI Cookham Wood 2019 compared with responses from other YOIs holding children. The comparator surveys were carried out in five YOIs since October 2018.
- The current survey responses from HMYOI Cookham Wood 2019 compared with the responses of children surveyed at HMYOI Cookham Wood 2018.
- The current survey responses from HMYOI Cookham Wood 2019 compared with responses from other establishments holding children. The comparator surveys were carried out in three STCs and five YOIs since October 2018.
- A comparison within the 2019 survey between the responses of children on the induction unit (A3 wing) compared with those from the rest of the establishment.
- A comparison within the 2019 survey between the responses of children on the enhanced wing (B3 wing) and resettlement wing (C wing) compared with those from the rest of the establishment.
- A comparison within the 2019 survey between the responses of children from black and minority ethnic groups and white children.
- A comparison within the 2019 survey between the responses of Muslim children and non-Muslim children.
- A comparison within the 2019 survey between the responses of children who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2019 survey between the responses of children who reported that they had been in local authority care and those who said they had not.

In all the comparative analyses above, statistically significant<sup>23</sup> differences are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in children's background details.

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

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<sup>22</sup> Questionnaires were not distributed to five children who were at court on the day of the survey.

<sup>23</sup> A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. In order to appropriately adjust p-values in light of multiple testing,  $p < 0.01$  was considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

## Survey summary

### Background information

<b>Q1.1</b>	<b>What wing, unit or houseblock do you live on?</b>						
	A1 wing.....						18 (15%)
	A2 wing.....						20 (17%)
	A3 wing.....						18 (15%)
	B1 wing.....						12 (10%)
	B2 wing.....						17 (14%)
	B3 wing.....						23 (19%)
	C wing.....						11 (9%)
	Segregation unit.....						2 (2%)
<b>Q1.2</b>	<b>How old are you?</b>						
	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>	<b>18 or over</b>
	0 (0%)	1 (1%)	0 (0%)	5 (4%)	29 (24%)	62 (52%)	22 (18%)
<b>Q1.3</b>	<b>What is your gender?</b>						
	Male.....						117 (100%)
	Female.....						0 (0%)
<b>Q1.4</b>	<b>What is your ethnic group?</b>						
	White - English/ Welsh/ Scottish/ Northern Irish/ British.....						32 (27%)
	White - Irish.....						1 (1%)
	White - Gypsy or Irish Traveller.....						4 (3%)
	White - any other White background.....						3 (3%)
	Mixed - White and Black Caribbean.....						8 (7%)
	Mixed - White and Black African.....						1 (1%)
	Mixed - White and Asian.....						1 (1%)
	Mixed - any other Mixed ethnic background.....						0 (0%)
	Asian/ Asian British - Indian.....						0 (0%)
	Asian/ Asian British - Pakistani.....						4 (3%)
	Asian/ Asian British - Bangladeshi.....						2 (2%)
	Asian/ Asian British - Chinese.....						1 (1%)
	Asian - any other Asian background.....						3 (3%)
	Black/ Black British - Caribbean.....						31 (26%)
	Black/ Black British - African.....						18 (15%)
	Black - any other Black/ African/ Caribbean background.....						7 (6%)
	Arab.....						0 (0%)
	Any other ethnic group.....						4 (3%)
<b>Q1.5</b>	<b>Do you have any children?</b>						
	Yes.....						5 (4%)
	No.....						111 (96%)
<b>Q1.6</b>	<b>Are you from a traveller community (e.g. Gypsy, Roma, Irish Traveller)?</b>						
	Yes.....						6 (5%)
	No.....						111 (95%)
<b>Q1.7</b>	<b>Have you ever been in local authority care (e.g. lived with foster parents or in a children's home, or had a social worker)?</b>						
	Yes.....						63 (53%)
	No.....						56 (47%)

**Arrival and induction**

<b>Q2.1</b>	<b>When you were searched in reception/admissions, was this done in a respectful way?</b>	
	Yes .....	74 (63%)
	No.....	9 (8%)
	Don't remember .....	28 (24%)
	I wasn't searched.....	7 (6%)
<b>Q2.2</b>	<b>Overall, how were you treated in reception/admissions?</b>	
	Well.....	80 (67%)
	Badly.....	14 (12%)
	Don't remember .....	25 (21%)
<b>Q2.3</b>	<b>When you first arrived here did staff help you with any problems or worries you had?</b>	
	Yes .....	35 (30%)
	No.....	40 (34%)
	Don't remember .....	14 (12%)
	I didn't have any problems or worries.....	28 (24%)
<b>Q2.4</b>	<b>Did you feel safe on your first night here?</b>	
	Yes .....	83 (70%)
	No.....	28 (24%)
	Don't remember .....	8 (7%)
<b>Q2.5</b>	<b>In your first few days were you told everything you needed to know about life here?</b>	
	Yes .....	50 (42%)
	No.....	70 (58%)

**Living conditions**

<b>Q3.1</b>	<b>How comfortable is the temperature of your cell?</b>	
	Too cold.....	36 (35%)
	About right .....	50 (49%)
	Too hot .....	17 (17%)
<b>Q3.2</b>	<b>Can you shower every day?</b>	
	Yes .....	110 (93%)
	No.....	7 (6%)
	Don't know.....	1 (1%)
<b>Q3.3</b>	<b>Do you normally have enough clean, suitable clothes for the week?</b>	
	Yes .....	80 (68%)
	No.....	38 (32%)
	Don't know.....	0 (0%)
<b>Q3.4</b>	<b>Do you have clean sheets every week?</b>	
	Yes .....	93 (78%)
	No.....	23 (19%)
	Don't know.....	3 (3%)
<b>Q3.5</b>	<b>Can you get your stored property if you need it?</b>	
	Yes .....	44 (37%)
	No.....	37 (31%)
	Don't know.....	38 (32%)
<b>Q3.6</b>	<b>Is it normally quiet enough for you to relax or sleep at night?</b>	
	Yes .....	38 (34%)

No..... 69 (61%)  
 Don't know..... 6 (5%)

**Q3.7 Do you usually spend more than 2 hours out of your cell on weekdays?**  
 Yes ..... 80 (68%)  
 No..... 31 (26%)  
 Don't know..... 7 (6%)

**Q3.8 Do you usually spend more than 2 hours out of your cell on Saturdays and Sundays?**  
 Yes ..... 20 (17%)  
 No..... 89 (75%)  
 Don't know..... 10 (8%)

### Food and canteen

**Q4.1 What is the food like here?**  
 Very good ..... 0 (0%)  
 Quite good ..... 38 (33%)  
 Quite bad ..... 60 (52%)  
 Very bad ..... 17 (15%)

**Q4.2 Do you get enough to eat at mealtimes?**  
 Always..... 10 (8%)  
 Most of the time..... 37 (31%)  
 Some of the time..... 49 (41%)  
 Never ..... 24 (20%)

**Q4.3 Does the canteen sell the things that you need?**  
 Yes ..... 84 (74%)  
 No..... 23 (20%)  
 Don't know..... 6 (5%)

### Health and well-being

**Q5.1 How easy or difficult is it to see the following health staff?**

	Easy	Difficult	Don't know
Doctor	35 (30%)	52 (44%)	31 (26%)
Nurse	56 (48%)	35 (30%)	25 (22%)
Dentist	17 (15%)	68 (58%)	32 (27%)
Mental health workers	44 (38%)	23 (20%)	49 (42%)

**Q5.2 Do you have any health problems (including mental health problems)?**  
 Yes ..... 27 (23%)  
 No..... 90 (77%)

**Q5.3 Have you been helped with your health problems since you've been here?**  
 Yes ..... 16 (14%)  
 No..... 10 (9%)  
 Don't have any health problems..... 90 (78%)

**Q5.4 Do you have a disability? This includes any physical, mental or learning needs that affect your day-to-day life.**  
 Yes ..... 26 (22%)  
 No..... 92 (78%)

**Q5.5 If you have a disability, are you getting the support you need?**  
 Yes ..... 6 (5%)

No..... 18 (16%)  
 Don't have a disability ..... 92 (79%)

**Q5.6 Did you have an alcohol problem when you came here?**

Yes ..... 2 (2%)  
 No..... 118 (98%)

**Q5.7 Did you have a drug problem when you came here?**

Yes ..... 17 (14%)  
 No..... 101 (86%)

**Q5.8 Have you been helped with your drug or alcohol problem since you've been here?**

Yes ..... 7 (6%)  
 No..... 10 (8%)  
 Did not have a drug or alcohol problem..... 101 (86%)

**Q5.9 Can you spend time outside in the fresh air most days (not counting time spent going to and from activities)?**

Yes ..... 53 (45%)  
 No..... 59 (50%)  
 Don't know..... 7 (6%)

**Q5.10 How often do you go to the gym or play sports?**

More than once a week..... 17 (15%)  
 About once a week ..... 58 (52%)  
 Less than once a week..... 23 (21%)  
 Never ..... 13 (12%)

**Complaints****Q6.1 Do you know how to make a complaint?**

Yes ..... 81 (70%)  
 No..... 35 (30%)

**Q6.2 If you have made any complaints here, please answer the questions below:**

	Yes	No	Not made a complaint
Were your complaints usually dealt with fairly?	10 (9%)	35 (31%)	68 (60%)
Were your complaints usually dealt with within 7 days?	7 (6%)	38 (34%)	68 (60%)

**Q6.3 Have you ever felt too scared to make a complaint?**

Yes ..... 7 (6%)  
 No..... 71 (63%)  
 Never wanted to make a complaint..... 35 (31%)

**Safety and security****Q7.1 Have you ever felt unsafe here?**

Yes ..... 44 (39%)  
 No..... 70 (61%)

**Q7.2 Do you feel unsafe now?**

Yes ..... 13 (11%)  
 No..... 102 (89%)



