COUNCIL OF EUROPE

CONSEIL DE L'EUROPE

CPT/Inf (2020) 18

Report

to the United Kingdom Government on the visit to the United Kingdom carried out by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT)

from 13 to 23 May 2019

The Government of the United Kingdom has requested the publication of this report and of its response. The Government's response is set out in document CPT/Inf (2020) 19.

Strasbourg, 30 April 2020

CONTENTS

EXECUTIVE SUMMARY

In May 2019, the CPT carried out a targeted follow-up visit to England to focus on the persistently high levels of violence in the adult and juvenile prison estates, as well as on broader concerns regarding regimes, the use of force, segregation and means of restraint. The visit follows up on serious concerns raised during the CPT's April 2016 periodic visit to the United Kingdom; notably, the lack of safety for inmates and staff in prisons in England, prison violence spiralling out of control, poor regimes and chronic overcrowding.

The co-operation received by the CPT's delegation from the authorities of the United Kingdom, as well as from the management and staff in the establishments visited, was excellent.

Preliminary remarks

In the report on the 2019 visit, the CPT notes that various elements of the 2016 prison reform programme have progressed. There is now a clear acknowledgement at the highest political level that the lack of safety in prisons and the persistently high levels of violence are unacceptable and urgently need to be tackled. Concrete reforms have begun, including the recruitment of over 3,000 front-line operational staff, the improvement of violence monitoring metrics in prisons, the nomination of individual prison officers as "key workers" for inmates, the progressive roll-out of body-worn video cameras and additional and improved drug testing. Work has also begun to structurally overhaul and reconceptualise the youth justice detention framework.

Nevertheless, the ineluctable fact remains that the prison system is in deep crisis. During the 2019 visit, the CPT's delegation found that the local male prisons visited remained violent, unsafe and overcrowded, with many inmates enduring restricted and isolating regimes and/or long periods of segregation. A similar state of affairs was also found in the two young offender institutions visited.

Male adult prisons

The CPT's delegation focussed on three forms of violence prevalent in the local male adult prisons visited (Doncaster, Liverpool and Wormwood Scrubs), namely, inter-prisoner violence, prisoner-on-staff assaults and staff-on-prisoner violence. Levels of violence - in all forms - had reached "record highs" and the CPT found that none of the establishments visited could be considered safe.

At the time of the visit, the latest available official figures suggested that there could have been a slight dip in the scale and extent of recorded *inter-prisoner violence* in English prisons. Regrettably, it has since emerged that this was not the beginning of a trend. In July 2019, the most recent official figures were of serious concern to the CPT. There were a record-breaking 34,425 recorded inter-prisoner assault incidents in the 12 months to March 2019, up 11% from the previous year; many of these were of an alarmingly severe nature and were evident at the three prisons visited. Equally, *prisoner-on-staff violence* had increased by 15% from the previous year, reaching a deplorable new record. Worryingly, serious assaults had increased significantly. In each of the three prisons visited by the CPT's delegation, there had been recent serious attacks by prisoners on staff and on other inmates, resulting in severe injuries and hospitalisation. The CPT recommends that far greater investment be made in preventing these forms of violence at the three prisons visited and across the wider prison estate. It recommends that specific measures be taken around monitoring, effective management, anti-violence interventions, staff numbers, training and accountability procedures in order to halt and reverse the high levels of violence and fully to respect the duty of care owed by the authorities to all persons living and working within prisons.

Lastly, a new and deeply concerning finding was the infliction of unjustified *violence by staff on prisoners* in two of the three prisons visited, namely Liverpool and Wormwood Scrubs. Of utmost concern was the evolution of an informal practice of "preventive strikes" (i.e., "preventively" punching compliant prisoners whom staff perceived might, at some point in the future, become a threat). The CPT recommends that the United Kingdom authorities explicitly prohibit the reprehensible practice of "preventive strikes" by prison officers on inmates and, more generally, undertake a proper investigation into all allegations of ill-treatment and ensure that prison staff understand why ill-treatment is unlawful and will result in severe disciplinary sanctions or criminal prosecution.

The lack of safety in prisons appears to have generated a climate of fear, where staff and inmates justifiably feel at risk of violence. As counter measures, the authorities had established, *inter alia*, violence monitoring metrics, senior leadership support programmes and various anti-violence initiatives. However, violence levels remained persistently high and were gradually increasing. Hence, the CPT's delegation focused on the operation in practice of safeguards and systems designed to hold staff to account, including: complaints processes, use of force recording and reporting, internal investigations and their interface with the criminal law. The CPT's delegation found that many accountability procedures remained underdeveloped, including the existing reporting procedures, oversight and governance systems to monitor and tackle violence by staff. Notably, the complaints' system needs to be reviewed and reformed to ensure its procedural effectiveness, fairness and transparency. The shortcomings in the formal recording processes of violent incidents at Liverpool and Wormwood Scrubs Prisons should be remedied and the quality of use of force recording enhanced. The quality of internal prison investigations should also be improved, and the current instructions on the use of Body Worn Video Cameras (BWVCs) bolstered to make the use of this technology mandatory during every interaction involving the use of force by prison staff on inmates.

Prisoner aggression or violence towards staff had risen considerably since 2016 and the stress of the threat of such violence was tangible in the establishments visited by the CPT's delegation, albeit to differing degrees. Many staff were working under immense pressure, in challenging circumstances. Notwithstanding a recruitment drive to engage 3,000 new prison officers since 2016, the retention rate remained an issue of concern. Despite clear efforts made to recruit, deploy and retain new operational custodial staff in each of the three prisons visited, the actual numbers of staff in direct contact with prisoners in accommodation areas had not changed significantly since 2016. The CPT recommends that the UK authorities bolster the retention of newly-recruited and freshly-trained front-line custodial staff, including through extending the initial training and providing regular refresher courses and adequate psychological support and remuneration. At all three prisons visited, an adequate allocation of experienced staff numbers should be ensured to boost safety on the wings and staff must be provided with the requisite skills to challenge unlawful behaviour and help prisoners in crisis.

As for the conditions of detention and prisoners' regime, notwithstanding work underway at the time of the visit, the CPT recommends that deep-cleaning and refurbishment be carried out on an ongoing basis at both Liverpool and Wormwood Scrubs Prisons. That said, more generally, the CPT agrees with the recent findings by the House of Commons Justice Committee that constantly ploughing money into Victorian-era prisons for an ever-increasing prison population does not constitute smart justice. At the same time, the CPT reiterates its warning of the risks of investing in very large prisons and instead recommends that consideration be given to investing in smaller community-facing prisons. Turning to regimes, while there have been improvements in the out-of-cell time for employed prisoners at each prison visited, inmates who were unemployed were spending 21 to 23 hours confined to their cells every day and the CPT recommends that they be offered much more out-of-cell time (i.e. at least eight hours per day), along with a range of purposeful activities. Further, the CPT reiterates that all prisoners be offered a minimum of one hour of outside exercise every day.

The CPT's delegation found that the disciplinary procedures in the prisons visited were generally fair. However, it had a number of concerns over segregation of prisoners for long periods of time (22 or more hours or more per day in-cell) for security or good order reasons. To address the harm caused by prolonged solitary confinement, the CPT considers that prisoners held in segregation units for longer than two weeks should be offered structured purposeful out-of-cell activities and meaningful human contact for at least two hours every day with staff and/or other risk-assessed prisoners. Further, a psycho-social support system should be established in each prison to assist prisoners held in segregation units for prolonged periods to transition back into ordinary accommodation units.

The CPT's delegation found that some aspects of the health-care provision in the prisons visited functioned adequately, such as the screening of new arrivals by nurses. However, other aspects need to be strengthened, including providing additional GPs at Doncaster and Wormwood Scrubs Prisons, better documentation of injuries, and improving medical confidentiality. In the three prisons visited, high numbers of prisoners suffered from mental health disorders and a considerable number of prisoners had self-harmed, some severely, in the past year. The CPT's delegation met several persons suffering from severe mental health disorders who were being held in a segregation unit rather than being treated in an appropriate hospital environment. It also noted delays in transfers to hospitals and shortcomings in the ACCT (self-harm prevention) procedure. The CPT recommends that a series of measures be taken to ensure that the self-harm and suicide prevention strategies in prisons are made more effective. Equally, the alarmingly high levels of substance use in prisons were of deep concern to the CPT, with drug-taking omnipresent in the establishments visited. The CPT recommends that additional resources be allocated to ensuring that the 2019 Prisons Drugs Strategy is more effectively implemented in all prisons in England and Wales. Further, the Drugs Strategy should be complemented by other measures, such as ensuring adequate ratios of properly trained staff who are empowered to systematically identify and challenge drug use by prisoners, the establishment of drug free units and a full regime of purposeful activities for prisoners.

The CPT's 2019 visit findings reinforce sustained criticism by civil society, Parliamentary Committees and Her Majesty's Inspector of Prisons regarding the overall lack of safety of the male adult prison estate. The CPT recognises that the measures taken by the authorities to date, as outlined in the report, represent a positive start but they remain insufficient to address the root causes of the current prison crisis. Deeper, more comprehensive, effective and adequately financed reforms that are sustainable in the long term are still urgently required.

Juvenile detention

The CPT's delegation examined the conditions of detention of young persons placed in two of the three types of establishments which make up the youth secure estate in England and Wales, namely Feltham A and Cookham Wood Young Offenders Institutions (YOI) and Rainsbrook Secure Training Centre (STC).

In all the establishments visited, the situation had become increasingly insecure over recent years, and this reflected a general increase of violence recorded throughout the youth estate between 2016 and 2019. Assaults both on staff members and on other young persons had risen by 10% at Cookham Wood and had more than doubled at Feltham A and at Rainsbrook. This state of affairs was generally acknowledged, with violent episodes monitored and trends analysed; however, to date, efforts to contain and reduce levels of violence had not yielded significant results. The CPT delegation's assessment was that, in the establishments visited, episodes of violence were being tackled by a very frequent resort to the use of force and restrictions on the movements of the young persons which, in the case of the YOIs, came at the expense of an acceptable regime for juveniles.

Breaking this cycle requires inter alia radically reducing the number of young persons held on each unit. Further, the management of passive non-compliance where there is no threat of violence or harm to self or others should be reviewed to avoid young persons being subjected to forceful restraint measures as observed by the CPT's delegation.

Despite the rolling out of a policy aiming to minimise physical restraint (MMPR), resort to physical force was widespread in all three institutions visited. In all three, allegations of use of excessive force had been recorded and referred to investigating bodies. An examination of the relevant documentation revealed a number of gaps in the procedural safeguards surrounding the use of force, and investigations were often inconclusive due to lack of evidence; a situation requiring immediate remedial measures, including the more systematic use of body-worn cameras. On some occasions, custodial officers had resorted to (lawful) pain-inducing techniques in order to control young persons. On that point the CPT recalls that such techniques should be abolished in law and practice in line with the opinion of the UK Parliament's Joint Committee on Human Rights, based on medical evidence they inflict physical distress and psychological harm in the short and longer term.

Another guiding principle for managing violence (both for preventing it and addressing it) was to limit interactions between young persons who were identified as potential rivals or who had been involved in violent incidents. At Rainsbrook STC, this could be handled without impacting the entire group of young persons, as both the population and unit size were considerably smaller and staff resources sufficient to adequately support individuals, including those who needed to be temporarily separated from the mainstream population. Further, young persons accommodated in STCs could not be legally isolated for more than short periods of time and alternatives were found. By contrast, in the YOIs, "mixing issues" had become perhaps the determining element in organising life within the institutions, creating severe dysfunctionalities. Large-size units, low ratios of staff to young persons, combined with an impractical infrastructure rendered it impossible to meet everyone's (most basic) needs. Young persons who were separated or segregated from the rest of the population were most often deprived of activities, subject to a very impoverished regime, sometimes akin to solitary confinement, and for prolonged periods. This remained true despite real efforts developed to cater for the most complex individuals and provide them with enhanced support in special-needs units. But even the young persons who were not directly affected by mixing or other security-related restrictions benefited only from a curtailed regime; their access to education, sports or health care being severely restricted. Significantly, during weekends, all the young persons in the YOIs were left idle and locked up for the most part of the day.

The regime implemented at Rainsbrook STC was much more favourable; young persons were out of their rooms and associated with others throughout the day. However, the CPT's delegation found once again that in all the juvenile establishments visited entitlements to outdoor exercise were totally insufficient, with only half an hour per day offered. The CPT considers that this should be increased to two hours per day.

The CPT delegation's findings - that part of the youth secure estate does not ensure safe custody nor, as regards the YOIs, provide a decent regime - calls for a rethink of the way in which juvenile detention is delivered. To this end, the information provided by the Ministry of Justice and Youth Custody Service regarding a new approach towards juvenile detention, based upon a socio-educative model of secure schools, is welcome. Indeed, the CPT considers that smaller institutions with a socio-educative welfare approach are better suited to respond to the complex needs of juveniles in custody. The CPT delegation's findings, particularly those concerning the YOIs visited, where the levels of violence were alarmingly high, make it more imperative than ever to promote an alternative approach along the lines advocated by the CPT.

Nevertheless, a number of questions remain unanswered to date regarding the rolling out of the new model secure school and the future of the youth secure estate, such as the staffing ratio; the profile of the staff; the size of living units and the timetable. At the same time, it is clear that departing from the current system of juvenile detention, notably the YOIs, will require considerable investment and a new conceptual approach which cannot be implemented overnight. In the meantime, urgent measures are needed, especially in respect of YOIs, to bring down the levels of violence, to create a safe environment and to offer young persons a meaningful regime and support for re-entering the community. To this end, the report lays out a series of recommendations to improve the living conditions and regime, enhance the standard of health care, promote better contacts with the outside world and ensure that enhanced support units are fit for purpose. In addition, the CPT reiterates the importance of ensuring that YOIs have sufficient staffing numbers, that their initial and on-going training is extended and that they are provided with adequate psychological support and remuneration.

I. INTRODUCTION

A. The visit, the report and follow-up

1. In pursuance of Article 7 of the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (hereinafter referred to as "the Convention"), a delegation of the CPT carried out an ad hoc visit to the United Kingdom from 13 to 23 May 2019.[1] The focus of the visit was to follow up on the CPT's findings from the 7th periodic visit to the United Kingdom undertaken in 2016, and, specifically, to examine issues concerning violence, segregation, the use of force and means of restraint in local male prisons and juvenile detention establishments across England.

2. The visit was carried out by the following members of the CPT:

- Mark Kelly, 1st Vice President of the CPT (Head of delegation),
- Therese Rytter, 2nd Vice President of the CPT,
- Vânia Costa Ramos,
- Jari Pirjola, and
- Olivera Vulić.

They were supported by Hugh Chetwynd (Head of Division), Francesca Gordon and Aurélie Pasquier of the CPT's Secretariat, and assisted by the following experts: Eric Durand, Head of Clinic, Physical and Rehabilitation Medicine, Brugmann University Hospital, Brussels, Belgium and Celso José das Neves Manata, Deputy General Prosecutor and former Director General of Probation and Prisons Service of Portugal.

3. The list of penitentiary and juvenile detention establishments visited by the CPT's delegation can be found in Appendix I.

4. The report on the visit was adopted by the CPT at its 100th meeting, held from 4th to 8th November 2019, and transmitted to the authorities of the United Kingdom on 3 December 2019. The various recommendations, comments and requests for information made by the CPT are set out in bold type in the present report. The CPT requests the United Kingdom authorities to provide within four months a response containing a full account of action taken by them to implement the CPT's recommendations and replies to the comments and requests for information formulated in this report.

[1] This was the Committee's 14th ad hoc visit to the United Kingdom.

B. Consultations held by the delegation and co-operation encountered

5. In the course of the visit and, shortly thereafter, the delegation held consultations with the following Ministers and senior officials; the Lord Chancellor and Secretary of State for Justice, David Gauke, the Minister of State for Prisons and Probation, Robert Buckland and the Parliamentary Under Secretary of State, Edward Argar. It also met with the Chief Executive Officer of Her Majesty's Prisons and Probation Service (HMPPS), Jo Farrar, the Executive Director of Prisons, Phil Copple and the Executive Director of the Youth Custody Service, Helga Swidenbank, as well as with other senior officials from HMPPS, the Youth Custody Service and the Ministry of Justice.

In addition, the delegation met Peter Clarke, Her Majesty's Chief Inspector of Prisons, Sue McAllister, the Prisons and Probation Ombudsperson, Dame Anne Owers, National Chair of the Independent Monitoring Boards (IMBs) and John Wadham, Chair of the United Kingdom's National Preventive Mechanism against torture (NPM), as well as with representatives from the Office of the Children's Commissioner. It also met with representatives of the Independent Inquiry into Child Sexual Abuse, the Royal College of General Practitioners and the British Medical Association, as well as with representatives of non-governmental organisations active in areas of concern to the CPT.

Further, on 4 and 5 June 2019, the delegation held meetings with members of the House of Commons Justice Select Committee and of the Parliamentary Joint Committee on Human Rights. See Appendix II for a full list of the persons and organisations met.

6. The co-operation received by the CPT's delegation from the authorities of the United Kingdom, as well as from the management and staff in the establishments visited, was excellent. The delegation had rapid access to the places of detention visited, was able to meet in private with those persons with whom it wanted to speak and was provided with access to the information it required to carry out its task. The CPT is also appreciative of the support provided by the Ministry of Justice liaison team in London.

Nonetheless, the principle of co-operation set out in Article 3 of the Convention is not limited to steps taken to facilitate the task of visiting delegations. It also requires that decisive action be taken to improve the situation in the light of the CPT's key recommendations. In this respect, the CPT is concerned to note that little or no action has been taken in respect of certain recommendations made in previous reports, in particular as regards overcrowding in prisons, which has been a chronic feature of English prisons ever since the CPT raised the issue in its first visit to the United Kingdom in 1990 (see '*overcrowding*' Section 1(b)).

The CPT trusts that the United Kingdom authorities will take concrete measures to address the recommendations in this report, including as regards prison overcrowding, in accordance with the principle of co-operation set out in Article 3 of the Convention.

C. National Preventive Mechanism

7. The United Kingdom ratified the Optional Protocol to the United Nations Convention against Torture (OPCAT) in December 2003 and designated its National Preventive Mechanism (NPM) in March 2009. At the time of the delegation's visit, the NPM comprised 21 bodies, which together cover all places where persons are deprived of their liberty in the United Kingdom, and the majority of which have a wealth of monitoring experience dating back many years. The Chief Inspector of Prisons for England and Wales (HMIP) is tasked with co-ordinating the work of the NPM.

In England and Wales, these bodies include, *inter alia*, HMIP, which regularly inspects all prisons and young offender institutions across the country and the Independent Monitoring Boards (IMBs), which are present in every prison in England and Wales and which have a statutory duty to examine their administration and the treatment of prisoners. The Secure Training Centres are inspected jointly by HMIP and the Office for Standards in Education, Children's Services and Skills (Ofsted).

8. The CPT has long enjoyed very good co-operation with HMIP and other United Kingdom inspection bodies and, during the visit, the delegation met with several organisations that form part of the NPM. The CPT continues to pay close attention to wider discussions currently underway in the United Kingdom about the NPM's statutory basis, guarantees of independence and the need for sufficient resourcing of the NPM to ensure adequate compliance with the OPCAT. **It recommends that the authorities of the United Kingdom take such steps as may be necessary to ensure that the NPM is fully in compliance with OPCAT requirements, notably the requirement for statutory recognition of the NPM.**[2]

The CPT notes, in this regard, that 2019 has also seen a visit to the United Kingdom by its global counterpart prevention body, the United Nations Sub-Committee on the Prevention of Torture (SPT). In order to avoid any duplication, ensure coherence and enhance the effectiveness of the CPT and OPCAT mechanisms in the United Kingdom, **the CPT strongly encourages the United Kingdom authorities to make arrangements to ensure that the SPT, the CPT and the NPM are able to consult each other's visit reports, including reports to the State, even before their publication.**

In doing so, the United Kingdom authorities should also ensure that the present and all future CPT reports on visits to the United Kingdom following their transmission to the authorities, and the corresponding government responses, following their transmission to the CPT, are made available to the Sub-Committee and to the NPM, on the condition that these reports and responses are treated as confidential until publication.[3]

9. The CPT wishes to place on record its appreciation of the initiative taken by the United Kingdom authorities to invite members of the NPM to be present when the delegation delivered its preliminary observations at the end of the visit.

---

2 In line with the SPT's Guidelines on national preventive mechanisms, CAT/OP/12/5, 9 December 2010.

3 Reference is made, in this connection, to the 2018 decisions taken by the SPT and the CPT (see press release of 26 July 2018).

II. FACTS FOUND DURING THE VISIT AND ACTION PROPOSED

A. Adult prison establishments

1. Preliminary remarks

a. the state of the prison system of England and Wales

10. The CPT's report on the April 2016 periodic visit to the United Kingdom raised serious concerns over the lack of safety for inmates and staff in prisons in England; these included prison violence spiralling out of control, poor regimes and chronic overcrowding.[4] Three years on, in May 2019, the CPT carried out a targeted visit to England to focus primarily on the persistently high levels of violence in the adult and juvenile prison estates, as well as on broader concerns over use of segregation, quality of regimes, the use of force and means of restraint.

11. In its 2016 report, the CPT identified a crisis in the prison system of England and Wales, stemming from the cumulative effects of significant budgetary and staff cuts since 2010, lack of investment, a steadily rising prison population and the considerable increase in the in-flow and use of synthetic drugs in prisons. At that time, the CPT concluded that the duty of care to protect prisoners was not always being discharged, given the apparent lack of effective action to reduce the high levels of violence. The result of these systemic failings was that none of the establishments visited could be considered safe for prisoners or staff. It recommended that concrete measures be taken to bring prisons back under the effective control of staff, reversing the recent trends of escalating violence. The CPT stressed that taking resolute action to tackle the problem of violence in prisons in England and Wales was a prerequisite for the successful implementation of other elements of the authorities' reform agenda.[5]

12. Currently, it is clear that a number of elements in the reform programme set out in the White Paper of November 2016 have been progressed. Notably, there is now a clear acknowledgement at the highest political level that the lack of safety in prisons and the persistently high levels of violence in all its forms are unacceptable and urgently need to be tackled; equally, it is acknowledged that short-term imprisonment should be reduced, reoffending behaviour addressed, and sentencing policies revised.[6]

---

4 Report to the Government of the United Kingdom on the visit to the United Kingdom carried out by the CPT from 30 March to 12 April 2016, CPT/Inf (2017).

5 United Kingdom governmental White Paper on prison reform of November 2016.

6 Speeches from the former Lord Chancellor and Justice Secretary, David Gauke, on 'Beyond prison, redefining punishment', 18 February 2019 and 'From sentencing to incentives – how prisons can better protect the public from the effects of crime', 10 July 2018, Ministry of Justice.

At the time of the visit, the authorities met underlined their commitment to the continuation of the prison reform programme, notably the "Prison Estate Transformation Programme"[7] and the "10 Prisons Project"[8], initiating reform that targeted some of the core problematic areas, including drugs and violence. Over the last couple of years, the reform programme has invested around £40 million in "emergency funding" for increased security measures and renovations of English and Welsh prisons. Concrete reforms have begun, including the recruitment of over 3,000 front-line operational staff, the improvement of violence monitoring metrics in prisons, the closures of several Victorian-era prisons, the nomination of individual prison officers as "key workers" for inmates, more staff training, including on suicide awareness, the progressive roll-out of body-worn video cameras and additional and improved drug testing. Work has also begun to structurally overhaul and reconceptualise the youth justice detention framework.

The United Kingdom authorities have also started to discuss future reform plans, including the possibility of the abolition of short-term (6-month) custodial sentences and the need for wider public debate about the functioning of the criminal justice system and the need to target and reduce the "very high" reoffending rates. In sum, these represent a series of welcome developments and plans for the recovery of the prison system of England and Wales.

The CPT would like to request information from the United Kingdom authorities specifically pertaining to their proposals to reform sentencing policies and work towards the abolition of short-term sentencing in England and Wales.

13. Nevertheless, the ineluctable fact remains that the prison system remains in deep crisis. During its 2019 visit, the CPT's delegation found prisons that remained violent, unsafe and over-crowded, with many inmates enduring restricted and isolating regimes and/or long periods of segregation.

Depriving persons of their liberty carries with it a duty of care to protect them from those who may wish to cause them harm, including other prisoners. The delegation's findings during the 2019 visit indicate that this duty was often not being discharged in the establishments visited.

Violence levels had reached a "record high" in prisons[9] and the CPT's delegation found that none of the three establishments visited could be considered safe. These findings reinforce the sustained criticism by civil society, various Parliamentary Committees and HMIP[10] regarding the overall state of safety of the male adult prison estate.

---

7 This government initiative adopts a threefold approach: building new prisons to meet the Government's pledge to create 10,000 new prison places to replace old unsuitable accommodation; renovating the existing estate; reorganising the estate to better meet the needs of the prison population.

8 In 2018, a package of measures under this project was designed to lift standards at 10 of some of the most problematic prisons for drugs and violence, as a pilot for potential roll-out to the rest of the prisons estate. The ten prisons were: Hull, Humber, Isis, Leeds, Lindholme, Moorland, Wealstun, Nottingham, Ranby, and Wormwood Scrubs. The project focused on challenging violent and disruptive behaviour and to fight drugs. The project has now finished.

9 Safety in Custody Statistics, England and Wales: Deaths in Prison Custody to June 2019 Assaults and Self-harm to March 2019, Ministry of Justice, published 25 July 2019.

10 The House of Commons Justice Select Committee "Prison Population 2022: planning for the future" and HM Chief Inspector of Prisons for England and Wales, Annual Report 2018–19.

14. The CPT considers that the current environment in the adult male establishments visited remains fundamentally unsafe for both prisoners and staff. The duty of care of the State to protect prisoners in its custody is not being fully discharged. The measures referred to above represent a positive start but remain, in their current form, insufficient to address the root causes of the prison crisis. Deeper, more comprehensive, effective and adequately financed reforms that are sustainable in the long term are still urgently required.

15. In the CPT's view, the lack of safety in prisons appears to have triggered a climate of fear, where staff and inmates justifiably feel at risk of violence. Further, for a considerable number of prisoners, the regime was unacceptably poor. Many prisoners spent very long periods (22 hours or more per day) confined to their cells either alone or doubled up in cells designed for single occupancy, in which they ate, passed their day and slept in very cramped conditions for long periods of time.

The stress and threat of prisoner aggression or violence towards staff had risen considerably since 2016[11] and was tangible in the establishments visited by the delegation, albeit to differing degrees. Many staff were working under immense pressure, in challenging circumstances. Notwithstanding the recruitment drive of over 3,000 new prison officers since 2016, the retention rate remained an issue of concern; attrition was high, with a significant number of staff resigning within a relatively short time of taking up their positions (see further, Section 3 '*Prison Staff*').