<b>Q7.4</b>	<b>Is your emergency call bell or intercom normally answered within 5 minutes?</b>	
	Yes .....	15 (13%)
	No.....	94 (82%)
	Don't know.....	5 (4%)
<b>Q7.5</b>	<b>Have other young people here ever done any of the following to you?</b>	
	Verbal abuse.....	37 (36%)
	Threats or intimidation.....	23 (22%)
	Physical assault.....	25 (24%)
	Sexual assault .....	0 (0%)
	Being forced to assault another young person .....	10 (10%)
	Theft of canteen or property.....	6 (6%)
	Other bullying or victimisation .....	8 (8%)
	Young people here have not done any of these things to me.....	54 (52%)
<b>Q7.6</b>	<b>If you were being bullied/victimised by other young people here, would you report it?</b>	
	Yes .....	27 (28%)
	No.....	70 (72%)
<b>Q7.7</b>	<b>Have staff here ever done any of the following to you?</b>	
	Verbal abuse.....	31 (30%)
	Threats or intimidation.....	14 (14%)
	Physical assault.....	12 (12%)
	Sexual assault .....	1 (1%)
	Theft of canteen or property.....	11 (11%)
	Other bullying or victimisation .....	10 (10%)
	Staff here have not done any of these things to me.....	65 (63%)
<b>Q7.8</b>	<b>If you were being bullied/victimised by staff here, would you report it?</b>	
	Yes .....	57 (58%)
	No.....	42 (42%)

### Behaviour management

<b>Q8.1</b>	<b>Do the rewards or incentives for good behaviour encourage you to behave well?</b>	
	Yes .....	39 (34%)
	No.....	59 (52%)
	Don't know .....	16 (14%)
<b>Q8.2</b>	<b>Do you think the system of rewards or incentives is fair?</b>	
	Yes .....	23 (20%)
	No.....	73 (64%)
	Don't know.....	18 (16%)
<b>Q8.3</b>	<b>Do staff usually let you know when your behaviour is good?</b>	
	Yes .....	28 (25%)
	No.....	83 (75%)
<b>Q8.4</b>	<b>If you get in trouble, do staff usually explain what you have done wrong?</b>	
	Yes .....	52 (48%)
	No.....	41 (38%)
	Not applicable (never been in trouble here).....	16 (15%)
<b>Q8.5</b>	<b>Have you been physically restrained (e.g. MPR) since you have been here?</b>	
	Yes .....	78 (68%)
	No.....	37 (32%)

**Q8.6 If you have been restrained, did a member of staff come and talk to you about it afterwards?**

Yes .....	51 (45%)
No.....	23 (20%)
Don't remember .....	3 (3%)
Not been restrained here .....	37 (32%)

**Q8.7 Since you have been here, have you ever been kept locked up and stopped from mixing with other young people as a punishment?**

Yes .....	64 (55%)
No.....	52 (45%)

**Staff****Q9.1 Do you feel cared for by most staff here?**

Yes .....	45 (40%)
No.....	67 (60%)

**Q9.2 Do most staff here treat you with respect?**

Yes .....	67 (61%)
No.....	43 (39%)

**Q9.3 If you had a problem, are there any staff here you could turn to for help?**

Yes .....	76 (68%)
No.....	35 (32%)

**Q9.4 Can you speak to a Barnardo's advocate when you need to?**

Yes .....	67 (59%)
No.....	14 (12%)
Don't know.....	33 (29%)

**Faith****Q10.1 What is your religion?**

No religion.....	26 (23%)
Christian (including Church of England, Catholic, and other branches of Christianity).....	62 (56%)
Buddhist.....	1 (1%)
Hindu.....	0 (0%)
Jewish .....	0 (0%)
Muslim.....	22 (20%)
Sikh .....	0 (0%)
Other .....	0 (0%)

**Q10.2 Are your religious beliefs respected here?**

Yes .....	68 (61%)
No.....	4 (4%)
Don't know.....	14 (13%)
Not applicable (no religion).....	26 (23%)

**Q10.3 Are you able to speak to a Chaplain of your faith in private, if you want to?**

Yes .....	51 (46%)
No.....	10 (9%)
Don't know.....	23 (21%)
Not applicable (no religion).....	26 (24%)

### Keeping in touch with family and friends

<b>Q11.1</b>	<b>Has anyone here helped you to keep in touch with your family and friends?</b>	
	Yes .....	69 (62%)
	No.....	43 (38%)
<b>Q11.2</b>	<b>Are you able to use a phone every day (if you have credit)?</b>	
	Yes .....	107 (96%)
	No.....	4 (4%)
<b>Q11.3</b>	<b>How easy or difficult is it for your family and friends to get here?</b>	
	Very easy.....	8 (7%)
	Quite easy.....	34 (30%)
	Quite difficult .....	50 (44%)
	Very difficult .....	16 (14%)
	Don't know.....	5 (4%)
<b>Q11.4</b>	<b>How often do you have visits from family or friends?</b>	
	More than once a week.....	4 (4%)
	About once a week .....	42 (38%)
	Less than once a week.....	45 (40%)
	Not applicable (haven't had any visits).....	21 (19%)

### Education and training

<b>Q12.1</b>	<b>Are you doing any of the following activities at the moment?</b>	
	Education.....	95 (86%)
	Training for a job (vocational training).....	4 (4%)
	Paid work.....	5 (5%)
	Interventions (e.g. offending behaviour programmes) .....	17 (15%)
	None of these.....	16 (14%)
<b>Q12.2</b>	<b>Do staff encourage you to attend education, training or work?</b>	
	Yes .....	60 (56%)
	No.....	48 (44%)
<b>Q12.3</b>	<b>Have you learned anything here that will help you when you are released (e.g. education or skills)?</b>	
	Yes .....	59 (53%)
	No.....	52 (47%)

### Preparing to move on

<b>Q13.1</b>	<b>Is there a plan that you discuss in meetings with your YOT worker which sets out what you need to work on while you are here (e.g. your targets or objectives)?</b>	
	Yes .....	57 (50%)
	No.....	34 (30%)
	Don't know.....	22 (19%)
<b>Q13.2</b>	<b>Do you understand what you need to do to achieve your objectives or targets?</b>	
	Yes .....	41 (39%)
	No.....	9 (8%)
	Don't know what my objectives or targets are.....	56 (53%)
<b>Q13.3</b>	<b>Are staff here supporting you to achieve your objectives or targets?</b>	
	Yes .....	17 (16%)
	No.....	32 (30%)

Don't know what my objectives or targets are..... 56 (53%)

**Q13.4 Is anybody here helping you to prepare for when you leave?**

Yes ..... 26 (23%)

No..... 87 (77%)

**Q13.5 Have you had a say in what will happen to you when you leave here?**

Yes ..... 34 (32%)

No..... 73 (68%)

**Final question about this YOI**

**Q14.1 Do you think your experiences here have made you more or less likely to offend in the future?**

More likely to offend..... 13 (12%)

Less likely to offend..... 68 (64%)

Made no difference ..... 26 (24%)

## HMYOI Cookham Wood 2019

### Comparison of survey responses between different sub-populations of children

In this table the following analyses are presented:

- responses of children who reported that they were from a minority ethnic group compared with those who reported that they are white
- responses of children who reported that they were muslim compared with those who did not

Please note that these analyses are based on summary data from selected survey questions only.

Shading is used to indicate statistical significance\*, as follows:

	Green shading shows results that are significantly more positive than the comparator
	Blue shading shows results that are significantly more negative than the comparator
	Orange shading shows significant differences in demographics and background information
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\* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
80	40	22	89

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 15 years of age?	1%	0%	0%	0%
	Are you aged 18 or over?	18%	21%	27%	18%
1.4	Are you from a minority ethnic group?			100%	56%
1.5	Do you have any children?	4%	5%	0%	5%
1.6	Are you from a traveller community?	0%	15%	0%	7%
1.7	Have you ever been in local authority care?	53%	53%	57%	53%
5.2	Do you have any health problems (including mental health problems)?	18%	33%	27%	22%
5.4	Do you have a disability? This includes any physical, mental or learning needs that affect your day-to-day life.	14%	36%	9%	28%
10.1	Are you Muslim?	31%	0%		
ARRIVAL AND INDUCTION					
2.1	Were you searched in reception/admissions?	95%	92%	100%	93%
<i>For those who had been searched:</i>					
2.1	Was this search done in a respectful way?	69%	64%	64%	67%
2.2	Overall, were you treated well in reception/admission?	63%	78%	59%	71%
2.3	When you first arrived, did you have any problems or worries?	78%	73%	91%	73%
<i>For those who had any problems when they first arrived:</i>					
2.3	Did staff help you to deal with these problems or worries?	39%	41%	21%	47%
2.4	Did you feel safe on your first night here?	72%	65%	64%	71%
2.5	In your first few days, were you told everything you needed to know about life here?	46%	35%	50%	40%
LIVING CONDITIONS					
3.1	Is the temperature of your room or cell about right?	46%	54%	53%	47%
3.2	Can you shower everyday?	91%	98%	95%	93%
3.3	Do you normally have enough clean, suitable clothes for the week?	70%	65%	90%	62%
3.4	Do you have clean sheets every week?	77%	83%	81%	76%
3.5	Can you get to your stored property if you need it?	33%	45%	33%	40%
3.6	Is it normally quiet enough for you to relax or sleep at night?	32%	37%	41%	33%
3.7	Do you usually spend more than 2 hours out of your cell or room on weekdays?	68%	69%	64%	68%
3.8	Do you usually spend more than 2 hours out of your cell or room on Saturdays and Sundays?	17%	18%	14%	18%