16. A new and deeply concerning finding was evidence of the infliction of unjustified violence by staff on prisoners in two of the three prisons visited (see Section 2(a)(iii)). Moreover, the delegation found that the existing documentation, oversight and governance systems to monitor and tackle violence by staff remained under-developed (see Section 3 '*Prison Staff*').

17. Further, the CPT has taken careful note of the recent report findings of the House of Commons Justice Select Committee on Prison Governance,[12] which outlines some key concerns about safety, overcrowding and shortfalls in financing of prisons. Overall, the CPT considers that deeper, more comprehensive and adequately financed reforms that are sustainable in the long term are still urgently required to effectively tackle the root causes of the prison crisis, the lack of safety and high levels of violence in English adult prisons and to fully and adequately protect inmates and staff.

The CPT recommends that the United Kingdom authorities establish more targeted, effective and adequately financed measures to reverse the recent trends of escalating violence, self-harm and self-inflicted deaths. It also recommends that concrete steps to significantly reduce the prison population (see below) be taken, without which the reform programme will not be as effective as it could and should be.

---

11 Prisoner violent incidents against staff had risen 29% from 2018; see also acknowledgment of this in speeches from the former Lord Chancellor and Justice Secretary, David Gauke, on 'Beyond prison, redefining punishment', 18 February 2019 and "From sentencing to incentives – how prisons can better protect the public from the effects of crime", 10 July 2018, Ministry of Justice and in the drafting of the new Emergency Workers (Offences) Act 2018, focussing on criminal punishment for assaults on prison staff.

12 2019 Report on Prison Governance, House of Commons Justice Committee, published on 31 October 2019.

b. overcrowding

18. Linked to the high levels of violence and poor regimes experienced in the prison estate is the issue of overcrowding in prisons.[13] Currently hovering around 83,000 (i.e. an incarceration rate of 145/100,000 population), the prison population is more than double the number found during the CPT's first visit in 1990. Almost all adult prisons now operate at or near full operational capacity and well above their certified normal capacity; the Certified Normal Accommodation (CNA) should 'represent the good, decent standard of accommodation that the Prison Service aspires to provide to all prisoners'.[14]

In 2016, the CPT recommended that concrete steps be taken to significantly reduce the current prison population, without which the implementation of the wider reform programme would remain unattainable. In 2019, shortly before the delegation's visit, the House of Commons Justice Committee published its own report on the state of the prison population in England and Wales,[15] commenting that prisons of England and Wales are now in the depths of an enduring crisis in prison safety and decency that has lasted five years and is taking significant additional investment to rectify, further diverting funds from essential rehabilitative initiatives that could stem or reverse the predicted growth of the prison population. It also reported that whilst the number of people in prison has remained roughly stable since 2012, the amount spent on prisons has fallen in recent years and that there is an apparent shortfall in prison finances across 2018–19 and 2019–20 which could amount to £1.2 billion.[16]

The Government has not committed itself to the overall reduction of the prison population; instead, in August 2019 it pledged to create 10,000 new, modern prison places and to close more Victorian-era prisons, which cost more to operate to decent standards. However, the House of Commons Justice Committee and many other stakeholders have underlined that ploughing funding into building prisons to accommodate prison projections is not, in itself, a sustainable approach in the medium or long term. The CPT can only agree.

19. The prison system in England and Wales continues to suffer from chronic overcrowding. The CPT has repeatedly raised concerns about the impact of overcrowding in a number of previous reports; equally, it has recurrently found overcrowding to be a source of additional serious shortcomings in the prison system (impacting, for example, on material conditions, regime, outdoor exercise and health care services).[17]

Doncaster Prison (147%) and *Liverpool Prison* (112%) (albeit with a temporary revised reduction of its CNA) are among those prisons that operate at far beyond their envisaged respective CNAs.

---

13 Cf. footnote 17.

14 The "certified normal accommodation" remains used as a technical aspiration, however, the specific space per prisoner criteria is unpublished; the "operational capacity" reflects the reality of a given prison, which a prison cannot go beyond without losing decency, regime and safety aspects.

15 The House of Commons Justice Select Committee is of the same view. The Committee's recent report "Prison Population 2022: planning for the future".

16 Ibid.

17 CPT reports on the 2003 and 2008 United Kingdom visits: CPT/Inf (2005) 1, paragraphs 16 to 41and CPT/Inf (2009) 30, paragraphs 25 to 34 respectively.

According to the United Kingdom authorities, in 2018, 24.2% of prisoners (i.e. 20,695) were held in crowded conditions. Although there are yearly fluctuations, crowding levels have remained at around 25% since 2004. The highest crowding rates continue to be at male local prisons where 48.5% (14,748) prisoners are being held in crowded accommodation.[18]

20. In all of the prisons visited in 2019, cells originally designed for single use now held two persons. Overcrowding had a significant impact on the prisoners' regimes; the regimes in all three prison establishments visited were inadequate, with many prisoners spending up to 22 hours per day, and occasionally even longer, locked up in their cells due to the lack of work availability and bare minimal front-line operational staff presence, despite an increase in their numbers (see *Staff* section).

21. Further, the delegation noted during the 2019 visit the considerable number of prisoners who were on "recall", and who had been recalled back to prison for a breach of any of the terms of their parole. At all three prisons visited, 10% of the prisoner population was on recall. The CPT notes that the House of Commons Justice Select Committee has underlined that the number of recalled offenders in prison has increased substantially, from roughly 150 in 1995 to 6,000 in June 2016. At the end of 2018, the figure stood around 6,965. The Committee acknowledges the need to ensure that prisoners respect their parole or licence conditions. Nevertheless, these measures, *inter alia*, could inflate the prison population and put further strain on a prison system that is already fighting to come out of a deep crisis.[19]

22. The CPT acknowledges the clear need for modern decent prisoner accommodation, and the fact that there are a number of Victorian and other older establishments that are crumbling away, in constant need of refurbishment, and that are neither functional not fit for purpose. However, decommissioning such establishments should go hand in hand with stabilising and reducing the prison population.

The CPT also recalls that the solution to overcrowding in English and Welsh prisons is clearly not for the United Kingdom to 'build its way out'. If the steady increase of the prison population continues upon its current trajectory, the new prisons too will rapidly become overcrowded and start to face the same problems as found in the current prison estate.

In addition to the issues expressed above regarding the expansion of the prison estate by 10,000 places, the CPT has long been concerned by the concept of very large prisons.[20] It considers that smaller and more-community orientated prisons with reduced populations are more effective at maintaining control and ensuring effective conditions and regimes, than the 'warehousing' of more prisoners in fewer larger prisons (i.e. HMP Berwyn and HMP Wellingborough under construction).

The CPT reiterates its recommendation that the United Kingdom reconsider plans to build very large prisons and consider investing in smaller community-facing prisons.

---

18 Official Statistics Bulletin, published 26 July 2018, HMPPS Annual Digest 2017/18.
19 The House of Commons Justice Select Committee "Prison Population 2022: planning for the future"
20 Paragraph 29, CPT Visit to the United Kingdom 2008, CPT/Inf (2009) 30.

23. In light of the continuation of overcrowding in the prison estate, and its negative effects on prisoners' lives, the CPT believes that unless determined action is taken to significantly reduce the current prison population, it will not be possible to deliver the regime improvements envisaged by the prison reform and transformation agenda; many aspects of prison life risk continuing to be adversely affected by the state of overcrowding in the prison system.

Since its first visit to the United Kingdom in 1990 the CPT has repeatedly recommended that urgent action was needed to curb overcrowding in English prisons, yet the situation has progressively deteriorated. In 2019, the population had not reduced significantly, and violence remained at critically high levels. **The CPT calls upon its recommendation to the United Kingdom authorities to take action to reduce the level of crowding in the adult prison estate, including through changes in sentencing policies and practices.**[21]

The CPT would also like to be informed about the new prison building programme and the anticipated closure of the Victorian-era prisons, along with details for the new prison establishments of the design, layout, cell sizes, communal spaces and the budgetary resources agreed and allocated, as well as their envisaged time-frames to completion.

c. establishments visited

24. HMP & YOI Doncaster was first visited by the CPT in 2016;[22] it is a large and relatively modern facility (opened in 1994) operated by the private contractor SERCO. Its CNA is 738 and it has an operational capacity of 1,145. At the time of the visit it had an occupancy of 1086 inmates, of whom 841 were adult sentenced prisoners and 104 adult inmates on remand, as well as 136 young adult offenders, of whom 103 were sentenced and 33 were on remand. It also held five immigration detainees.

As mentioned in the report on the 2016 visit, the Ministry of Justice, through its service contract, had required SERCO to produce a revised Rectification Action Plan[23] to address several systemic problems, notably an increase in levels of violence in the establishment, the inadequate staffing levels and deficient middle management response. Following an inspection by HMIP in July 2017, which noted some improvement, Doncaster Prison was removed from Rectification by the Ministry of Justice.

25. *HMP Liverpool* is a large Victorian-era Category B local male prison, constructed in 1855 in the centre of the city. The CPT visited Liverpool Prison in 1994 and 2003.[24] The original layout of Liverpool Prison remained substantially the same as outlined in 2003, with a "telegraph pole" design, with wings that branch off from a central "spine" corridor. There are 8 wings, all are part of a refurbishment programme, notably to replace the windows and improve cleanliness.

---

21 Recommendation Rec(2006)2 of the Committee of Ministers of the Council of Europe and Recommendation No. R (99)22 regarding overcrowding and the prison population inflation.

22 Report to the Government of the United Kingdom on the visit to the United Kingdom carried out by the CPT from 30 March to 12 April 2016, CPT/Inf (2017).

23 Rectification is a procedure initiated if a prison falls below the contractual standards required by the Ministry of Justice, and is required to improve certain aspects within a given timeframe, monitored by the Ministry of Justice.

24 United Kingdom Visit 2003 CPT/Inf (2005)1 and Report to the United Kingdom Government on the visit to the United Kingdom carried out by the CPT from 15 to 31 May 1994 CPT/Inf (96) 11.

The prison has a CNA of 607 and a temporary operational capacity of 700. At the time of the visit, it was holding 681 adult male inmates over 21 years old, of whom 515 were sentenced and 166 were unsentenced.

Following the highly critical inspection of Liverpool Prison by HMIP in September 2017,[25] a new Prison Director was appointed to undertake an immediate Improvement Plan. This Plan has focussed primarily on wholesale refurbishment with the aim to provide basic living conditions, on a rolling wing-by wing basis, to address problems of damp, infestations of rats and cockroaches, poor ventilation and cell and common areas' cleanliness. The refurbishment programme runs until 2020. In order to realise this Plan, the operational capacity of the prison has been temporarily reduced from 1,300 to a maximum occupancy of 700 places, which had permitted a number of cells on the lowest underground levels to be decommissioned.

26. *HMP Wormwood Scrubs* is a Category B Victorian local male prison located in west London, which was opened in 1875. The establishment has five main wings A to E, and various smaller units, including a First Night Centre, a Health care Centre, a Drug Detox Unit and a Segregation Unit and workshops, a very large old stone church in the centre of the prison and smaller multi-faith centre, as well as five Wing exercise yards. This was the CPT's first visit to the prison. With a CNA of 1,168 and operational capacity of 1,279, at the time of the visit, the prison had an occupancy of 1,073 inmates, of whom 712 were sentenced, 229 were on remand and 114 on recall, and 23 were young offenders.

2. Violence, ill-treatment and the use of force

a. the scale of violence in the English male adult prison estate

27. During its visit, the CPT's delegation focussed on three types of violence prevalent in the local male adult prisons, namely, inter-prisoner violence, prisoner-on-staff assaults and staff-on-prisoner use of excessive force or assaults.

(i) inter-prisoner violence

28. At the time of the visit, the latest available official figures suggested that there might have been a slight dip in the scale and extent of recorded inter-prisoner violence in English prisons.[26] Regrettably, it has since emerged that this was not the beginning of a trend. In July 2019, the most recent official figures were of serious concern to the CPT.[27] There were a record-breaking 34,425 recorded inter-prisoner assault incidents in the 12 months to March 2019, up 11% from the previous year. In the most recent quarter alone, assaults increased by 4% to 8,445 incidents. Of the 34,425 assault incidents, 3,949 (11%) were serious.[28] In the 12 months to March 2019, there were 3,949 serious assault incidents, up 1% from the previous year.

---

25 Report on an unannounced inspection of HMP Liverpool by HM Chief Inspector of Prisons, 4–15 September 2017, page 5.

26 'Safety in Custody Statistics, England and Wales: Deaths in Prison Custody to December 2018 and Assaults and Self-harm incidents to September 2018', Ministry of Justice, published 31 January 2019.

27 Safety in Custody Statistics, England and Wales: Deaths in Prison Custody to June 2019 Assaults and Self-harm to March 2019, published 25 July 2019.

28 "Serious assaults" are those which fall into one or more of the following categories: a sexual assault; requires detention in outside hospital as an in-patient; requires medical treatment for concussion or internal injuries; or incurs any of the following injuries: a fracture, scald or burn, stabbing, crushing, extensive or multiple bruising, black eye, broken nose, lost or broken tooth, cuts requiring suturing, bites, temporary or permanent blindness.

29. During its 2019 visit, the delegation noted that there remained a high level of serious inter-prisoner violence at all three prisons visited, especially at *Doncaster* and *Wormwood Scrubs Prisons*. By way of illustration, the following are some cases selected from the three prisons visited by the delegation, drawn from interviews and Prison Incident Reports. In each and every one of these cases the fact that prisoners had sustained these injuries was corroborated by the medical evidence examined by the CPT's medical expert.