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
80	40	22	89

FOOD AND CANTEEN					
4.1	Is the food here very / quite good?	28%	43%	40%	30%
4.2	Do you get enough to eat at mealtimes always / most of the time?	39%	40%	50%	35%
4.3	Does the shop / canteen sell the things that you need?	67%	88%	78%	72%
HEALTH AND WELL-BEING					
5.1	Is it easy to see:				
	- Doctor?	26%	39%	18%	33%
	- Nurse?	46%	54%	36%	52%
	- Dentist?	13%	18%	9%	16%
	- Mental health worker?	34%	44%	36%	38%
5.2	Do you have any health problems (including mental health problems)?	18%	33%	27%	22%
	<i>For those who have health problems:</i>				
5.3	Have you been helped with your health problems since you have been here?	46%	77%	40%	68%
5.4	Do you have a disability? This includes any physical, mental or learning needs that affect your day-to-day life.	14%	36%	9%	28%
	<i>For those who have a disability</i>				
5.5	Are you getting the support you need?	0%	50%	0%	27%
5.6	Did you have an alcohol problem when you came here?	3%	0%	5%	1%
5.7	Did you have a drug problem when you came here?	14%	15%	24%	13%
	<i>For those who did have a drug or alcohol problem</i>				
5.8	Have you been helped with your drug or alcohol problem since you've been here?	46%	33%	60%	36%
5.9	Can you spend time outside in the fresh air most days (not counting time spent going to and from activities)?	42%	51%	46%	44%
5.10	Do you go to the gym or play sports once a week or more?	11%	23%	5%	17%
COMPLAINTS					
6.1	Do you know how to make a complaint?	67%	74%	59%	73%
	<i>For those who have made a complaint:</i>				
6.2	Were your complaints usually dealt with fairly?	31%	0%	33%	18%
	Were your complaints usually dealt with within 7 days?	19%	8%	22%	15%
6.3	Have you ever felt too scared to make a complaint?	7%	14%	13%	9%

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
80	40	22	89

SAFETY AND SECURITY		Black and minority ethnic	White	Muslim	Non-Muslim
7.1	Have you ever felt unsafe here?	32%	53%	50%	36%
7.2	Do you feel unsafe now?	9%	15%	18%	9%
7.4	Is your emergency call bell or intercom normally answered within 5 minutes?	11%	18%	5%	17%
7.5	Have other young people here ever done any of the following to you?				
	- Verbal abuse?	39%	30%	53%	31%
	- Threats or intimidation?	20%	27%	41%	18%
	- Physical assault?	23%	27%	47%	20%
	- Sexual assault?	0%	0%	0%	0%
	- Being forced to assault another young person?	9%	11%	18%	6%
	- Theft of canteen or property?	5%	8%	12%	4%
	- Other bullying or victimisation?	6%	11%	18%	5%
	- Young people here have not done any of these things to me	53%	51%	35%	58%
7.6	If you were being bullied / victimised by other young people here, would you report it?	27%	30%	38%	28%
7.7	Have staff here ever done any of the following to you?				
	- Verbal abuse?	31%	27%	56%	25%
	- Threats or intimidation?	17%	8%	39%	8%
	- Physical assault?	11%	14%	28%	9%
	- Sexual assault?	2%	0%	6%	0%
	- Theft of canteen or property?	12%	5%	22%	9%
	- Other bullying / victimisation?	9%	11%	22%	5%
	- Staff here have not done any of these things to me	65%	62%	44%	68%
7.8	If you were being bullied / victimised by staff here, would you report it?	62%	51%	72%	56%
BEHAVIOUR MANAGEMENT					
8.1	Do the rewards or incentives for good behaviour encourage you to behave well?	37%	30%	29%	34%
8.2	Do you think the system of rewards or incentives is fair?	18%	26%	14%	21%
8.3	Do staff usually let you know when your behaviour is good?	21%	34%	10%	28%
8.4	If you get in trouble, do staff usually explain what you have done wrong?	60%	50%	63%	54%
8.5	Have you been physically restrained (e.g. MMPR) since you have been here?	76%	55%	77%	66%
	<i>For those who have been restrained:</i>				
8.6	Did a member of staff come and talk to you about it afterwards?	68%	62%	65%	68%
8.7	Since you have been here, have you ever been kept locked up and stopped from mixing with other young people as a punishment? (This might include time spent in a segregation unit or in your own room)	59%	48%	73%	51%

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\* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

Black and minority ethnic		Muslim	
Black and minority ethnic	White	Muslim	Non-Muslim
80	40	22	89

STAFF					
9.1	Do you feel cared for by most staff here?	39%	41%	35%	40%
9.2	Do most staff here treat you with respect?	61%	60%	59%	61%
9.3	If you had a problem, are there any staff here you could turn to for help?	63%	77%	60%	71%
9.4	Can you speak to a Barnardo's advocate when you need to?	58%	60%	59%	60%
FAITH					
10.1	Do you have a religion?	90%	51%	100%	71%
<i>For those who have a religion:</i>					
10.2	Are your religious beliefs respected here?	79%	80%	76%	79%
10.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	57%	75%	48%	64%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS					
11.1	Has anyone here helped you to keep in touch with your family / friends?	62%	63%	50%	64%
11.2	Are you able to use a phone every day (if you have credit)?	94%	100%	96%	97%
11.3	Is it quite / very easy for your family and friends to get here?	30%	51%	9%	46%
11.4	Do you get visits from family or friends?	78%	90%	77%	83%
<i>For those who do get visits:</i>					
11.4	Do you get visits from family or friends once a week or more?	47%	56%	12%	61%
EDUCATION AND TRAINING					
12.1	Are you doing any of the following activities at the moment:				
	- Education?	85%	87%	96%	83%
	- Training for a job (vocational training)?	4%	3%	0%	5%
	- Paid work?	4%	5%	5%	5%
	- Interventions (e.g. offending behaviour programmes)?	14%	19%	27%	13%
	- Not doing any of these activities	15%	14%	5%	17%
12.2	Do staff encourage you to attend education, training or work?	54%	61%	63%	54%
12.3	Have you learned anything here that will help you when you are released (e.g. education or skills)?	58%	45%	59%	51%
PREPARING TO MOVE ON					
13.1	Is there a plan that you discuss in meetings with your YOT worker which sets out what you need to work on while you are here (e.g. your targets or objectives)?	53%	46%	46%	50%
<i>For those who do have a plan:</i>					
13.2	Do you understand what you need to do to achieve your objectives or targets?	78%	93%	63%	87%
13.3	Are staff here supporting you to achieve your objectives or targets?	35%	33%	14%	40%
13.4	Is anybody here helping you to prepare for when you leave?	25%	21%	27%	23%
13.5	Have you had a say in what will happen to you when you leave here?	37%	22%	35%	32%
FINAL QUESTIONS ABOUT THIS STC/YOI					
14.1	Do you think your experiences here have made you less likely to offend in the future?	72%	51%	75%	59%



## HMYOI Cookham Wood 2019

### Comparison of survey responses between different sub-populations of children

In this table the following analyses are presented:

- responses of children who reported that they had a disability compared with those who did not

Please note that these analyses are based on summary data from selected survey questions only.

Shading is used to indicate statistical significance\*, as follows:

	Green shading shows results that are significantly more positive than the comparator
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\* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

Have a disability	Do not have a disability
26	92

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 15 years of age?	0%	1%
	Are you aged 18 or over?	36%	14%
1.4	Are you from a minority ethnic group?	44%	73%
1.5	Do you have any children?	4%	3%
1.6	Are you from a traveller community?	8%	5%
1.7	Have you ever been in local authority care?	77%	47%
5.2	Do you have any health problems (including mental health problems)?	54%	15%
5.4	Do you have a disability? This includes any physical, mental or learning needs that affect your day-to-day life.		
10.1	Are you Muslim?	8%	24%
ARRIVAL AND INDUCTION			
2.1	Were you searched in reception/admissions?	92%	96%
<i>For those who had been searched:</i>			
2.1	Was this search done in a respectful way?	67%	67%
2.2	Overall, were you treated well in reception/admission?	69%	67%
2.3	When you first arrived, did you have any problems or worries?	77%	78%
<i>For those who had any problems when they first arrived:</i>			
2.3	Did staff help you to deal with these problems or worries?	50%	36%
2.4	Did you feel safe on your first night here?	62%	71%
2.5	In your first few days, were you told everything you needed to know about life here?	39%	41%
LIVING CONDITIONS			
3.1	Is the temperature of your room or cell about right?	50%	47%
3.2	Can you shower everyday?	85%	96%
3.3	Do you normally have enough clean, suitable clothes for the week?	62%	69%
3.4	Do you have clean sheets every week?	69%	80%
3.5	Can you get to your stored property if you need it?	42%	35%
3.6	Is it normally quiet enough for you to relax or sleep at night?	13%	39%
3.7	Do you usually spend more than 2 hours out of your cell or room on weekdays?	50%	73%
3.8	Do you usually spend more than 2 hours out of your cell or room on Saturdays and Sundays?	12%	19%

Shading is used to indicate statistical significance\*, as follows:

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\* less than 1% probability that the difference is due to chance

Have a disability	Do not have a disability
<b>26</b>	<b>92</b>

Number of completed questionnaires returned

FOOD AND CANTEEN			
4.1	Is the food here very / quite good?	<b>32%</b>	<b>33%</b>
4.2	Do you get enough to eat at mealtimes always / most of the time?	<b>27%</b>	<b>43%</b>
4.3	Does the shop / canteen sell the things that you need?	<b>80%</b>	<b>72%</b>
HEALTH AND WELL-BEING			
5.1	Is it easy to see:		
	- Doctor?	<b>27%</b>	<b>31%</b>
	- Nurse?	<b>56%</b>	<b>47%</b>
	- Dentist?	<b>4%</b>	<b>18%</b>
	- Mental health worker?	<b>35%</b>	<b>40%</b>
5.2	Do you have any health problems (including mental health problems)?	<b>54%</b>	<b>15%</b>
<i>For those who have health problems:</i>			
5.3	Have you been helped with your health problems since you have been here?	<b>69%</b>	<b>54%</b>
5.4	Do you have a disability? This includes any physical, mental or learning needs that affect your day-to-day life.		
<i>For those who have a disability</i>			
5.5	Are you getting the support you need?	<b>25%</b>	
5.6	Did you have an alcohol problem when you came here?	<b>0%</b>	<b>2%</b>
5.7	Did you have a drug problem when you came here?	<b>23%</b>	<b>12%</b>
<i>For those who did have a drug or alcohol problem</i>			
5.8	Have you been helped with your drug or alcohol problem since you've been here?	<b>17%</b>	<b>55%</b>
5.9	Can you spend time outside in the fresh air most days (not counting time spent going to and from activities)?	<b>39%</b>	<b>48%</b>
5.10	Do you go to the gym or play sports once a week or more?	<b>16%</b>	<b>14%</b>
COMPLAINTS			
6.1	Do you know how to make a complaint?	<b>76%</b>	<b>67%</b>
<i>For those who have made a complaint:</i>			
6.2	Were your complaints usually dealt with fairly?	<b>0%</b>	<b>30%</b>
	Were your complaints usually dealt with within 7 days?	<b>18%</b>	<b>15%</b>
6.3	Have you ever felt too scared to make a complaint?	<b>5%</b>	<b>10%</b>

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	Grey shading indicates that we have no valid data for this question

\* less than 1% probability that the difference is due to chance

Have a disability	Do not have a disability
<b>26</b>	<b>92</b>

Number of completed questionnaires returned

<b>SAFETY AND SECURITY</b>			
7.1	Have you ever felt unsafe here?	<b>50%</b>	<b>35%</b>
7.2	Do you feel unsafe now?	<b>19%</b>	<b>9%</b>
7.4	Is your emergency call bell or intercom normally answered within 5 minutes?	<b>16%</b>	<b>13%</b>
7.5	Have other young people here ever done any of the following to you?		
	- Verbal abuse?	<b>40%</b>	<b>36%</b>
	- Threats or intimidation?	<b>35%</b>	<b>20%</b>
	- Physical assault?	<b>30%</b>	<b>24%</b>
	- Sexual assault?	<b>0%</b>	<b>0%</b>
	- Being forced to assault another young person?	<b>10%</b>	<b>10%</b>
	- Theft of canteen or property?	<b>10%</b>	<b>5%</b>
	- Other bullying or victimisation?	<b>10%</b>	<b>7%</b>
	- Young people here have not done any of these things to me	<b>40%</b>	<b>54%</b>
7.6	If you were being bullied / victimised by other young people here, would you report it?	<b>32%</b>	<b>27%</b>
7.7	Have staff here ever done any of the following to you?		
	- Verbal abuse?	<b>39%</b>	<b>28%</b>
	- Threats or intimidation?	<b>17%</b>	<b>13%</b>
	- Physical assault?	<b>22%</b>	<b>9%</b>
	- Sexual assault?	<b>0%</b>	<b>1%</b>
	- Theft of canteen or property?	<b>17%</b>	<b>8%</b>
	- Other bullying / victimisation?	<b>13%</b>	<b>9%</b>
	- Staff here have not done any of these things to me	<b>57%</b>	<b>65%</b>
7.8	If you were being bullied / victimised by staff here, would you report it?	<b>61%</b>	<b>58%</b>
<b>BEHAVIOUR MANAGEMENT</b>			
8.1	Do the rewards or incentives for good behaviour encourage you to behave well?	<b>31%</b>	<b>36%</b>
8.2	Do you think the system of rewards or incentives is fair?	<b>16%</b>	<b>22%</b>
8.3	Do staff usually let you know when your behaviour is good?	<b>28%</b>	<b>25%</b>
8.4	If you get in trouble, do staff usually explain what you have done wrong?	<b>57%</b>	<b>56%</b>
8.5	Have you been physically restrained (e.g. MMPR) since you have been here?	<b>69%</b>	<b>68%</b>
<i>For those who have been restrained:</i>			
8.6	Did a member of staff come and talk to you about it afterwards?	<b>65%</b>	<b>66%</b>
8.7	Since you have been here, have you ever been kept locked up and stopped from mixing with other young people as a punishment? (This might include time spent in a segregation unit or in your own room)	<b>65%</b>	<b>52%</b>

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	No shading means that differences are not significant and may have occurred by chance
	Grey shading indicates that we have no valid data for this question

\* less than 1% probability that the difference is due to chance

Have a disability	Do not have a disability
<b>26</b>	<b>92</b>

Number of completed questionnaires returned

<b>STAFF</b>			
9.1	Do you feel cared for by most staff here?	<b>52%</b>	<b>38%</b>
9.2	Do most staff here treat you with respect?	<b>61%</b>	<b>61%</b>
9.3	If you had a problem, are there any staff here you could turn to for help?	<b>77%</b>	<b>65%</b>
9.4	Can you speak to a Barnardo's advocate when you need to?	<b>60%</b>	<b>58%</b>
<b>FAITH</b>			
10.1	Do you have a religion?	<b>85%</b>	<b>75%</b>
<i>For those who have a religion:</i>			
10.2	Are your religious beliefs respected here?	<b>73%</b>	<b>81%</b>
10.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	<b>60%</b>	<b>60%</b>
<b>KEEPING IN TOUCH WITH FAMILY AND FRIENDS</b>			
11.1	Has anyone here helped you to keep in touch with your family / friends?	<b>56%</b>	<b>62%</b>
11.2	Are you able to use a phone every day (if you have credit)?	<b>96%</b>	<b>96%</b>
11.3	Is it quite / very easy for your family and friends to get here?	<b>42%</b>	<b>34%</b>
11.4	Do you get visits from family or friends?	<b>77%</b>	<b>82%</b>
<i>For those who do get visits:</i>			
11.4	Do you get visits from family or friends once a week or more?	<b>50%</b>	<b>49%</b>
<b>EDUCATION AND TRAINING</b>			
12.1	Are you doing any of the following activities at the moment:		
	- Education?	<b>83%</b>	<b>86%</b>
	- Training for a job (vocational training)?	<b>4%</b>	<b>4%</b>
	- Paid work?	<b>0%</b>	<b>6%</b>
	- Interventions (e.g. offending behaviour programmes)?	<b>22%</b>	<b>14%</b>
	- Not doing any of these activities	<b>17%</b>	<b>14%</b>
12.2	Do staff encourage you to attend education, training or work?	<b>50%</b>	<b>57%</b>
12.3	Have you learned anything here that will help you when you are released (e.g. education or skills)?	<b>33%</b>	<b>60%</b>
<b>PREPARING TO MOVE ON</b>			
13.1	Is there a plan that you discuss in meetings with your YOT worker which sets out what you need to work on while you are here (e.g. your targets or objectives)?	<b>42%</b>	<b>53%</b>
<i>For those who do have a plan:</i>			
13.2	Do you understand what you need to do to achieve your objectives or targets?	<b>88%</b>	<b>81%</b>
13.3	Are staff here supporting you to achieve your objectives or targets?	<b>63%</b>	<b>30%</b>
13.4	Is anybody here helping you to prepare for when you leave?	<b>15%</b>	<b>26%</b>
13.5	Have you had a say in what will happen to you when you leave here?	<b>22%</b>	<b>34%</b>
<b>FINAL QUESTIONS ABOUT THIS STC/YOI</b>			
14.1	Do you think your experiences here have made you less likely to offend in the future?	<b>46%</b>	<b>68%</b>

## HMYOI Cookham Wood 2019

### Comparison of survey responses between different sub-populations of children

In this table the following analyses are presented:

- responses of children who had been in local authority care are compared with responses of those who had not been in local authority care

Please note that these analyses are based on summary data from selected survey questions only.

Shading is used to indicate statistical significance\*, as follows:

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	Grey shading indicates that we have no valid data for this question

\* less than 1% probability that the difference is due to chance

Have been in local authority care	Have not been in local authority care
<b>63</b>	<b>56</b>

Number of completed questionnaires returned

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 15 years of age?	0%	2%
	Are you aged 18 or over?	23%	15%
1.4	Are you from a minority ethnic group?	66%	66%
1.5	Do you have any children?	3%	6%
1.6	Are you from a traveller community?	5%	6%
1.7	Have you ever been in local authority care?		
5.2	Do you have any health problems (including mental health problems)?	30%	16%
5.4	Do you have a disability? This includes any physical, mental or learning needs that affect your day-to-day life.	32%	11%
10.1	Are you Muslim?	20%	18%
ARRIVAL AND INDUCTION			
2.1	Were you searched in reception/admissions?	95%	93%
<i>For those who had been searched:</i>			
2.1	Was this search done in a respectful way?	72%	60%
2.2	Overall, were you treated well in reception/admission?	74%	59%
2.3	When you first arrived, did you have any problems or worries?	73%	80%
<i>For those who had any problems when they first arrived:</i>			
2.3	Did staff help you to deal with these problems or worries?	42%	37%
2.4	Did you feel safe on your first night here?	79%	59%
2.5	In your first few days, were you told everything you needed to know about life here?	43%	39%
LIVING CONDITIONS			
3.1	Is the temperature of your room or cell about right?	47%	50%
3.2	Can you shower everyday?	92%	95%
3.3	Do you normally have enough clean, suitable clothes for the week?	68%	67%
3.4	Do you have clean sheets every week?	81%	75%
3.5	Can you get to your stored property if you need it?	38%	36%
3.6	Is it normally quiet enough for you to relax or sleep at night?	27%	42%
3.7	Do you usually spend more than 2 hours out of your cell or room on weekdays?	62%	75%
3.8	Do you usually spend more than 2 hours out of your cell or room on Saturdays and Sundays?	16%	18%

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\* less than 1% probability that the difference is due to chance

Have been in local authority care	Have not been in local authority care
<b>63</b>	<b>56</b>