At *Doncaster Prison*, there had been 631 assaults (of all kinds) in 2017, 827 in 2018 and, during the first four months of 2019, 215. Of this total, 529 (2017), 636 (2018) and 169 (January – April 2019) were recorded as prisoner-on-prisoner assaults, fights or "suspicious injuries", with the remainder being recorded as prisoner-on-staff assaults. In a mere two week period (March/April 2019), the following are just a few of the incidents recorded: "at approx. 16:00 [on 28/3/2019], Prisoner G informed [staff] that last week [another prisoner] had come into his cell while he was asleep in bed and stabbed him on the face just below the eye and on his left arm." In another case, "at 16:41 [on 12/04/2019] Houseblock 2, Prison Officer A saw Prisoner H strike Prisoner I to the face, on investigation and after managing the incident it was evident that Prisoner I had received a puncture wound to the face [and] was discharged to Rotherham Max facial hospital for treatment". In a third case, "at approximately 14:20 [on 15/04/2019] on Houseblock B3A, Prison Officer B reports that he heard a commotion in the upstairs showers as he investigated, he saw Prisoner J coming out of the showers and what appeared to be blood on his knuckles. When the officer attended the showers, he saw Prisoner K unconscious on the floor of the shower and appeared to have severe facial injuries and swelling to his head. A code red was called, and health care staff attended. He was sent to A&E, DRI [Doncaster Royal Infirmary]. […] Prisoner K returned from Hospital 22:15 [with] a fractured jaw & swellings and severe bruising to his face."

At *Liverpool Prison*, there had been a total of 270 assaults (prisoner on prisoner and prisoner on staff) in 2018 and 96 assaults in the first four months of 2019. Of these, 207 (2018) and 73 (first four months of 2019) had been classified as prisoner-on-prisoner assaults, with the remainder being recorded as prisoner-on-staff assaults (see below). A couple of recent serious violence cases officially reported included: "on the 22.04.19 at approximately 16:10 Prisoner L assaulted Prisoner M in H2 Servery by throwing a kettle of boiling water over him. Prisoner L was restrained by staff and escorted to segregation. Prisoner M sustained a burn to his right shoulder and has been treated by health care staff." In another recent case, "at approximately 08:30 on 14/05/2019, Prisoner N assaulted Prisoner O by slashing him across the face. Injuries resulted in Prisoner O being sent to outside hospital". The prison authorities recorded that "although saying otherwise this appears to be a paid hit. These two men are not known to each other. Prisoner O has known highlighted gang issues leading to similar incidents".

At *Wormwood Scrubs Prison*, there had been a total of 485 assaults during the twelve months prior to the delegation's visit (i.e., from 21 May 2018 to 21 May 2019), of which 320 had been recorded as prisoner on prisoner assaults and the remainder recorded as assaults by prisoners on staff. In a single three-week period, incidents recorded included: "at approximately 16:25 on 17/04/2019 there was an alarm bell on D-Wing. Prisoner Q had been slashed across the neck by an unknown person. This resulted in a serious injury to Prisoner Q's neck resulting in him having to be sent to an outside hospital." In another case, "on 21/04/2019, Prisoner R assaulted by an unknown perpetrator. Received deep cut to lip and smashed head off floor as fell. Discharged two staff to Northwick Park Hospital." In a third case, "at approximately 14:57 on the 11/05/2019, CCTV footage showed Prisoner S walk into cell X and showed Prisoners T and U run in after. Approximately one minute later, Prisoners T and U both left the cell and Prisoner S was assisted out of the cell by other prisoners, [and was] seen covered in blood and was treated by health care and subsequently taken to hospital".

(ii) prisoner-on-staff violence

30. There were 10,311 assaults on staff in the 12 months to March 2019, up 15% from the previous year, a deplorable new record. In the latest quarter the number of assaults on staff increased by 4% to 2,525 incidents. Worryingly, serious assaults on staff increased by 12% to 1,002. In each of the three prisons visited by the delegation, there had been recent serious attacks by prisoners on staff, resulting in injuries and hospitalisation.

31. The CPT's delegation noted that there remained a serious and increasing level of prisoner-on-staff violence at all three prisons visited. For example, in a period of only one month (March/April 2019) at *Doncaster Prison*, the following are but a few of the incidents recorded: "on 20/03/2019, at approximately 09:50 on Houseblock 2 D-Wing, Prisoner V assaulted a member of staff by throwing a kettle of boiling water over her. Treatment was given by health care staff and taken directly to DRI [Doncaster Royal Infirmary]." In another case, "on 01/04/2019, at approximately 13:00 Prison Officer C was escorting Prisoner W who was being transferred to a secure hospital, when he punched Prison Officer C to the left side of the face, resulting in a possible fracture." In a third case, "on 19/04/2019, at approximately 16:50 in segregation Prisoner X assaulted Prisoner Officer D by grabbing her shoulder and attempting to cut her neck with an improvised bladed weapon causing a small cut to the left side of her neck and to her left wrist."

This was far from uncommon, and the CPT's delegation noted that a number of similar incidents happened during the same time-frame at *Liverpool Prison* and *Wormwood Scrubs Prisons.* By way of illustration, at *Liverpool Prison* "at approximately 13:45 hours on 01/05/2019 whilst conducting an ACCT review Prisoner Xx assaulted Prison Officer Dd by punching him to the left side of his jaw in a completely unprovoked attack." In another recent case, at "approx. 16:40 on 10/05/19 Prison Officer Ee escorted Prisoner Yy to his cell. [The officer] stepped in partly to his cell to lock and secure the door, as [he] did this [Prisoner Yy] attempted to punch [him] with his left hand which connected with the right side of [his] face, as [he] pushed [Prisoner Yy] away he bent down and as he stood up he had a small homemade knife-like weapon in his left hand. [The prison officer] immediately pulled the door shut and locked it as [Prisoner Yy] then charged at [him] with the weapon."

At *Wormwood Scrubs*, on "01/05/19 at approx. 15.40, Prisoner Za became refractory, smashing up the telephone and attempting to jump onto the netting, he had to be restrained, during which he assaulted Senior Officer Ff by punching him in the face and biting his finger". Equally, "on 02.12.2018, Prisoner Zb, was let out of his cell in the segregation unit for meal pick up; he wanted to speak to a specific prisoner officer, which was denied. […] Prisoner Zb turned and punched Prison Officer Gg with his right arm, who was knocked unconscious, Prisoner Zb then ran down landing and did a flying kick towards Prison Officer Ff. Staff responded to restrain Prisoner Zb, he fought the staff and was non-compliant throughout the move into segregation. He continues to make threats towards staff."

32. **The CPT recommends that the United Kingdom authorities ensure that far greater investment in preventing violence – both prisoner-on-prisoner and prisoner-on-staff - is undertaken at Doncaster, Liverpool and Wormwood Scrubs Prisons and across the wider prison estate, including specifically the measures set out below** (*inter alia*, sections 2(b), 3 and 4) **to bring prisons back under effective control of the staff, in order to halt and reverse the high levels of violence.**

(iii) staff on prisoner violence

33. At two of the three establishments visited – *Liverpool* and *Wormwood Scrubs Prisons* – the delegation encountered examples of the unprovoked and unjustified infliction of violence on prisoners by staff.

34. At each of the establishments visited, the delegation also reviewed a variety of documentation and video material.

The CPT recognises that it may, on occasion, be necessary for prison staff to use force to control violent and/or recalcitrant prisoners, whose behaviour may otherwise constitute a danger to the safety of themselves and others. Nonetheless, the force used in such circumstances must be lawful, proportionate and no more than is strictly necessary. Appropriate monitoring and accountability mechanisms must be in place to ensure that all such incidents are subject to detailed review and, if necessary, action taken to address any incidences of the use of excessive force. For a prisoner officer to strike a fully compliant prisoner is totally unjustified.

35. At *Liverpool Prison*, the delegation noted two cases that had resulted in the dismissal or suspension of staff who had been caught on CCTV / body worn video cameras (BWVC) engaging in unprovoked physical attacks upon prisoners.

- The first case dated back to the morning of 29 January 2018 and involved the transfer of a prisoner from I-Wing to B-Wing. BWVC and CCTV footage showed that the prisoner was entirely compliant throughout the transfer, which took around 15 minutes. Once in B-Wing, the inmate was taken to the office of the (then) Custody Manager, where he was seated. After a short conversation with the prisoner, the (then) Custody Manager launched an unprovoked attack on the inmate, punching him on the head without any prior warning or justification. Afterwards, the (then) Custody Manager can be heard to comment, "that wasn't the plan, but there you go". When the relevant footage came to light, the officer concerned was dismissed. However, he is apparently contesting his dismissal on the grounds that his actions constituted a legitimate "preventive strike" against the prisoner (see further, below).

- The second case was more recent, having taken place in the establishment's servery on 27 April 2019. CCTV footage showed that, after a prisoner (Prisoner Y) had attempted to take an additional chocolate biscuit, Prison Officer E, in the presence of Senior Officer F (and other prisoners), lunged towards him. Another prisoner, Prisoner Z, attempted to intervene and Prison Officer E attacked him, throwing some eight punches at him and other prisoners. A particularly disturbing feature of this incident is that both prison officers had produced detailed, almost entirely fictional, accounts of their behaviour on Annex A use of force forms, claiming that they had been confronted by a "terrifying situation" and had been obliged to use "protective strikes".

The CPT's delegation noted, however, that these assertions were entirely at odds with the CCTV footage and, at the time of the visit, the officers concerned were suspended. The delegation interviewed Prisoner Z (and examined his medical files); his account, by contrast, was entirely consistent with the video footage viewed.

36. The CPT's delegation noted that the use of force paperwork at *Liverpool Prison* produced by prison staff could be inaccurate and misleading, and examined more deeply eleven other cases, in which there could have been instances of unprovoked attacks by prison staff on inmates being qualified as "preventive / protective strikes". These included cases in which prisoners had apparently sustained injuries after direct contact with prison officers and had made complaints about ill-treatment. In the course of follow-up interviews with certain of the prisoners concerned, the delegation received several further allegations concerning violence by staff on prisoners.

For example, Mr Aa alleged that he had been seriously assaulted by staff on 23 March 2018 in G Wing. He stated that he had been "beaten up" by four prison officers, with a Senior Officer taking the lead. He alleged that the Senior Officer G had delivered an "uppercut" punch to his head, dragged him around on the floor and "battered" him. As a result, he had sustained extensive facial injuries, as well as further injuries to his back and stomach. These had been photographed in colour by his solicitor, who had also submitted a detailed formal written complaint about the manner in which his client had been treated. In the prison's use of force monthly log for March 2018, this incident had been described as a "staff assault/threat assault" and suggested that force had been used by prison staff to "prevent injury to self/third party". It also answered in the affirmative a question as to whether "de-escalation" had been used "successfully". The delegation's medical expert also examined this prisoner's medical file, which showed injuries – including trauma to the brain - consistent with the prisoner's allegations.

Equally, another prisoner, Prisoner Bb, alleged that on his arrival at Liverpool Prison on 11 April 2019, escorting staff from his prison of origin (HMP Wymott) told him that he would "get a beating" from Liverpool staff. He alleged that, the following morning, at around 07h45, he was indeed beaten in a cell in the segregation unit. Prisoner Bb claimed that he was punched in the face and kicked in the ribs, that he bled from his nose and, afterwards, had swelling on his body. He displayed a mark on the left side of his forehead that he attributed to this attack. He mentioned that none of the officers concerned had turned on their BWVCs. Subsequently, he was seen by health-care staff, whom he said noted his injuries in the presence of the staff he alleged had attacked him. The control and restraint monthly log recorded this as a "threat assault" with restraint being used to "prevent injury to self/others" and "de-escalation" having been used "successfully". The delegation's medical expert also examined this prisoner's medical file, which showed injuries (two bruises to left forehead and one bruise on left cheekbone) consistent with the prisoner's allegations.

The delegation also interviewed the Use of Force Coordinator at Liverpool Prison who confirmed that, in his view, it was legitimate for staff to use "preventive" strikes against a compliant prisoner if, based on previous knowledge of the inmate, they anticipated that he might pose a threat.

37. Unprovoked attacks by certain staff on inmates were not confined to *Liverpool Prison*, but were also found at *Wormwood Scrubs Prison*. Here, an incident involving the unprovoked use of violence by a prison officer against a compliant inmate took place during the delegation's visit.

On 20 May 2019, Prisoner Cc was being escorted to his cell in a compliant manner when, without provocation or warning, a Senior Officer (who had been seconded to the prison) struck him on the back of the head and then lifted him by his clothing and slammed his head down on the floor of the landing between cells 2 and 3, a very short distance from his own cell. This officer only turned on his BWVC after he had struck the prisoner, but the incident was also partially captured on CCTV, which was viewed by the delegation. The prisoner was seen by the health care staff and found to have sustained bruising to his forehead and neck.

The delegation interviewed the prisoner concerned, who gave a clear account of the incident, consistent with the video footage. By contrast, in the use of force form (Annex A) completed by Prison Officer H, he "believed that [Prisoner Cc] was going to assault the Officer behind him […] [and] it was absolutely necessary to run towards him and restrain him quickly taking control of his head". Moreover, an aggravating factor, in the CPT's view, is that this officer was a member of the "Safer Custody Team (SCT)" which is meant to be composed of a team of seconded experienced prison officers who are deployed in teams to prisons other than their own in order to assist and support less-experienced staff to develop their professional standards. After this incident, seconded Prison Officer H was ordered by the Prison Governor to leave the prison and to return to HMP Dartmoor, where his "home" Governor had disciplinary authority over him. **The CPT requests that the authorities of the United Kingdom send it an update of the further steps that have been taken in relation to this matter.**

38. The CPT's delegation examined documentation held at *Wormwood Scrubs Prison*, which indicated that events of this nature were not likely to be isolated incidents.