Number of completed questionnaires returned

<b>FOOD AND CANTEEN</b>			
4.1	Is the food here very / quite good?	<b>36%</b>	<b>30%</b>
4.2	Do you get enough to eat at mealtimes always / most of the time?	<b>34%</b>	<b>45%</b>
4.3	Does the shop / canteen sell the things that you need?	<b>75%</b>	<b>74%</b>
<b>HEALTH AND WELL-BEING</b>			
5.1	Is it easy to see:		
	- Doctor?	<b>21%</b>	<b>39%</b>
	- Nurse?	<b>48%</b>	<b>48%</b>
	- Dentist?	<b>10%</b>	<b>20%</b>
	- Mental health worker?	<b>44%</b>	<b>29%</b>
5.2	Do you have any health problems (including mental health problems)?	<b>30%</b>	<b>16%</b>
<i>For those who have health problems:</i>			
5.3	Have you been helped with your health problems since you have been here?	<b>61%</b>	<b>63%</b>
5.4	Do you have a disability? This includes any physical, mental or learning needs that affect your day-to-day life.	<b>32%</b>	<b>11%</b>
<i>For those who have a disability</i>			
5.5	Are you getting the support you need?	<b>22%</b>	<b>33%</b>
5.6	Did you have an alcohol problem when you came here?	<b>2%</b>	<b>2%</b>
5.7	Did you have a drug problem when you came here?	<b>19%</b>	<b>9%</b>
<i>For those who did have a drug or alcohol problem</i>			
5.8	Have you been helped with your drug or alcohol problem since you've been here?	<b>42%</b>	<b>40%</b>
5.9	Can you spend time outside in the fresh air most days (not counting time spent going to and from activities)?	<b>43%</b>	<b>48%</b>
5.10	Do you go to the gym or play sports once a week or more?	<b>10%</b>	<b>22%</b>
<b>COMPLAINTS</b>			
6.1	Do you know how to make a complaint?	<b>77%</b>	<b>61%</b>
<i>For those who have made a complaint:</i>			
6.2	Were your complaints usually dealt with fairly?	<b>21%</b>	<b>25%</b>
	Were your complaints usually dealt with within 7 days?	<b>11%</b>	<b>24%</b>
6.3	Have you ever felt too scared to make a complaint?	<b>4%</b>	<b>16%</b>

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\* less than 1% probability that the difference is due to chance

Have been in local authority care	Have not been in local authority care
<b>63</b>	<b>56</b>

Number of completed questionnaires returned

<b>SAFETY AND SECURITY</b>			
7.1	Have you ever felt unsafe here?	<b>35%</b>	<b>43%</b>
7.2	Do you feel unsafe now?	<b>8%</b>	<b>15%</b>
7.4	Is your emergency call bell or intercom normally answered within 5 minutes?	<b>12%</b>	<b>15%</b>
7.5	Have other young people here ever done any of the following to you?		
	- Verbal abuse?	<b>36%</b>	<b>35%</b>
	- Threats or intimidation?	<b>22%</b>	<b>23%</b>
	- Physical assault?	<b>22%</b>	<b>27%</b>
	- Sexual assault?	<b>0%</b>	<b>0%</b>
	- Being forced to assault another young person?	<b>7%</b>	<b>13%</b>
	- Theft of canteen or property?	<b>7%</b>	<b>4%</b>
	- Other bullying or victimisation?	<b>7%</b>	<b>8%</b>
	- Young people here have not done any of these things to me	<b>53%</b>	<b>52%</b>
7.6	If you were being bullied / victimised by other young people here, would you report it?	<b>19%</b>	<b>39%</b>
7.7	Have staff here ever done any of the following to you?		
	- Verbal abuse?	<b>36%</b>	<b>23%</b>
	- Threats or intimidation?	<b>18%</b>	<b>9%</b>
	- Physical assault?	<b>16%</b>	<b>6%</b>
	- Sexual assault?	<b>2%</b>	<b>0%</b>
	- Theft of canteen or property?	<b>11%</b>	<b>11%</b>
	- Other bullying / victimisation?	<b>11%</b>	<b>9%</b>
	- Staff here have not done any of these things to me	<b>56%</b>	<b>70%</b>
7.8	If you were being bullied / victimised by staff here, would you report it?	<b>60%</b>	<b>55%</b>
<b>BEHAVIOUR MANAGEMENT</b>			
8.1	Do the rewards or incentives for good behaviour encourage you to behave well?	<b>34%</b>	<b>35%</b>
8.2	Do you think the system of rewards or incentives is fair?	<b>21%</b>	<b>19%</b>
8.3	Do staff usually let you know when your behaviour is good?	<b>30%</b>	<b>20%</b>
8.4	If you get in trouble, do staff usually explain what you have done wrong?	<b>52%</b>	<b>61%</b>
8.5	Have you been physically restrained (e.g. MMPR) since you have been here?	<b>75%</b>	<b>60%</b>
<i>For those who have been restrained:</i>			
8.6	Did a member of staff come and talk to you about it afterwards?	<b>72%</b>	<b>58%</b>
8.7	Since you have been here, have you ever been kept locked up and stopped from mixing with other young people as a punishment? (This might include time spent in a segregation unit or in your own room)	<b>63%</b>	<b>45%</b>

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\* less than 1% probability that the difference is due to chance

Have been in local authority care	Have not been in local authority care
<b>63</b>	<b>56</b>

Number of completed questionnaires returned

<b>STAFF</b>			
9.1	Do you feel cared for by most staff here?	40%	40%
9.2	Do most staff here treat you with respect?	58%	64%
9.3	If you had a problem, are there any staff here you could turn to for help?	69%	68%
9.4	Can you speak to a Barnardo's advocate when you need to?	57%	62%
<b>FAITH</b>			
10.1	Do you have a religion?	81%	71%
<i>For those who have a religion:</i>			
10.2	Are your religious beliefs respected here?	77%	84%
10.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	56%	67%
<b>KEEPING IN TOUCH WITH FAMILY AND FRIENDS</b>			
11.1	Has anyone here helped you to keep in touch with your family / friends?	61%	62%
11.2	Are you able to use a phone every day (if you have credit)?	97%	96%
11.3	Is it quite / very easy for your family and friends to get here?	32%	44%
11.4	Do you get visits from family or friends?	78%	84%
<i>For those who do get visits:</i>			
11.4	Do you get visits from family or friends once a week or more?	43%	61%
<b>EDUCATION AND TRAINING</b>			
12.1	Are you doing any of the following activities at the moment:		
	- Education?	85%	86%
	- Training for a job (vocational training)?	2%	6%
	- Paid work?	3%	6%
	- Interventions (e.g. offending behaviour programmes)?	17%	14%
	- Not doing any of these activities	15%	14%
12.2	Do staff encourage you to attend education, training or work?	54%	56%
12.3	Have you learned anything here that will help you when you are released (e.g. education or skills)?	61%	45%
<b>PREPARING TO MOVE ON</b>			
13.1	Is there a plan that you discuss in meetings with your YOT worker which sets out what you need to work on while you are here (e.g. your targets or objectives)?	52%	50%
<i>For those who do have a plan:</i>			
13.2	Do you understand what you need to do to achieve your objectives or targets?	69%	96%
13.3	Are staff here supporting you to achieve your objectives or targets?	39%	30%
13.4	Is anybody here helping you to prepare for when you leave?	23%	23%
13.5	Have you had a say in what will happen to you when you leave here?	26%	40%
<b>FINAL QUESTIONS ABOUT THIS STC/YOI</b>			
14.1	Do you think your experiences here have made you less likely to offend in the future?	60%	68%



## HMYOI Cookham Wood 2019

### Comparison of survey responses from different residential locations

In this table responses from the induction unit (A3 wing) are compared with those from the rest of the establishment.

Shading is used to indicate statistical significance\*, as follows:

	Green shading shows results that are significantly more positive than the comparator
	Blue shading shows results that are significantly more negative than the comparator
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\* less than 1% probability that the difference is due to chance

Induction unit (A3 wing)	Rest of the establishment
<b>18</b>	<b>101</b>

Number of completed questionnaires returned

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 15 years of age?	0%	1%
	Are you aged 18 or over?	11%	20%
1.4	Are you from a minority ethnic group?	72%	65%
1.5	Do you have any children?	6%	4%
1.6	Are you from a traveller community?	0%	6%
1.7	Have you ever been in local authority care?	44%	54%
5.2	Do you have any health problems (including mental health problems)?	22%	24%
5.4	Do you have a disability? This includes any physical, mental or learning needs that affect your day-to-day life.	18%	23%
10.1	Are you Muslim?	24%	18%
ARRIVAL AND INDUCTION			
2.1	Were you searched in reception/admissions?	94%	94%
<i>For those who had been searched:</i>			
2.1	Was this search done in a respectful way?	94%	62%
2.2	Overall, were you treated well in reception/admission?	83%	65%
2.3	When you first arrived, did you have any problems or worries?	83%	75%
<i>For those who had any problems when they first arrived:</i>			
2.3	Did staff help you to deal with these problems or worries?	40%	40%
2.4	Did you feel safe on your first night here?	67%	70%
2.5	In your first few days, were you told everything you needed to know about life here?	44%	41%
LIVING CONDITIONS			
3.1	Is the temperature of your room or cell about right?	53%	48%
3.2	Can you shower everyday?	82%	95%
3.3	Do you normally have enough clean, suitable clothes for the week?	67%	68%
3.4	Do you have clean sheets every week?	67%	80%
3.5	Can you get to your stored property if you need it?	11%	41%
3.6	Is it normally quiet enough for you to relax or sleep at night?	29%	35%
3.7	Do you usually spend more than 2 hours out of your cell or room on weekdays?	39%	72%
3.8	Do you usually spend more than 2 hours out of your cell or room on Saturdays and Sundays?	0%	20%

Shading is used to indicate statistical significance\*, as follows:

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	Blue shading shows results that are significantly more negative than the comparator
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	No shading means that differences are not significant and may have occurred by chance
	Grey shading indicates that we have no valid data for this question

\* less than 1% probability that the difference is due to chance

Induction unit (A3 wing)	Rest of the establishment
<b>18</b>	<b>101</b>

Number of completed questionnaires returned

FOOD AND CANTEEN			
4.1	Is the food here very / quite good?	<b>6%</b>	<b>37%</b>
4.2	Do you get enough to eat at mealtimes always / most of the time?	<b>59%</b>	<b>37%</b>
4.3	Does the shop / canteen sell the things that you need?	<b>72%</b>	<b>74%</b>
HEALTH AND WELL-BEING			
5.1	Is it easy to see:		
	- Doctor?	<b>11%</b>	<b>34%</b>
	- Nurse?	<b>17%</b>	<b>55%</b>
	- Dentist?	<b>6%</b>	<b>17%</b>
	- Mental health worker?	<b>6%</b>	<b>45%</b>
5.2	Do you have any health problems (including mental health problems)?	<b>22%</b>	<b>24%</b>
<i>For those who have health problems:</i>			
5.3	Have you been helped with your health problems since you have been here?	<b>25%</b>	<b>68%</b>
5.4	Do you have a disability? This includes any physical, mental or learning needs that affect your day-to-day life.	<b>18%</b>	<b>23%</b>
<i>For those who have a disability</i>			
5.5	Are you getting the support you need?	<b>33%</b>	<b>24%</b>
5.6	Did you have an alcohol problem when you came here?	<b>0%</b>	<b>2%</b>
5.7	Did you have a drug problem when you came here?	<b>11%</b>	<b>15%</b>
<i>For those who did have a drug or alcohol problem</i>			
5.8	Have you been helped with your drug or alcohol problem since you've been here?	<b>0%</b>	<b>47%</b>
5.9	Can you spend time outside in the fresh air most days (not counting time spent going to and from activities)?	<b>22%</b>	<b>49%</b>
5.10	Do you go to the gym or play sports once a week or more?	<b>0%</b>	<b>18%</b>
COMPLAINTS			
6.1	Do you know how to make a complaint?	<b>39%</b>	<b>76%</b>
<i>For those who have made a complaint:</i>			
6.2	Were your complaints usually dealt with fairly?	<b>50%</b>	<b>21%</b>
	Were your complaints usually dealt with within 7 days?	<b>0%</b>	<b>16%</b>
6.3	Have you ever felt too scared to make a complaint?	<b>13%</b>	<b>9%</b>

Shading is used to indicate statistical significance\*, as follows:

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	Blue shading shows results that are significantly more negative than the comparator
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	Grey shading indicates that we have no valid data for this question

\* less than 1% probability that the difference is due to chance

Induction unit (A3 wing)	Rest of the establishment
<b>18</b>	<b>101</b>

Number of completed questionnaires returned

<b>SAFETY AND SECURITY</b>			
7.1	Have you ever felt unsafe here?	<b>41%</b>	<b>39%</b>
7.2	Do you feel unsafe now?	<b>29%</b>	<b>8%</b>
7.4	Is your emergency call bell or intercom normally answered within 5 minutes?	<b>6%</b>	<b>15%</b>
7.5	Have other young people here ever done any of the following to you?		
	- Verbal abuse?	<b>29%</b>	<b>38%</b>
	- Threats or intimidation?	<b>18%</b>	<b>24%</b>
	- Physical assault?	<b>18%</b>	<b>26%</b>
	- Sexual assault?	<b>0%</b>	<b>0%</b>
	- Being forced to assault another young person?	<b>12%</b>	<b>10%</b>
	- Theft of canteen or property?	<b>0%</b>	<b>7%</b>
	- Other bullying or victimisation?	<b>6%</b>	<b>8%</b>
	- Young people here have not done any of these things to me	<b>65%</b>	<b>49%</b>
7.6	If you were being bullied / victimised by other young people here, would you report it?	<b>40%</b>	<b>26%</b>
7.7	Have staff here ever done any of the following to you?		
	- Verbal abuse?	<b>6%</b>	<b>35%</b>
	- Threats or intimidation?	<b>0%</b>	<b>17%</b>
	- Physical assault?	<b>0%</b>	<b>14%</b>
	- Sexual assault?	<b>0%</b>	<b>1%</b>
	- Theft of canteen or property?	<b>6%</b>	<b>12%</b>
	- Other bullying / victimisation?	<b>12%</b>	<b>10%</b>
	- Staff here have not done any of these things to me	<b>88%</b>	<b>58%</b>
7.8	If you were being bullied / victimised by staff here, would you report it?	<b>63%</b>	<b>57%</b>
<b>BEHAVIOUR MANAGEMENT</b>			
8.1	Do the rewards or incentives for good behaviour encourage you to behave well?	<b>50%</b>	<b>32%</b>
8.2	Do you think the system of rewards or incentives is fair?	<b>28%</b>	<b>19%</b>
8.3	Do staff usually let you know when your behaviour is good?	<b>35%</b>	<b>24%</b>
8.4	If you get in trouble, do staff usually explain what you have done wrong?	<b>56%</b>	<b>57%</b>
8.5	Have you been physically restrained (e.g. MMPR) since you have been here?	<b>17%</b>	<b>77%</b>
	<i>For those who have been restrained:</i>		
8.6	Did a member of staff come and talk to you about it afterwards?	<b>67%</b>	<b>67%</b>
8.7	Since you have been here, have you ever been kept locked up and stopped from mixing with other young people as a punishment? (This might include time spent in a segregation unit or in your own room)	<b>33%</b>	<b>60%</b>

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\* less than 1% probability that the difference is due to chance

Induction unit (A3 wing)	Rest of the establishment
18	101

Number of completed questionnaires returned

STAFF			
9.1	Do you feel cared for by most staff here?	22%	45%
9.2	Do most staff here treat you with respect?	50%	63%
9.3	If you had a problem, are there any staff here you could turn to for help?	56%	71%
9.4	Can you speak to a Barnardo's advocate when you need to?	39%	62%
FAITH			
10.1	Do you have a religion?	82%	75%
<i>For those who have a religion:</i>			
10.2	Are your religious beliefs respected here?	64%	82%
10.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	43%	65%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS			
11.1	Has anyone here helped you to keep in touch with your family / friends?	53%	63%
11.2	Are you able to use a phone every day (if you have credit)?	82%	99%
11.3	Is it quite / very easy for your family and friends to get here?	25%	40%
11.4	Do you get visits from family or friends?	56%	85%
<i>For those who do get visits:</i>			
11.4	Do you get visits from family or friends once a week or more?	56%	51%
EDUCATION AND TRAINING			
12.1	Are you doing any of the following activities at the moment:		
	- Education?	53%	91%
	- Training for a job (vocational training)?	0%	4%
	- Paid work?	0%	5%
	- Interventions (e.g. offending behaviour programmes)?	6%	17%
	- Not doing any of these activities	47%	9%
12.2	Do staff encourage you to attend education, training or work?	38%	60%
12.3	Have you learned anything here that will help you when you are released (e.g. education or skills)?	41%	57%
PREPARING TO MOVE ON			
13.1	Is there a plan that you discuss in meetings with your YOT worker which sets out what you need to work on while you are here (e.g. your targets or objectives)?	35%	52%
<i>For those who do have a plan:</i>			
13.2	Do you understand what you need to do to achieve your objectives or targets?	67%	88%
13.3	Are staff here supporting you to achieve your objectives or targets?	20%	38%
13.4	Is anybody here helping you to prepare for when you leave?	6%	27%
13.5	Have you had a say in what will happen to you when you leave here?	18%	34%
FINAL QUESTIONS ABOUT THIS STC/YOI			
14.1	Do you think your experiences here have made you less likely to offend in the future?	87%	59%

**HMYOI Cookham Wood 2019**  
**Survey responses compared with those from other HMIP surveys of YOIs**  
**and with those from the previous survey**

In this table summary statistics from HMYOI Cookham Wood 2019 are compared with the following HMIP survey data:

- Summary statistics from the most recent surveys of all other establishments holding children surveyed since October 2018 (8 establishments).
- Summary statistics from most recent surveys of all other Young Offender Institutions (5 establishments).
- Summary statistics from HMYOI Cookham Wood in 2019 are compared with those from HMYOI Cookham Wood in 2018.

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**Number of completed questionnaires returned**

*n=number of valid responses to question (HMYOI Cookham Wood 2019)*

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			HMP YOI Cookham Wood	All responses by children	HMP YOI Cookham Wood	All other YOIs	Cookham Wood 2019	Cookham Wood 2018
1.2	Are you under 15 years of age?	<i>n=119</i>	1%	2%	1%	1%	1%	0%
	Are you aged 18 or over?	<i>n=119</i>	19%	9%	19%	9%	19%	16%
1.4	Are you from a minority ethnic group?	<i>n=120</i>	67%	52%	67%	50%	67%	60%
1.5	Do you have any children?	<i>n=116</i>	4%	10%	4%	10%	4%	10%
1.6	Are you from a traveller community?	<i>n=117</i>	5%	10%	5%	9%	5%	7%
1.7	Have you ever been in local authority care?	<i>n=119</i>	53%	54%	53%	54%	53%	52%
5.2	Do you have any health problems (including mental health problems)?	<i>n=117</i>	23%	36%	23%	36%	23%	32%
5.4	Do you have a disability? This includes any physical, mental or learning needs that affect your day-to-day life.	<i>n=118</i>	22%	29%	22%	28%	22%	15%
10.1	Are you Muslim?	<i>n=111</i>	20%	19%	20%	19%	20%	22%
<b>ARRIVAL AND INDUCTION</b>								
2.1	Were you searched in reception/admissions?	<i>n=118</i>	94%	95%	94%	95%	94%	98%
<i>For those who had been searched:</i>								
2.1	Was this search done in a respectful way?	<i>n=111</i>	67%	70%	67%	70%	67%	64%
2.2	Overall, were you treated well in reception/admission?	<i>n=119</i>	67%	70%	67%	70%	67%	71%
2.3	When you first arrived, did you have any problems or worries?	<i>n=117</i>	76%	71%	76%	70%	76%	73%
<i>For those who had any problems when they first arrived:</i>								
2.3	Did staff help you to deal with these problems or worries?	<i>n=89</i>	39%	51%	39%	47%	39%	52%
2.4	Did you feel safe on your first night here?	<i>n=119</i>	70%	74%	70%	73%	70%	70%
2.5	In your first few days, were you told everything you needed to know about life here?	<i>n=120</i>	42%	58%	42%	54%	42%	63%
<b>LIVING CONDITIONS</b>								
3.1	Is the temperature of your room or cell about right?	<i>n=103</i>	49%	42%	49%	42%	49%	37%
3.2	Can you shower everyday?	<i>n=118</i>	93%	56%	93%	47%	93%	98%
3.3	Do you normally have enough clean, suitable clothes for the week?	<i>n=118</i>	68%	70%	68%	66%	68%	70%
3.4	Do you have clean sheets every week?	<i>n=119</i>	78%	77%	78%	77%	78%	82%
3.5	Can you get to your stored property if you need it?	<i>n=119</i>	37%	54%	37%	51%	37%	45%
3.6	Is it normally quiet enough for you to relax or sleep at night?	<i>n=113</i>	34%	50%	34%	48%	34%	41%
3.7	Do you usually spend more than 2 hours out of your cell or room on weekdays?	<i>n=118</i>	68%	78%	68%	74%	68%	72%
3.8	Do you usually spend more than 2 hours out of your cell or room on Saturdays and Sundays?	<i>n=119</i>	17%	43%	17%	30%	17%	24%