For example, on 21 January 2019, it is recorded that a Prison Officer I "gave a defensive strike" to Prisoner Dd after the inmate allegedly refused to return to his cell. However, other available prison documentation states otherwise. According to an internal fact-finding report "As Prisoner Dd was about to walk down the stairs, Prison Officer I tried to push him down the stairs […] Prisoner Dd turned towards Prison Officer I […] and at that point he was hit by the officer on his left eye. […] Prisoner Dd was taken to the prison's health care service twice that day in order to have treatment for a cut above his eye." The fact-finding report concluded that: "from speaking to Prisoner Dd I have no doubt that he was telling the truth and him being hit was unprovoked. The incident was not captured on CCTV. I watched the body worn camera footage […] [and] Prisoner Dd could then be seen crying and sitting on his bed […] and the cut on his face started to bleed more […]". [The senior officer] agreed when Dd stated that he wasn't a violent prisoner and that he did not refuse to leave the landing. **The CPT requests further information about any additional steps taken in the light of the findings of this internal investigation.**

39. Overall, the CPT wishes to recall that the State is under a duty to provide care for all persons deprived of their liberty in prison, and that the frontline in providing such care rests with prison officers. **The CPT recommends that the United Kingdom authorities must not only undertake a proper investigation into allegations of ill-treatment, but also institute measures (such as those set out in the following chapter) to ensure that all prison officers and managers understand why ill-treatment is unacceptable and unprofessional and that, furthermore, it will result in severe disciplinary sanctions and/or criminal prosecution.**

b. measures required to tackle the violence

40. The CPT considers that further action is urgently required to tackle the problem of violence in local adult male prisons. Tackling this problem effectively will require a multi-faceted approach, including accurate monitoring of levels of violence of individual prisoners, effective management of violent incidents and – crucially – interventions that actually challenge violent behaviour. At the system level, action is also required to improve the ratio of frontline prison staff to prisoners, as well as to enhance the current systems to hold prison staff accountable for their actions.

(i) monitoring

41. The CPT's delegation notes that the capacity of the authorities to monitor the prevalence of inter-prisoner violence has improved. Enhancements have been made to the "Violence Diagnostic Tool", a national database that can now generate disaggregated data on violence capable of being examined establishment-by-establishment, and in relation to a wide variety of individualised factors. Moreover, prisoners who have engaged in acts of violence are now accorded a violence (or "VIPER") score, using a digital reporting tool that includes details such as prisoners' conduct, including any involvement in assaults, disorder and seizures of contraband such as drugs and mobile phones, as well as demographic information and location history. The system can also chart improvements in behaviour. It enables prisons to rank inmates according to the perceived likelihood that they may engage in violence, with those having the highest "VIPER" scores in principle receiving closer staff supervision. The data generated by these enhanced systems can be of invaluable assistance to the national authorities in understanding the underlying factors contributing to violence at a far more granular level than was previously possible.

42. Equally, the CPT notes that is also positive that, as compared to 2016, far fewer incidences of under/misreporting of incidents of violence were identified during the 2019 visit. However, the delegation did still find some instances of under-reporting, in particular, because there is not yet an effective interface between information on inter-prisoner violence that surfaces in the complaints system and the recording of violent incidents.

(ii) effective management

43. Managing a large adult male prison in an effective way is a complex task, requiring of a Director / Governor a high level of operational performance in a very challenging environment, as well as a capacity for strategic and reflective leadership. Consequently, the CPT welcomes the steps that have been taken recently to develop a senior leadership programme to support and enhance the leadership capacity of senior prison managers. **The CPT would like to be informed of the numbers of Directors/Governors who have undertaken this programme and of the future targets in this regard**.

44. In each of three adult male prisons visited, senior management were acutely aware of the problem of inter-prisoner violence and of the need to take more effective action to tackle it. Initiatives such as regular "safer custody" meetings, including senior staff, and regular reviews of prisoners with the highest "VIPER" scores were in place in all three prisons. Nevertheless, in practice, these efforts were being undermined by the persistence of low staff numbers on the wings (see below). This meant that staff were often ill-equipped to intervene swiftly and effectively when incidents of inter-prisoner violence occurred. Moreover, the delegation noted the absence of a dynamic security approach and, in some instances, a failure to ensure that prisoners who had been the victims of attacks did not remain accommodated in close proximity to their attackers.

45. In addition, the delegation was concerned that some basic security measures were not being taken at all three prisons visited; for example, even though it was clear that significant quantities of drugs were entering the establishments (see Section '*substance use*') and were contributing to the violence levels – not everyone entering the prisons was being routinely searched. The delegation noted that staff were not being routinely searched for drugs, despite, in some cases, intelligence showing that occasionally, staff had facilitated or actually brought drugs into prisons. **The CPT would like to receive the comments of the United Kingdom authorities on this issue.**

46. Were frontline staff numbers to be increased or effectively retained, it would be far easier for the aspirations of management to be translated into more appreciable reductions in inter-prisoner violence. This is especially true as regards the ongoing implementation of the new national Offender Management in Custody (OMiC) initiative, which foresees that every prisoner will have a prison officer "key worker" with whom they will have at least 45 minutes contact within every two-week period. **The CPT would like to receive further information about the implementation in practice of the OMiC key worker scheme.**

(iii) anti-violence interventions

47. At each of the establishments visited, a number of projects had been put in place to intervene directly with prisoners, including those who had repeatedly been implicated in a series of violent offences. For example, at *Liverpool Prison*, programmes included "A to Z" (designed to help prisoners make life decisions and set goals); Gang Awareness (designed to help gang-affiliated prisoners consider how they could change) and Thinking Skills (designed to challenge offending behaviour).

The delegation also noted positively the programme in place at the Social Responsibility Unit (SRU) at *Doncaster Prison* (a bespoke regime aimed at removing those involved in anti-social behaviour from the mainstream prison population and rewarding positive behaviour); as well as the Challenge, Support and Intervention Plan (CSIP) programme, introduced in 2018, as a tool to monitor and support prisoners who have committed violence or who are vulnerable victims.

48. Nevertheless, the fact remained that structured interventions to challenge violent behaviour remained few and far between and were reaching comparatively few of even those prisoners identified as most prone to violence. For example, at the SRU in *Doncaster Prison*, over the preceding 9 months, 162 prisoners had been referred to offending behaviour programmes as a result of their contact with the SRU. However, of these, 91 had been transferred out of the prison before they could complete a programme, 54 were currently on a waiting list and only 12 prisoners had completed their programme (with, at the time of the visit, 5 inmates who were actively engaging). The tangible outcomes of the CSIP programme also remained unclear, although **the CPT would appreciate receiving further information in this regard.**

49. **The CPT recommends that greater investment be made in anti-violence interventions targeting prisoners who have been implicated in violent incidents. The effectiveness of existing intervention programmes should also be independently monitored and evaluated.**

(iv) staff numbers and training

50. In the view of the CPT, increasing the ratio of prison staff to prisoners remain critical factors in combatting all forms of violence in prisons, including prisoner-on-staff assaults. Increasing the numbers of frontline staff, as well as increasing their training, should be a particular priority (see Section 3 '*Prison Staff'* below).

(v) accountability procedures

51. The CPT's delegation paid particular attention to the operation in practice of current systems designed to hold staff to account, including: complaints processes, use of force recording and reporting, fact-finding and internal investigations and their interface with the criminal law.

- *complaints processes*

52. In a certain number of cases in which prisoners alleged to the CPT's delegation that they had been ill-treated by prison staff, the inmates concerned had also made formal complaints, using the relevant "COMP 1" form. However, several of these inmates alleged that they had not been questioned in person about the substance of their complaint and had received official responses to their complaints that were superficial or, in some cases, no response at all.

This issue appeared to be particularly acute at *Wormwood Scrubs Prison*, where the delegation's examination of a large number of COMP 1 forms (including copies retained by prisoners) demonstrated that some prisoner complaints about staff violence had either gone "missing" and/or had only received a response after months had passed. For example, at *Wormwood Scrubs Prison*, a prisoner interviewed by the CPT's delegation, Mr X (see also paragraph 97), had submitted three separate complaints, alleging that his wing staff had ill-treated him using excessive and unauthorised force during a control and restraint operation and called for an investigation. The delegation found that these complaints had been registered and logged, but two of the three complete complaints were missing and the last one, dating back several months, was subsequently found during the delegation's visit in the complaints clerk's drawer (see *Health care Section* for details). Unsurprisingly, the prisoner concerned had not received a proper response. It was also clear that overall, there were problems in the functioning of the system of confidential serious complaints against staff, as well as there being no effective interface between prisoner complaints received and the recording of alleged violence by staff.

53. **The CPT recommends that the United Kingdom authorities review the confidential access "COMP 1" system for serious allegations against staff to render the system effective and transparent in practice; as well as ensuring that an effective interface be established between prison complaints procedures and the recording of incidents of violence, including alleged staff assaults. The aim should be to ensure that whenever a prisoner's complaint includes allegations of violence that information is also formally recorded as an allegedly violent incident**. **Prison Governors should always retain direct oversight and control over these sorts of complaints and should systematically ensure an internal investigation and/or to referral to the police (see also sub-section (iii) below).**

- *use of force/control and restraint recording and reporting*

54. As already mentioned, the CPT recognises that it may, on occasion, be necessary for prison staff to use force to control violent and/or recalcitrant prisoners, whose behaviour may otherwise constitute a danger to themselves and others. Nonetheless, the force used in such circumstances must be lawful, proportionate and no more than is strictly necessary. Appropriate monitoring and accountability mechanisms should be in place to ensure that all such incidents are subject to detailed review and, if necessary, action taken to address any incidences of the use of excessive force.

55. The CPT's delegation found that while general reporting procedures were in place to record use of force by staff on inmates, there were shortcomings in the formal recording processes at two of the three prisons visited (*Liverpool* and *Wormwood Scrubs Prisons*), unlawful principles had been developed in one prison to legitimise the pre-emptive punching of prisoners (*Liverpool Prison*) and there were serious deficiencies in the use of body-worn video cameras (BWVCs) in each of the prisons visited.

56. As concerns the shortcomings in the formal recording of the use of force, at *Liverpool* and *Wormwood Scrubs Prisons*, the delegation reviewed documentation in relation to the use of force, as well as the establishments' own accountability and quality control mechanisms in relation to the recording of use of force. While the quality of use of force reporting appeared to be reasonably good at *Doncaster Prison*, at *Liverpool Prison* information recorded by staff regarding the use of force was at odds with any available corroborative material (e.g. CCTV footage), as mentioned above. Nonetheless, even when those discrepancies had been uncovered by management, it appeared that no effort had been made to correct/amend the information officially recorded regarding the incidents concerned. The CPT's delegation was especially concerned about the situation at *Wormwood Scrubs Prison*, where it was rare to find a full use of force form completed after staff intervention involving the use of force and the relevant medical reporting forms – F213s – were very often absent. Indeed, from a sample of 15 recent cases (from mid-April to mid-May 2019) involving the use of force, in only 3 cases had the mandatory F213 form been completed.

The absence of a F213 form as part of the use of force paperwork deprives the file concerned of information regarding any injuries borne by a prisoner after the use of force, including the explanation provided by the prisoner concerned of the origin of those injuries. Clearly, this is capable of undermining the potential of this reporting mechanism to contribute to the prevention of ill-treatment.

57. Turning to the legitimacy (or lack thereof) of the use of "preventive strikes", it is recalled that the CPT's delegation encountered this reprehensible practice (i.e., "preventively" punching compliant prisoners whom they perceived might, at some unspecified point in the future, become a threat), in particular at *Liverpool Prison*.

The use of force documentation at that establishment relating to such cases included reference to guidance issued in 2015[29] amending the previous national guidance on the use of force (Prison Service Order No. 1600, initially issued on 31/8/2005). The 2015 guidance states: "**Pre-emptive Strikes**: *"There is no rule in law to say that a person must wait to be attacked before they can defend themselves". There must however, be an honest belief by the member of staff that he or she was about to be attacked and, as with other uses of force, the pre-emptive force used in self-defence must be reasonable and necessary in the circumstances".*

This guidance is, in turn, based on Crown Prosecution Service general guidance on the law of self-defence,[30] which itself leans upon a case decided in 1909[31] which, while upholding an appeal on the grounds of judicial misdirection, actually found that "the appellant is a man very likely to have committed an unprovoked assault".

---

29 National Security Framework, Control and Order Function, Amendments to Use of Force Policy (NSF 2.1) of 4 November 2015.

30 http://www.cps.gov.uk/legal/s_to_u/self_defence/index.html

31 *R v Oarman Deana*, 2 Cr App R 75.