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Number of completed questionnaires returned

HMP YOI Cookham Wood	All responses by children	HMP YOI Cookham Wood	All other YOIs	Cookham Wood 2019	Cookham Wood 2018
121	550	121	436	121	126

n=number of valid responses to question (HMYOI Cookham Wood 2019)

FOOD AND CANTEEN								
4.1	Is the food here very / quite good?	n=115	33%	28%	33%	29%	33%	50%
4.2	Do you get enough to eat at mealtimes always / most of the time?	n=120	39%	37%	39%	38%	39%	38%
4.3	Does the shop / canteen sell the things that you need?	n=113	74%	50%	74%	55%	74%	79%
HEALTH AND WELL-BEING								
5.1	Is it easy to see:							
	- Doctor?	n=118	30%	38%	30%	38%	30%	48%
	- Nurse?	n=116	48%	59%	48%	58%	48%	66%
	- Dentist?	n=117	15%	25%	15%	22%	15%	30%
	- Mental health worker?	n=116	38%	42%	38%	42%	38%	58%
5.2	Do you have any health problems (including mental health problems)?	n=117	23%	36%	23%	36%	23%	32%
For those who have health problems:								
5.3	Have you been helped with your health problems since you have been here?	n=26	62%	58%	62%	58%	62%	82%
5.4	Do you have a disability? This includes any physical, mental or learning needs that affect your day-to-day life.	n=118	22%	29%	22%	28%	22%	15%
For those who have a disability								
5.5	Are you getting the support you need?	n=24	25%	49%	25%	46%	25%	77%
5.6	Did you have an alcohol problem when you came here?	n=120	2%	8%	2%	8%	2%	5%
5.7	Did you have a drug problem when you came here?	n=118	14%	27%	14%	29%	14%	14%
For those who did have a drug or alcohol problem								
5.8	Have you been helped with your drug or alcohol problem since you've been here?	n=17	41%	52%	41%	55%	41%	60%
5.9	Can you spend time outside in the fresh air most days (not counting time spent going to and from activities)?	n=119	45%	48%	45%	48%	45%	59%
5.10	Do you go to the gym or play sports once a week or more?	n=111	15%	54%	15%	52%	15%	33%
COMPLAINTS								
6.1	Do you know how to make a complaint?	n=116	70%	88%	70%	87%	70%	86%
For those who have made a complaint:								
6.2	Were your complaints usually dealt with fairly?	n=45	22%	35%	22%	33%	22%	33%
	Were your complaints usually dealt with within 7 days?	n=45	16%	32%	16%	29%	16%	32%
6.3	Have you ever felt too scared to make a complaint?	n=78	9%	16%	9%	18%	9%	9%

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Number of completed questionnaires returned

*n*=number of valid responses to question (HMYOI Cookham Wood 2019)

HMP YOI Cookham Wood	All responses by children	HMP YOI Cookham Wood	All other YOIs	Cookham Wood 2019	Cookham Wood 2018
121	550	121	436	121	126

SAFETY AND SECURITY								
7.1	Have you ever felt unsafe here?	<i>n</i> =114	39%	36%	39%	39%	39%	31%
7.2	Do you feel unsafe now?	<i>n</i> =115	11%	14%	11%	15%	11%	10%
7.4	Is your emergency call bell or intercom normally answered within 5 minutes?	<i>n</i> =114	13%	31%	13%	24%	13%	25%
7.5	Have other young people here ever done any of the following to you?							
	- Verbal abuse?	<i>n</i> =103	36%	44%	36%	44%	36%	45%
	- Threats or intimidation?	<i>n</i> =103	22%	34%	22%	33%	22%	25%
	- Physical assault?	<i>n</i> =103	24%	29%	24%	28%	24%	22%
	- Sexual assault?	<i>n</i> =103	0%	3%	0%	2%	0%	0%
	- Being forced to assault another young person?	<i>n</i> =103	10%	7%	10%	6%	10%	8%
	- Theft of canteen or property?	<i>n</i> =103	6%	7%	6%	5%	6%	4%
	- Other bullying or victimisation?	<i>n</i> =103	8%	8%	8%	8%	8%	2%
	- Young people here have not done any of these things to me	<i>n</i> =103	52%	50%	52%	50%	52%	54%
7.6	If you were being bullied / victimised by other young people here, would you report it?	<i>n</i> =97	28%	33%	28%	30%	28%	33%
7.7	Have staff here ever done any of the following to you?							
	- Verbal abuse?	<i>n</i> =103	30%	35%	30%	38%	30%	33%
	- Threats or intimidation?	<i>n</i> =103	14%	23%	14%	25%	14%	21%
	- Physical assault?	<i>n</i> =103	12%	15%	12%	17%	12%	12%
	- Sexual assault?	<i>n</i> =103	1%	2%	1%	1%	1%	3%
	- Theft of canteen or property?	<i>n</i> =103	11%	10%	11%	12%	11%	4%
	- Other bullying / victimisation?	<i>n</i> =103	10%	10%	10%	11%	10%	5%
	- Staff here have not done any of these things to me	<i>n</i> =103	63%	56%	63%	53%	63%	59%
7.8	If you were being bullied / victimised by staff here, would you report it?	<i>n</i> =99	58%	53%	58%	54%	58%	63%
BEHAVIOUR MANAGEMENT								
8.1	Do the rewards or incentives for good behaviour encourage you to behave well?	<i>n</i> =114	34%	35%	34%	36%	34%	53%
8.2	Do you think the system of rewards or incentives is fair?	<i>n</i> =114	20%	30%	20%	31%	20%	45%
8.3	Do staff usually let you know when your behaviour is good?	<i>n</i> =111	25%	45%	25%	40%	25%	38%
8.4	If you get in trouble, do staff usually explain what you have done wrong?	<i>n</i> =93	56%	60%	56%	59%	56%	67%
8.5	Have you been physically restrained (e.g. MMPR) since you have been here?	<i>n</i> =115	68%	65%	68%	65%	68%	66%
	<i>For those who have been restrained:</i>							
8.6	Did a member of staff come and talk to you about it afterwards?	<i>n</i> =77	66%	64%	66%	64%	66%	71%
8.7	Since you have been here, have you ever been kept locked up and stopped from mixing with other young people as a punishment? (This might include time spent in a segregation unit or in your own room)	<i>n</i> =116	55%	63%	55%	64%	55%	54%

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Number of completed questionnaires returned

n=number of valid responses to question (HMYOI Cookham Wood 2019)

		HMP YOI Cookham Wood	All responses by children	HMP YOI Cookham Wood	All other YOIs	Cookham Wood 2019	Cookham Wood 2018	
		121	550	121	436	121	126	
<b>STAFF</b>								
9.1	Do you feel cared for by most staff here?	n=112	40%	45%	40%	41%	40%	42%
9.2	Do most staff here treat you with respect?	n=110	61%	69%	61%	64%	61%	72%
9.3	If you had a problem, are there any staff here you could turn to for help?	n=111	69%	68%	69%	64%	69%	72%
9.4	Can you speak to a Barnardo's advocate when you need to?	n=114	59%	67%	59%	67%	59%	78%
<b>FAITH</b>								
10.1	Do you have a religion?	n=111	77%	65%	77%	65%	77%	76%
<i>For those who have a religion:</i>								
10.2	Are your religious beliefs respected here?	n=86	79%	77%	79%	76%	79%	84%
10.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	n=84	61%	74%	61%	73%	61%	72%
<b>KEEPING IN TOUCH WITH FAMILY AND FRIENDS</b>								
11.1	Has anyone here helped you to keep in touch with your family / friends?	n=112	62%	63%	62%	58%	62%	68%
11.2	Are you able to use a phone every day (if you have credit)?	n=111	96%	60%	96%	53%	96%	95%
11.3	Is it quite / very easy for your family and friends to get here?	n=113	37%	37%	37%	36%	37%	40%
11.4	Do you get visits from family or friends?	n=112	81%	78%	81%	76%	81%	84%
<i>For those who do get visits:</i>								
11.4	Do you get visits from family or friends once a week or more?	n=91	51%	45%	51%	43%	51%	55%
<b>EDUCATION AND TRAINING</b>								
12.1	Are you doing any of the following activities at the moment:							
	- Education?	n=111	86%	85%	86%	84%	86%	87%
	- Training for a job (vocational training)?	n=111	4%	8%	4%	6%	4%	2%
	- Paid work?	n=111	5%	6%	5%	6%	5%	8%
	- Interventions (e.g. offending behaviour programmes)?	n=111	15%	16%	15%	15%	15%	24%
	- Not doing any of these activities	n=111	14%	11%	14%	13%	14%	12%
12.2	Do staff encourage you to attend education, training or work?	n=108	56%	68%	56%	63%	56%	68%
12.3	Have you learned anything here that will help you when you are released (e.g. education or skills)?	n=111	53%	51%	53%	48%	53%	54%
<b>PREPARING TO MOVE ON</b>								
13.1	Is there a plan that you discuss in meetings with your YOT worker which sets out what you need to work on while you are here (e.g. your targets or objectives)?	n=113	50%	63%	50%	65%	50%	61%
<i>For those who do have a plan:</i>								
13.2	Do you understand what you need to do to achieve your objectives or targets?	n=50	82%	93%	82%	93%	82%	94%
13.3	Are staff here supporting you to achieve your objectives or targets?	n=49	35%	53%	35%	47%	35%	59%
13.4	Is anybody here helping you to prepare for when you leave?	n=113	23%	41%	23%	38%	23%	38%
13.5	Have you had a say in what will happen to you when you leave here?	n=107	32%	45%	32%	44%	32%	44%
<b>FINAL QUESTIONS ABOUT THIS STC/YOI</b>								
14.1	Do you think your experiences here have made you less likely to offend in the future?	n=107	64%	54%	64%	52%	64%	60%



## HMYOI Cookham Wood 2019

### Comparison of survey responses from different residential locations

In this table responses from the Enhanced wing (B3) and the Resettlement wing (Cedar) are compared with those from the rest of the establishment.

Shading is used to indicate statistical significance\*, as follows:

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Number of completed questionnaires returned

B3 and Cedar	Rest of the establishment
34	85

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 15 years of age?	3%	0%
	Are you aged 18 or over?	18%	19%
1.4	Are you from a minority ethnic group?	53%	71%
1.5	Do you have any children?	6%	4%
1.6	Are you from a traveller community?	3%	6%
1.7	Have you ever been in local authority care?	41%	57%
5.2	Do you have any health problems (including mental health problems)?	24%	24%
5.4	Do you have a disability? This includes any physical, mental or learning needs that affect your day-to-day life.	9%	28%
10.1	Are you Muslim?	13%	22%
ARRIVAL AND INDUCTION			
2.1	Were you searched in reception/admissions?	94%	94%
<i>For those who had been searched:</i>			
2.1	Was this search done in a respectful way?	71%	65%
2.2	Overall, were you treated well in reception/admission?	70%	67%
2.3	When you first arrived, did you have any problems or worries?	88%	72%
<i>For those who had any problems when they first arrived:</i>			
2.3	Did staff help you to deal with these problems or worries?	46%	37%
2.4	Did you feel safe on your first night here?	58%	74%
2.5	In your first few days, were you told everything you needed to know about life here?	32%	45%
LIVING CONDITIONS			
3.1	Is the temperature of your room or cell about right?	56%	46%
3.2	Can you shower everyday?	94%	93%
3.3	Do you normally have enough clean, suitable clothes for the week?	70%	68%
3.4	Do you have clean sheets every week?	88%	74%
3.5	Can you get to your stored property if you need it?	61%	27%
3.6	Is it normally quiet enough for you to relax or sleep at night?	44%	30%
3.7	Do you usually spend more than 2 hours out of your cell or room on weekdays?	91%	58%
3.8	Do you usually spend more than 2 hours out of your cell or room on Saturdays and Sundays?	52%	4%

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<b>B3 and Cedar</b>	<b>Rest of the establishment</b>
<b>34</b>	<b>85</b>

Number of completed questionnaires returned

<b>FOOD AND CANTEEN</b>			
4.1	Is the food here very / quite good?	<b>46%</b>	<b>28%</b>
4.2	Do you get enough to eat at mealtimes always / most of the time?	<b>56%</b>	<b>33%</b>
4.3	Does the shop / canteen sell the things that you need?	<b>77%</b>	<b>73%</b>
<b>HEALTH AND WELL-BEING</b>			
5.1	Is it easy to see:		
	- Doctor?	<b>39%</b>	<b>27%</b>
	- Nurse?	<b>56%</b>	<b>46%</b>
	- Dentist?	<b>28%</b>	<b>10%</b>
	- Mental health worker?	<b>63%</b>	<b>29%</b>
5.2	Do you have any health problems (including mental health problems)?	<b>24%</b>	<b>24%</b>
<i>For those who have health problems:</i>			
5.3	Have you been helped with your health problems since you have been here?	<b>43%</b>	<b>68%</b>
5.4	Do you have a disability? This includes any physical, mental or learning needs that affect your day-to-day life.	<b>9%</b>	<b>28%</b>
<i>For those who have a disability</i>			
5.5	Are you getting the support you need?	<b>33%</b>	<b>24%</b>
5.6	Did you have an alcohol problem when you came here?	<b>6%</b>	<b>0%</b>
5.7	Did you have a drug problem when you came here?	<b>15%</b>	<b>15%</b>
<i>For those who did have a drug or alcohol problem</i>			
5.8	Have you been helped with your drug or alcohol problem since you've been here?	<b>40%</b>	<b>42%</b>
5.9	Can you spend time outside in the fresh air most days (not counting time spent going to and from activities)?	<b>73%</b>	<b>33%</b>
5.10	Do you go to the gym or play sports once a week or more?	<b>34%</b>	<b>8%</b>
<b>COMPLAINTS</b>			
6.1	Do you know how to make a complaint?	<b>79%</b>	<b>67%</b>
<i>For those who have made a complaint:</i>			
6.2	Were your complaints usually dealt with fairly?	<b>31%</b>	<b>17%</b>
	Were your complaints usually dealt with within 7 days?	<b>13%</b>	<b>17%</b>
6.3	Have you ever felt too scared to make a complaint?	<b>4%</b>	<b>11%</b>

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	Green shading shows results that are significantly more positive than the comparator
	Blue shading shows results that are significantly more negative than the comparator
	Orange shading shows significant differences in demographics and background information
	No shading means that differences are not significant and may have occurred by chance
	Grey shading indicates that we have no valid data for this question

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<b>SAFETY AND SECURITY</b>			
7.1	Have you ever felt unsafe here?	<b>39%</b>	<b>39%</b>
7.2	Do you feel unsafe now?	<b>6%</b>	<b>14%</b>
7.4	Is your emergency call bell or intercom normally answered within 5 minutes?	<b>31%</b>	<b>6%</b>
7.5	Have other young people here ever done any of the following to you?		
	- Verbal abuse?	<b>40%</b>	<b>35%</b>
	- Threats or intimidation?	<b>27%</b>	<b>21%</b>
	- Physical assault?	<b>20%</b>	<b>27%</b>
	- Sexual assault?	<b>0%</b>	<b>0%</b>
	- Being forced to assault another young person?	<b>7%</b>	<b>11%</b>
	- Theft of canteen or property?	<b>7%</b>	<b>6%</b>
	- Other bullying or victimisation?	<b>13%</b>	<b>6%</b>
	- Young people here have not done any of these things to me	<b>43%</b>	<b>55%</b>
7.6	If you were being bullied / victimised by other young people here, would you report it?	<b>36%</b>	<b>25%</b>
7.7	Have staff here ever done any of the following to you?		
	- Verbal abuse?	<b>31%</b>	<b>29%</b>
	- Threats or intimidation?	<b>8%</b>	<b>16%</b>
	- Physical assault?	<b>8%</b>	<b>13%</b>
	- Sexual assault?	<b>0%</b>	<b>1%</b>
	- Theft of canteen or property?	<b>4%</b>	<b>13%</b>
	- Other bullying / victimisation?	<b>8%</b>	<b>11%</b>
	- Staff here have not done any of these things to me	<b>65%</b>	<b>63%</b>
7.8	If you were being bullied / victimised by staff here, would you report it?	<b>70%</b>	<b>53%</b>
<b>BEHAVIOUR MANAGEMENT</b>			
8.1	Do the rewards or incentives for good behaviour encourage you to behave well?	<b>32%</b>	<b>36%</b>
8.2	Do you think the system of rewards or incentives is fair?	<b>23%</b>	<b>20%</b>
8.3	Do staff usually let you know when your behaviour is good?	<b>38%</b>	<b>21%</b>
8.4	If you get in trouble, do staff usually explain what you have done wrong?	<b>63%</b>	<b>55%</b>
8.5	Have you been physically restrained (e.g. MMPR) since you have been here?	<b>58%</b>	<b>71%</b>
	<i>For those who have been restrained:</i>		
8.6	Did a member of staff come and talk to you about it afterwards?	<b>68%</b>	<b>66%</b>
8.7	Since you have been here, have you ever been kept locked up and stopped from mixing with other young people as a punishment? (This might include time spent in a segregation unit or in your own room)	<b>47%</b>	<b>60%</b>

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<b>STAFF</b>			
9.1	Do you feel cared for by most staff here?	47%	39%
9.2	Do most staff here treat you with respect?	58%	62%
9.3	If you had a problem, are there any staff here you could turn to for help?	84%	63%
9.4	Can you speak to a Barnardo's advocate when you need to?	69%	54%
<b>FAITH</b>			
10.1	Do you have a religion?	68%	80%
<i>For those who have a religion:</i>			
10.2	Are your religious beliefs respected here?	86%	77%
10.3	Are you able to speak to a Chaplain of your faith in private, if you want to?	67%	60%
<b>KEEPING IN TOUCH WITH FAMILY AND FRIENDS</b>			
11.1	Has anyone here helped you to keep in touch with your family / friends?	68%	59%
11.2	Are you able to use a phone every day (if you have credit)?	97%	96%
11.3	Is it quite / very easy for your family and friends to get here?	52%	33%
11.4	Do you get visits from family or friends?	94%	76%
<i>For those who do get visits:</i>			
11.4	Do you get visits from family or friends once a week or more?	59%	48%
<b>EDUCATION AND TRAINING</b>			
12.1	Are you doing any of the following activities at the moment:		
	- Education?	97%	81%
	- Training for a job (vocational training)?	10%	1%
	- Paid work?	16%	0%
	- Interventions (e.g. offending behaviour programmes)?	7%	19%
	- Not doing any of these activities	3%	19%
12.2	Do staff encourage you to attend education, training or work?	72%	51%
12.3	Have you learned anything here that will help you when you are released (e.g. education or skills)?	77%	45%
<b>PREPARING TO MOVE ON</b>			
13.1	Is there a plan that you discuss in meetings with your YOT worker which sets out what you need to work on while you are here (e.g. your targets or objectives)?	61%	45%
<i>For those who do have a plan:</i>			
13.2	Do you understand what you need to do to achieve your objectives or targets?	88%	84%
13.3	Are staff here supporting you to achieve your objectives or targets?	50%	29%
13.4	Is anybody here helping you to prepare for when you leave?	45%	15%
13.5	Have you had a say in what will happen to you when you leave here?	33%	31%
<b>FINAL QUESTIONS ABOUT THIS STC/YOI</b>			
14.1	Do you think your experiences here have made you less likely to offend in the future?	58%	65%