In the view of the CPT, the guidance currently provided to prison officers is inadequate and leaves the impression that an entirely subjective apprehension might provide a justification for making an otherwise entirely unprovoked attack on a prisoner. The CPT notes that the 2015 guidance is due to expire in early November 2019 and **recommends that it be replaced with new guidance that makes clear to prison officers that engaging in so-called "preventive strikes" on prisoners is unlawful and that any officer who is found to have engaged in this practice will be subject to appropriate disciplinary and/or criminal sanctions.**

58. As concerns the issue of body-worn video cameras (BWVCs), as stated in the relevant national instructions,[32] BWVCs are there to provide a clear and irrefutable record of events, promote positive behaviour and transparency between staff and prisoners.[33] However, in each of the establishments visited, far less use was being made of BWVCs than might - or should - have been the case. Consequently, in a number of cases examined by the delegation, evidence that might have supported or refuted a prisoner's allegation of ill-treatment had simply not been collected. The management in each of the establishments visited were aware that their staff should be making greater use of BWVCs. This would require both an increase in the number of BWVCs being issued and more consistent use of those BWVCs that are issued to prison staff.

At *Doncaster Prison*, the Director had carried out his own review of the 269 cases of the use of force between 1 January and 13 May 2019. BWVCs had been used in only 21 cases (less than 8%), whereas he considered that they should have been used in up to 70 of those cases (26%). At *Wormwood Scrubs Prison*, the delegation itself found that during its visit only 37 of the available 111 BWVCs had actually been issued. Article 2.7 of the Prison Service Instruction (PSI) on BWVCs sets out the situations where a BWVC must be used including "when a user has or may be required to exercise force against a person or persons".[34] Nonetheless, the delegation found that this requirement was not being respected in practice at any of the prisons visited.

Moreover, the PSI also specifies that "in situations where it is difficult to commence recording prior to force being applied, such as when users face spontaneous and/or unexpected violence for example, the user should activate the BWVC as soon as it is practicable to do so. In such circumstances users should explain why earlier recording was impracticable on the BWVC device and within their written statement". There was little evidence in any of the use of force paperwork reviewed by the delegation of prison staff complying with this provision; nor did there appear to be any consequence for officers who did not meet this standard.

In order to enhance the potential of BWVCs to contribute to the prevention of ill-treatment, and better to protect prison staff from unfounded allegations of ill-treatment, **the CPT recommends that the terms of Prison Service Instruction 04/2017 should be amended to make it mandatory for BWVCs to be issued, worn and turned on by all prison staff who may have to use force against prisoners and non-compliance with this obligation (in the absence of an explanation of exceptional circumstances) should be treated as a disciplinary offence** (see also paragraphs 62 and 84).

---

32 National Security Management Framework, Security Management, Body Worn Video Cameras. Prison Service Instruction (PSI) 04/2017, issued on 20 March 2017; in the interests of memory space, BWVC footage is normally kept for a month unless it relates to a suspected incident, complaint or investigation.

33 "Used effectively a BWVC allows first person audio and visual images to be captured to provide a clear and irrefutable record of events. With proper use the introduction of this technology will assist with: Allowing for more detailed examination of the events leading up to and management of incidents; Enhance evidence capture; Promoting positive behaviour and interaction between staff and prisoners; Developing effective rehabilitative staff/prisoner relationships; supporting transparency, trust and confidence between staff and prisoners".

34 National Security Management Framework, Security Management, Body Worn Video Cameras. Prison Service Instruction (PSI) 04/2017, issued on 20 March 2017.

- *fact-finding & internal investigations*

59. Where use of force paperwork indicated that a prisoner had sustained injuries as a result of the use of force, the CPT's delegation found that this did not always result in a fact-finding exercise by the prison or an internal investigation of the circumstances. Notably at *Liverpool* and *Wormwood Scrubs Prisons*, many of the fact finding/internal investigations that had been conducted were not effective. For example, the delegation found that often reliance was placed mainly on the written accounts of staff members: it was unusual for the prisoner involved to be interviewed and there was rarely a reasoned consideration of whether or not the force used was lawful, necessary and proportionate in the circumstances. Unsurprisingly, a number of the prisoners interviewed at the prisons visited stated that they did not trust the internal investigatory procedures.

- *the interface between accountability procedures and criminal proceedings*

60. In light of the above issues, the CPT considers that the interface between internal prison procedures and the criminal proceedings in cases involving alleged assaults by staff on prisoners is in need of review and strengthening.

The Crime in Prison Referral Agreement (7 May 2019, "the Agreement") sets out the current arrangements between HMPPS, the National Police Chiefs' Council (NPCC) and the Crown Prosecution Service (CPS). Annex A to the Agreement recalls that it is mandatory to report very serious crimes to the police, including "offences involving the use of a serious degree of violence or serious threats of violence [and] offences resulting in the occasioning of serious injury and that:

i. results in detention in an outside hospital as an inpatient;
ii. requires medical treatment for concussion or internal injuries; or
iii. the injury is a fracture, scald or burn, stabbing, crushing, extensive or multiple bruising."

However, it appears otherwise to draw a clear distinction between the use of violence by prisoners on staff and the use of violence by staff on prisoners. The subject of staff assaults is dealt with in its own Annex (B), which provides that "[...] all assaults on staff will be referred to the police for investigation and consideration for prosecution".[35]

Nonetheless, the CPT notes that considerably more latitude appears to be available to prisons in relation to "other incidents". According to section 6 of the Agreement: "Before reporting other incidents to the police, the prison will consider whether a case could be more appropriately dealt with by the Prison Adjudication System or whether the victim wants the crime referred to the police." It is notable that the Agreement does not expressly countenance the possibility that a matter for referral might involve an allegation that a prison officer has assaulted an inmate.

The CPT's delegation found that, in each of the three prisons visited, referrals to the police were not happening systematically in every case of alleged assault by staff on prisoners.

Of course, the referral of any alleged assaults to the police should not preclude the taking of any internal procedures to protect the welfare of an alleged victim.

---

35 Annex B also recalls that, following the enactment of the Emergency Workers (Offences) Act 2018, police and prosecutors should consider charging an offence carrying an aggravated penalty under that Act where the complainant is an emergency worker (a definition which now includes prison officers).

61. During the high-level talks held with the United Kingdom authorities in June 2019, HMPPS indicated that the above Agreement was currently being reviewed. The CPT considers that the Agreement should be amended to exclude the possibility that the status of the victim of an alleged assault (prisoner/staff) might determine whether or not it is referred to the police.

The CPT recommends that referral to the police should be mandatory in every case of alleged assault irrespective of whether the purported assailant is a prisoner, or a prison officer and the Crime in Prison Referral Agreement should be amended to reflect this, as well as specific guidance provided on referrals to the police of alleged assaults by prison officers.

62. **Overall, the CPT recommends that a thorough review be undertaken by HMPPS into the efficacy of current systems designed to hold prison staff to account when their conduct is called into question. The review, and further measures, should ensure *inter alia*:**

- **the procedural effectiveness of current prison complaints procedures;**
- **improvements be made to the quality of use of force recording, including ensuring that mandatory F213 medical forms are completed in every case involving the use of force. In this regard, consideration might be given to digitising the F213 form;**
- **steps be taken to explicitly prohibit the practice of so-called "preventive strikes" by prison officers on inmates;**
- **enhance the current instructions on the use of BWVCs in order to render the use of this technology mandatory during every interaction involving the use of force by prison staff on inmates, and non-compliance (in the absence of an explanation of exceptional circumstances) should be treated as a disciplinary offence; and**
- **improvements be made to the quality of fact-finding / internal investigations by prisons.**

3. Prison staff

63. The CPT in its report on the 2016 visit had been very critical of the dangerously low staffing levels in the prisons that it visited. It, like other stakeholders, linked this to the deterioration in safety and standards in prisons and to poorer regimes for prisoners. Due to the nation-wide budgetary cuts, the number of front-line prison officers in English prisons had dropped by some 30% between 2010 and 2016; experienced prison officers had been offered voluntary redundancy or early retirement exit packages ("VEDs") and had left the Prison Service, and from around 2011 onwards, there had been a severe shortage of front-line operational officers, especially experienced officers.

The CPT also found that the low staffing levels and challenging working conditions in the prisons had led to low staff morale and increased work-related stress. Further, staff training was also considered insufficient, and other than their initial eight to twelve weeks of training, staff felt they did not get sufficient professional training support or refresher courses. In 2016, the CPT recommended *inter alia* that staffing levels should be reviewed in each wing of the prisons visited, that prison staff benefit from adequate psychological support, that the training needs of new prison officers be met and regular refresher courses be provided and that the skills set and mix of staff deployed to each wing be adequate for the level of risk assessed.

64. The United Kingdom authorities acknowledged that the prison staffing had fallen below the critical mass level needed to maintain control and safety in the prison system. From late 2016 to early 2019, the Prison Service embarked on a large-scale recruitment of operational custodial officer-grade staff. The CPT welcomes the recruitment of over 3,000 new operational front-line prison staff since late 2016.

This represents a positive step forward. However, staffing is not simply about the numbers recruited, and the CPT continues to have concerns with respect to the actual presence of a sufficient number of experienced front-line staff on the wings in direct regular contact with prisoners, the quality of the staff recruited, the deployment of staff, as well as their training and working conditions. The CPT considers that these core issues must all be addressed as part of the process to restore good order in the prison system.

65. Firstly, as concerns staffing numbers and their deployment, the CPT's delegation paid particularly close attention to the efforts that have been made to recruit, deploy and retain new operational custodial staff. Nevertheless, in each of the three prisons that it visited, there remained challenges around staff retention, with the result that the actual numbers of staff in direct contact with prisoners in accommodation areas had not changed significantly since the CPT's 2016 visit.

For example, during the 2019 visit, the delegation noted that at *Doncaster* and *Wormwood Scrubs Prisons*, units with over 90 men were being managed day-to-day by only three staff members, most of whom had relatively little experience. In *Doncaster Prison*, one of the most volatile House Blocks (Block 3A) consisting of 96 men (with a high percentage of young adults and the highest levels of incidents of violence) was effectively being overseen by three or four very young inexperienced staff who were clearly only just in control. Any incident put a strain on the very limited front-line staff numbers.

Many staff with whom the delegation spoke underlined the considerable challenges encountered by newly-recruited, inexperienced and often young prison officers. With just 8 weeks of core training and a month of onsite shadowing, the violence encountered, stress levels, burnout and lack of on-going support, led numerous staff to leave. By way of illustration, at *Wormwood Scrubs Prison*, in the six months prior to the delegation's visit, 28 new staff joined the prison (on average 4.6 per month) and 41 left the prison (on average 6.8 left per month), a net loss of 13.

Overall, the CPT notes that although some progress has been achieved in recruiting new frontline staff, the most recent available figures from the Ministry of Justice suggest that retaining those staff remains an issue. At 30 June 2019, there were 22,321 full-time equivalent band 3 to 5 prison officers which, although an increase of 713 compared to 30 June 2018, constitutes a decrease of 309 since the previous quarter. Although 4,108 band 3 officers were appointed during those 12 months, 2,674 band 3 to 5 officers left during the same period, 64.2% of whom resigned. As a result of this attrition rate, the proportion of band 3 to 5 prison officers with less than 3 years' service remains high (at 42%) and is rising (up from 37.8% in June 2018).

66. Moreover, more recently-recruited staff also indicated that it had become custom and practice for more experienced staff to remain in their Wing offices, whereas new recruits were expected to be out on the wings in direct contact with the prisoners, reacting to their incessant questions and demands and providing the first response to sudden flare-ups of inter-prisoner violence.

67. Second, as concerns staff training, the Prison Service acknowledges that the current eight-week training course and a four-week onsite shadowing stint with a more experienced officer is not sufficient in itself to fully prepare a new recruit. Positively, staff coaching and mentoring teams have now been established, who rotate around the prison system, staying for several weeks to coach new staff at different prisons.[36] That said, the example given in Section 2 above of the conduct of one senior officer who was part of such a mentoring team raises concerns for the CPT about the nature of the example being set for newer officers.

Further, courses are being trialled to help new staff in their induction and with support. There are plans to adopt an apprenticeship model of training from 2020, which will focus more on resilience and support for staff.

While the CPT welcomes the plans for some further training models, it considers that more in-depth and a far longer period of initial staff training is urgently required. Given the large numbers of inmates on the local male prison wings (around 90-100) and the numbers of staff (around four) and the high incidences of violence among inmates and towards staff,[37] the current training was evidently insufficient to equip new prison officers with the skills necessary to maintain control and safety for the prisoners and themselves. It was clear that some of the staff struggled to maintain control on the wings, notably at *Wormwood Scrubs* and at *Doncaster Prisons*. The delegation viewed several incidences first-hand, and on BWVC footage, where inmates flatly refused to comply with staff members' orders and officers struggled to challenge and control inmates.

Equally, the CPT considers that ongoing prison officer training is as important as in-depth adequate induction training, including conflict management, inter-communication skills principles of dynamic security, safeguards on control and restraint and de-escalation techniques. **The CPT requests an update on the current training and any developments planned.**

68. Staff in all three prisons visited spoke of the challenges of trying to maintain order given the high percentage of inmates using drugs. The delegation observed that, in some wings, staff did not appear to be in control, with prisoners smoking drugs (including psychoactive substances such as "SPICE") openly, unchallenged. At night, many prisoners complained that the stench of drugs was so strong that they had to block the ventilation grilles in their cells in an attempt to stop themselves from "passive smoking". The seizures, fits and flashes of sudden violence due to substance use were not only regular, they occurred daily and occasionally, hourly, according to prisoners, staff and witnessed first-hand by the delegation (see section on '*Substance use*').

69. The CPT considers that in 2019 the number of front-line Band 3-5 custodial prison staff remains below the critical mass needed to maintain control and to provide safe custody. While steps have been taken in the last couple of years to increase the number of front-line officers, more investment, long and more in-depth training and fewer prisoners would all cumulatively contribute to the resolution of the problem. In order to ensure such officers are able to operate effectively and to counter the high attrition rates, greater investment should be put into the officer initial training course and into providing more support in prison for new recruits

---

36 As part, *inter alia*, of the United Kingdom government's '10 Prisons Project' (see footnote 8 above).

37 10,085 assaults on prison staff from September 2017-2018, up 29% in one year: Safety in Custody Statistics, England and Wales: deaths in prison custody to December 2018 and assaults and self-harm incidents to September 2018', Ministry of Justice, published 31 January 2019.

The CPT invites the United Kingdom to consider other European practice in this respect,[38] as reflected in the Committee of Minsters Council for Penological Co-operation (PC-CP) Guidelines Regarding Recruitment, Selection, Education, Training and Professional Development of Prison and Probation Staff.

The CPT recommends that the United Kingdom authorities urgently put in place measures to bolster the retention of newly-recruited and freshly-trained front-line custodial staff, through extending the initial training and providing regular refresher courses and adequate psychological support and remuneration to reflect the challenging nature of the role of a prison officer.

The CPT also recommends that for all three prisons visited, prison management should ensure that staffing levels are regularly reviewed in each wing, that there is an adequate allocation of experienced staff numbers to ensure safety on the wings, and that all rostered staff are actually present on each wing. Management in the three prisons should ensure that staff have the requisite skills, confidence and competence to challenge unlawful behaviour and help prisoners in crisis.

4. Conditions of detention and regime

a. material conditions

70. The general living conditions at *Doncaster Prison* had not changed substantively since 2016 and cells measuring some 8m², which included an only partially-screened sanitary annexe, continued to be used for the accommodation of two prisoners. This provided cramped living conditions of less than 4m² of living space for each inmate, excluding the sanitary annexe.

71. At *Liverpool Prison*, cells also measured some 8m² and were designed for single use, with the toilet only partially screened or even totally un-screened. With the operational capacity temporarily halved in order for the prison to carry out its refurbishment programme, many prisoners were held in single cells at the time of the visit. Nonetheless, when the reduced operational capacity ends in 2020, the majority of cells will return to being used for double occupancy for which they are not suitable.

After a critical HMIP report on the prison in 2017,[39] at the time of the 2019 visit, a refurbishment programme was underway and various wings had been deep-cleaned, the damp treated and a number of cells decommissioned until refurbished, as they were – in the words of the prison management – "riddled with damp". Cell windows in some of the wings had also been replaced. That said, conditions remained poor, even in the refurbished cells; ventilation holes were often blocked, many cells were covered in graffiti and had chipped paint and plaster falling off the walls. While the vermin and cockroach problem identified by HMIP had somewhat abated due to the deep-cleaning programme, large cockroaches were still evident, especially around the sink and toilet areas, their persistence doubtless assisted by the fact that prisoners had to eat every meal in their cells. Moreover, the rapid turnover of prisoners exacerbated the general wear and tear to which the physical environment was subjected. Indeed, many prisoners complained about the unhygienic conditions in which they had to live, eat and sleep.

---

38 For example, Portugal (where six to nine months' training is the norm) and Norway, where the training period is for two years.

39 HMIP, Report on an unannounced inspection of HMP Liverpool, 4-15 September 2017, "there were infestations of cockroaches in some areas, broken furniture, graffiti, damp and dirt".

72. *Wormwood Scrubs Prison*, being of a similar design and age to Liverpool Prison, suffered from similar problems. The majority of the prisoners were doubled up in cells – measuring approximately 8m², including the sanitary area –which had been designed for single use. Further, the in-cell toilets were either only partially screened or, notably in E Wing, were totally un-screened, and several were filthy.

Despite some refurbishment in 2018, many problems remained. Many cells were dirty, and graffiti covered the walls and ventilation holes were blocked; some cells also had painted-over windows as well as unscreened toilets, cumulatively creating a filthy and unsanitary environment, with insufficient ventilation and occasional obscured access to natural light. Further, many of the cell doors had broken window hatches, leaving jagged glass. This was all the more concerning given that some of these cells held persons suffering from mental health disorders and who were, at that time, under ACCTs (see also *Prevention of Self-harm*, Section 6(b)).[40] Litter also covered E Wing exercise yard.

Further, during the delegation's visit, part of E Wing had non-functioning call bells and, at night, inmates had to push slips of paper under the door to try to attract the attention of custodial staff. Inmates alleged that these missives were regularly ignored. The prison management confirmed that they were aware of the problem and that, by the end of the delegation's visit, this problem had been solved.

As was the case with *Liverpool Prison*, the rapid turnover of prisoners exacerbated the general wear and tear to which the physical environment was subjected.

73. The CPT notes that many other Victorian-era prisons remain in operation and it considers that, despite increased efforts at refurbishment at *Liverpool* and *Wormwood Scrubs Prisons*, both still require considerably more work. **The CPT recommends that Liverpool and Wormwood Scrubs Prisons be deep-cleaned and refurbished on an ongoing basis; all cells should be regularly checked for broken window hatches, blocked ventilation holes or obstacles to access natural light and each cell should be clean, free of vermin and insects and in a decent state of repair, and exercise yards should be cleaned on a daily basis from debris and litter.**

74. The CPT considers that a single-occupancy prison cell should, at minimum, measure 6m² plus the space required for a sanitary annexe (usually 1m² to 2m²). For double-occupancy, this should be at least 8m², plus a fully partitioned sanitary annexe. Moreover, it is desirable for double-occupancy cells to measure 10m² plus a sanitary annexe.[41] These basic requirements were not being met in the vast majority of cells at both *Doncaster* and *Wormwood Scrubs Prisons*, and this will also be the case for *Liverpool Prison*, once it returns to full operational capacity.

The CPT recommends that the United Kingdom authorities take steps to cease the doubling-up of prisoners in cells designed for single use at Doncaster and Wormwood Scrubs Prisons, and to ensure that sanitary annexes in double-occupancy cells be fully partitioned.

As concerns Liverpool Prison, the CPT recommends that its CNA and operational capacity remain at their current levels (halved), to ensure that cells designed for single use are generally not doubled-up.

---

40 Assessment, Care in Custody and Teamwork (self-harm prevention procedure).

41 See CPT/Inf (2015) 44, 'Living space per prisoner in prison establishments: CPT standards', 15 December 2015.

75. In the United Kingdom's 2015 Spending Review, the Ministry of Justice was awarded £1.3 billion to invest in modernising the prison estate and replacing the old, costly and out-dated Victorian-era prisons. In the 2019 Spending Review, announced in September 2019, the Ministry of Justice's resource budget will increase by £511 million.[42] Moreover, in 2019, two new prisons are under construction. However, as stated above, the CPT considers that this should not lead to the construction of very large prisons, which replicate many of the traits of the past prisons, but instead provide an opportunity to build smaller (e.g. 400 maximum occupancy) community prisons.

In March 2019, the United Kingdom's House of Commons Justice Select Committee recommended that as part of its Justice 2030 Project the Ministry of Justice develop a realistic, properly costed, long-term estate strategy, as continuing to plough money into Victorian-era prisons and to fund the accommodation of the ever-increasing prison population was ineffective, inefficient and did not represent smart justice.

The CPT reiterates its views regarding very large prisons (see paragraphs 22 and 23). **It also trusts that the authorities of the United Kingdom will ensure that the prison reform strategy will incorporate the House of Commons Justice Committee's report recommendations, and notably ensure the development of a realistic, properly costed, long-term prison estate strategy.**

b. regime / 'purposeful activity'

76. Inmates are formally entitled to educational activities and vocational training, work, organised physical exercise, cultural and recreational activities. However, in the report on the 2016 visit, the CPT underlined that the activities, education and association time offered remained insufficient. Further, attendance rates at education were poor, often due to "lock-downs" where too few staff were available to move prisoners safely between locations and consequent restrictions in regime were applied, reducing to a core basic regime.[43]

The need for improvement to education and purposeful activities in prisons has been acknowledged at Ministerial level, and in May 2018, an Education and Employment strategy was published by the Ministry of Justice as a result of various reviews of the quality of education provision in prisons.[44] This aims to give prison governors more direct autonomy and accountability for prisoners' access to quality education in their prisons; from 1 April 2019, a new 'Governor Autonomy' agenda commenced, which delegates the responsibility for managing education in prisons to prison governors.[45]

---

42 The most recent Spending Round 2019 policy, published on 4 September 2019, sets out the government's spending plans for 2020-21, including the "funding to begin delivery of the government's £2.5 billion commitment to create an additional 10,000 prison places [..], £100 million to increase security in prisons through the introduction of more airport-style security scanners, mobile phone detection and prevention technology, and anti-corruption and intelligence operations".

43 Report to the Government of the United Kingdom on the visit to the United Kingdom carried out by the CPT from 30 March to 12 April 2016, CPT/Inf (2017).

44 Shortly after the 2016 visit, an independent review of prison education conducted by Dame Sally Coates was published, which found fundamental deficiencies in the provision, attendance rates and quality of education in adult English prisons and the need for wide-scale change; cf. 'Unlocking Potential: A review of education in prison', the Coates Independent Review, May 2016.

45 Further, a procurement process (Prison Education Framework (PEF)) has been run by the Ministry of Justice for new education providers, and the new contracts will run for four years, with an option of extending them for another two. Alongside the PEF process, governors will also be able to directly commission services

77. At *Doncaster, Liverpool* and *Wormwood Scrubs Prisons*, the CPT's delegation found that a basic range of workshops and activities was on offer to prisoners, including education classes (English and maths), textiles, art and manufacturing workshops, sports and internal prison employment (gardening, kitchen work, laundry, cleaners, painters, etc.). It also included some vocational courses such as manufacturing, painting and decorating, barbering and industrial cleaning courses.

Given that the three establishments visited are local prisons holding a considerable number of inmates on remand (around 20% of the prison population) who are not formally required to work, it is positive that a number of remand prisoners could in principle have access to work and or education.[46]

Nonetheless, in practice a considerable number of inmates did not benefit from work or education and were instead confined to their cells.

78. At *Doncaster Prison*, there were 694 full-time equivalent work and activity places, including 164 in education for a population of 1086. Activities took place for 2.5 hours in the morning and afternoon on weekdays, and additionally prisoners were offered three hours of association per day, which represents a good amount of out-of-cell time. That said, for some 30% of the population who were unemployed (283), the regime was more restricted, and these inmates were in principle only unlocked for some three and a half hours per day. During a spot check during the core working day, the delegation found that roughly 50% of all inmates were not in work or activities.[47]

The open design and layout of the house-blocks meant that many prisoners were able to eat communally, rather than in their cells. This is positive. However, thought should be given to better managing the dining and association space to avoid outbreaks of inter-prisoner violence.

At Liverpool Prison sufficient work, activity and education places for the prisoner population were on offer;[48] and although 90% of prisoners had registered for an activity place, some 30% of this number did not attend. Those inmates who had employment or participated in activities were able to be out of their cells on weekdays for between five and seven hours and for a further one and half hours for association, exercise and showers and on weekends for some 6 hours. However, for one quarter of all inmates who were not engaged in activities at the time of the visit, there was little in the way of a purposeful regime and they were confined to their cells for approximately 21 hours per day.

A similar situation was in evidence at *Wormwood Scrubs Prison*[49] with 320 prisoners unemployed and 41 unallocated to work or activities out of an inmate population of 1073. Inmates who worked or participated in activities were able to be out of their cells for around six hours and were offered a further one and a half hours for association, exercise and showers on weekdays. However, the remaining approximately one-third of inmates remained locked in their cells for some 20 hours per day. Moreover, the CPT's delegation received a number of complaints from unemployed prisoners that they were in practice confined to their cells for some 22 to 23 hours per day, with only one to two hours out of their cells during which time they had to shower, exercise, make a telephone call and carry out their domestic tasks.

---

46 For example, at Wormwood Scrubs around 50% of the 229 remand prisoners were in work and or education and at Liverpool out of the 166 remand prisoners, 80% had access to work or activities.

47 These inmates included those who were formally unemployed, some inmates who worked part-time at other times of the day, some work refusers and some inmates on basic regime (who had lost their place at work).

48 571 work and activity places, and 100 full time-equivalent education places. There was a 70% average attendance rate.

49 Some 1300 full and part-time work and activity spaces work places, and some 900 full time-equivalent education places.

The delegation also heard from detained persons and staff that long lock-up times contributed to the inmates' sense of frustration and boredom, which could materialise into outbursts of violence. As in 2016, the CPT believes that a poor regime could well be a contributory factor for the current spike in violence in English prisons.

The CPT recommends that at Doncaster, Liverpool and Wormwood Scrubs Prisons, inmates who are unemployed or do not participate in activities for various reasons should be provided with much more out-of-cell time than currently provided and, as far as possible, be offered meaningful activities during association time.

The CPT would also like to be updated on the actions taken under the recent Education and Employment Strategy by the United Kingdom authorities and its initial impact.

79. As was the case in the past, the CPT's delegation received many complaints from inmates at *Liverpool* and *Wormwood Scrubs Prisons* that outdoor exercise (Rule 30 of the Prison Rules)[50] was offered for 30 minutes only and that during this time prisoners often had to shower and make telephone calls as well. Moreover, at *Wormwood Scrubs Prison* the exercise yard for the more vulnerable prisoners (E-Wing) was closed, meaning that these prisoners had to share the other prisoners' exercise yards, albeit at different times.

The CPT has repeatedly criticised the lack of outdoor exercise offered to prisoners in the United Kingdom,[51] as well as expressed misgivings about the very flexible wording of Rule 30. It is high time that action is taken to ensure that the basic requirement of at least one hour of outdoor exercise is a fundamental right for all inmates. Further, all prison exercise yards should provide shelter from inclement weather and possess a means of rest which was not the case in all of the yards visited at both prisons. Action is needed to implement this long-standing CPT recommendation, which is also provided for explicitly in Rule 27(1) of the European Prison Rules.

The CPT calls upon the United Kingdom authorities to ensure that all prisoners are offered one hour of outdoor exercise every day. The current Prison Rule 30 and the relevant Prison Service Instruction should be amended accordingly.

Moreover, it recommends that all exercise yards at Liverpool, Wormwood Scrubs and Doncaster Prisons provide some shelter from inclement weather and that the exercise yard of Unit E at Wormwood Scrubs Prison be reopened as soon as possible.

---

50 Prison Rules 1999, Rule no. 30: 'If the weather permits and subject to the need to maintain good order and discipline, a prisoner shall be given the opportunity to spend time in the open air at least once every day, for such period as may be reasonable in the circumstances.'

51 See CPT/Inf (2009)30, paragraph 42 and CPT/Inf (2005)2, paragraph 90.

5. Discipline and segregation

a. disciplinary procedures

80. The discipline and adjudication process within the prison system in England and Wales was described in the report on the 2008 visit to the United Kingdom,[52] and the overall process has remained substantially unchanged.[53] The CPT notes that a wider review of the current system of prison discipline is currently underway and **it would like to be informed on the progress of the review on discipline (including an update on the proposed new policy framework on this area)**.

81. Overall, according to the United Kingdom authorities' statistics for 2018, proven adjudications for 'violence' offences have reached their highest level since 2015,[54] which is consistent with the recent 'Safety in Custody' bulletin[55] which records that confirmed assaults and serious assaults have reached a record high.

More serious alleged breaches of prison rules are adjudicated upon by Independent Adjudicators (instead of Prison Governors) as they have the power to award additional days to a sentence. During 2018, there were 31,168 adjudications heard by Independent Adjudicators, which represents a 6% rise compared to 2017. Despite this rise, the proportion of adjudications for 'violence' has remained fairly stable over recent years, accounting for between 14% and 16% of all adjudication hearings in each year since 2015. Moreover, the proportion of proven adjudications for unauthorised transactions (which includes possession of alcohol, drugs and other prohibited items) has continued to rise in recent years, increasing from 24% in 2015 to 31% in 2018.[56]

82. At each of the three prisons visited, the delegation found that the disciplinary procedures followed were, in general, fair and just. The adjudication process operated smoothly and there were regular reviews of the proceedings by multi-disciplinary teams at each of the three prisons visited.

83. As regards time-limits and procedures, charges in relation to disciplinary offences must be laid "as soon as possible" and at the latest within 48 hours, save in exceptional circumstances. The prisoners should be informed of the charge "as soon as possible" and in any case before the first adjudication hearing. This is done by means of "Notice of Report" forms given to the prisoners. Prisoners were generally not required to sign a receipt, indicating when they had received such papers. However, the delegation did note one case in Liverpool where that had happened. The CPT considers that it is good practice to require prisoners to sign a receipt when receiving a "Notice of Report" form **and invites the United Kingdom authorities to introduce such a practice in all prison establishments.**

---

52 See *Discipline* section of the Report to the Government of the United Kingdom on the visit to the United Kingdom carried out by the CPT from 18 November to 1 December 2008; CPT/Inf (2009) 30.

53 That said, the CPT's delegation notes that a revised Prison Services Instruction (PSI 5/2018) was issued on 21 December 2018 to provide policy updates to support front-line staff on discipline matters.

54 Op.cit. footnote 23. There were 204,715 adjudication outcomes, which was an increase of 7% compared to 2017. The total number of proven adjudications for 'violence' offences increased from 16,922 (in 2017) to 18,810 (in 2018), an increase of 11%.

55 Op.cit. footnote 24.

56 Offender Management Statistics Bulletin, England and Wales, quarterly: October to December 2018, and Annual (calendar year) 2018 Prison population: 31 March 2019, Ministry of Justice, published 25 April 2019. Equally, the number of sanctions of additional days added to sentences had also risen. As concerns the use of 'Additional Days' as punishment, additional days were awarded on 22,365 occasions in 2018 (up from 21,081 in 2017). Upon these 22,365 occasions, a total of 380,169 additional days were added to prisoners' sentences in 2018 (up from 359,081 in 2017).

Apart from Sundays or public holidays, the adjudication hearing generally took place the day after the charges were laid. In the prisons visited, efforts were being made to swiftly deal with adjudications, for example in *Wormwood Scrubs,* adjudications took place seven days a week and a new system to reduce the time between hearings had been introduced.

84. In each of the three prisons visited, the CPT's delegation noted the overall procedural fairness and effectiveness of the adjudications that it observed. Nonetheless, it did encounter cases in which CCTV or BWVC footage that could have been relevant to the adjudication had not been seen by the adjudicator; when such evidence is available it should always be viewed.

The delegation also noted the considerable number of adjournments of proceedings due to operational mistakes (prisoner not attending due to being taken to activities or other commitments) and/or to refusals of prisoners to attend; this issue should be addressed.

The CPT recommends that the procedural process of adjudications in Doncaster, Liverpool and Wormwood Scrubs Prisons be further strengthened by addressing the above issues, notably:

- **that the viewing of CCTV or of BWVC footage be mandatory part of the adjudication process (and also the wearing of turned-on BWVCs to be established as a mandatory part of standard prison officer equipment); and**
- **that the prison authorities make further efforts to reduce the number of adjournments of proceedings due to operational mistakes and to the refusal of prisoners to attend.**

85. The CPT notes that under Prison Rule 55(1)(b) and (3), as amended by the Prison (Amendment) Rules 2002, 5(b) and (f), it is now possible to impose sanctions of cellular confinement of up to 21 days. It notes that the adjudicators rarely imposed cellular confinement and very rarely for 21 days; for example, at *Wormwood Scrubs Prison* in the month of April 2019 alone, out of 213 adjudications, only 2 instances of cellular confinement sanctions were given, and 8 instances of suspended cellular confinement (two of which were for 21 days).

Given that cellular confinement can have an extremely damaging effect on the mental, somatic and social health of those concerned it should only be imposed as a disciplinary sanction in exceptional cases and as a last resort, and for the shortest possible period of time. Moreover, the CPT has long recommended that the maximum period for solitary confinement as a punishment should be no more than 14 days for a given offence, and preferably lower and that the Prison Rules should be amended to reflect this. Further, there should be a prohibition on sequential disciplinary sentences resulting in an uninterrupted period of solitary confinement in excess of the maximum period. Any offences committed by a prisoner which might call for more severe sanctions should be dealt with through the criminal justice system.

The CPT recommends that the Prison Rules be amended to address the above-mentioned norm, and, pending the amendment, prison governors should in practice not impose a disciplinary punishment of cellular confinement of more than 14 days.

b. segregation

86. Prisoners in England and Wales whose behaviour is judged to be prejudicial to the good order and discipline of the running of the prison may be removed from association upon an order of the Prison director/governor, under Rule 45 of the Prison Rules 1999.[57] A prisoner may be "removed from association" for reasons of maintaining good order and discipline (GOOD), protecting the interests of other prisoners and ensuring the safety of other persons. The rules and principles governing segregation of this nature have been described in the reports on the CPT's previous visits to the United Kingdom.

87. The CPT's delegation visited the male Segregation Units in *Doncaster, Liverpool* and *Wormwood Scrubs Prisons* and the material conditions of these units call for no particular comment, with the exception of *Wormwood Scrubs Prison*'s Segregation Unit which showed signs of wear and tear and was in need of refurbishment; in particular, one of its "safer cells" (cell 79) was in a dilapidated state with damaged artificial lightning, a non-functioning call bell and a broken CCTV.

Further, the delegation noted that the exercise yards of the Segregation Units at each prison provided no shelter against inclement weather and had no means of rest.

The CPT recommends that the above deficiencies be remedied, most notably that the cells of the Segregation Unit at Wormwood Scrubs Prison, including the safer custody cells, be refurbished and that shelters, and a means of rest be installed at Doncaster, Liverpool and Wormwood Scrubs Prison Segregation Units' exercise yards.

88. At *Liverpool and Wormwood Scrubs Prisons*, prisoners in segregation had access to showers on a daily basis; however, at *Doncaster Prison*, prisoners could allegedly only access the showers once every two or three days, and in one case, every four days. **In line with the practice seen at Liverpool and Wormwood Scrubs Prisons, the CPT recommends that the management of Doncaster Prison ensure that all prisoners, including those in segregation, are able to access showers on a daily basis.**

89. The findings of the CPT's delegation were that in the three segregation units visited, the vast majority of prisoners were locked in their cells for between 22 and 23 and a half hours per day and were provided with no structured regime – no purposeful activities, nor access to work. Save for 30 minutes' outside exercise (often alone or with one other risk-assessed prisoner), occasional visits and daily access to phone calls, these segregated prisoners lived in virtual solitary confinement with a notable absence of any meaningful human contact.

---

57 As amended, *inter alia*, in 2015.

Moreover, the CPT is extremely concerned by the fact that prisoners could be held in such conditions for prolonged periods. In the segregation units of the three prisons visited, a number of prisoners held in segregation under the different segregation regimes (security, discipline and protection) had been held for periods of over 42 days (two in *Doncaster*, one in *Liverpool* and three in *Wormwood Scrubs*). Moreover, two prisoners at *Wormwood Scrubs Prison* had been held for extremely long periods of time in segregation: in one case a prisoner had been held in segregation for 117 days consecutively and, in another case, for 103 days (with short intervals). Reintegration efforts from the staff to integrate prisoners back into the mainstream population were not evident at any of the three prisons and there were no step-down units on which prisoners could be placed prior to going back onto an ordinary accommodation unit.

90. The CPT has long considered that prisoners placed in administrative solitary confinement for preventative purposes (i.e. prisoners removed from association under Rule 45) should have an individual regime plan, geared to addressing the reasons for the measure. This plan should attempt to maximise contact with others – staff initially, but as soon as practicable with appropriate other prisoners – and provide as full a range of activities as is possible to fill the days. There should be strong encouragement from staff to partake in activities and contact with the outside world should be facilitated. Throughout the period of segregation, the overall objective should be to persuade the prisoner to re-engage with the normal regime. The longer the time spent in segregation, the more developed the regime on offer to inmates should be.

As outlined above, such an approach was barely in evidence at the prisons visited by the CPT in 2019. Imposing solitary confinement for prolonged periods has a negative impact on the mental health of prisoners and does not lead them to behave better. Prisoners requiring longer-term separation could be placed, for example, in step-down units with an increased multi-disciplinary staff presence to assist the prisoner to prepare for a return to an ordinary accommodation unit and eventually the community.

91. Equally, the CPT considers that once it becomes clear that solitary confinement is likely to be required for a longer period of time, a body external to the prison holding the prisoner, for example, a senior member of the headquarters staff, should become involved in providing oversight. A right of appeal to an independent authority should also be in place. When an order is confirmed, a full interdisciplinary case conference should be convened, and the prisoner invited to make representations to this body. A major task for the review team should be to establish a plan for the prisoner with a view to addressing the issues which require the prisoner to be kept in solitary confinement.

Among other things, the review should also look at whether some of the restrictions imposed on the prisoner are strictly necessary – thus it may be possible to allow some limited association with selected other prisoners. The prisoner should receive a written, reasoned decision from the review body and an indication of how the decision may be appealed. After an initial decision, there should be a further review at which progress against the agreed plan can be assessed and if appropriate a new plan developed. The longer a person remains in this situation, the more thorough the review should be and the more resources, including resources external to the prison, made available to attempt to (re)integrate the prisoner into the main prison community. The prisoner should be entitled to require a review at any time and to obtain independent reports for such a review.

At all the prisons visited, the CPT's delegation found that there was a need to reinforce the procedural safeguards concerning prolonged segregation for GOOD or protection purposes and, in particular, the appeals procedure to segregation decisions.

92. Further, in each of the segregation units of the prisons visited, the delegation found, in practice, that prisoners interviewed were not generally in possession of any documentation or paperwork in relation to the legal grounds for holding them in segregation pending adjudication under Prison Rule 53(4).

Moreover, notably, in *Wormwood Scrubs*, the delegation found that there were some shortcomings in the recording of data on the use of the segregation unit, including its special accommodation cells (for example, the lack of a proper observation book, or of a log of the use of the special accommodation cell, as well as the lack of uploading of data to the IT system SMARG[58] designed to monitor the use of segregation, and the archiving of segregation files piled up in a storage room in a disorganised way). At the time of the visit, the management of *Wormwood Scrubs* had started to take steps to address some of these shortcomings.

93. The CPT recommends that the United Kingdom authorities put in place a psycho-social support system for Rule 45 prisoners held in segregation units for longer than two weeks and provide them with greater opportunities for association and engagement in activities. Such prisoners should benefit from a structured programme of purposeful and preferably out-of-cell activities and be provided with meaningful human contact for at least two hours every day and preferably more, with staff and/or with one or more other prisoners. Each of these prisoners should have an individual regime plan to assist them to return to a normal regime, in light of the above remarks.

Further, it wishes to receive the comments of the authorities about the feasibility of establishing a step-down facility from the segregation unit for persons who have been held for long periods in segregation in each of the three prisons visited.

The CPT also recommends that procedural safeguards concerning prolonged periods of segregation be strengthened and in particular an independent review and oversight mechanism be put in place in such situations and, more generally, the appeals procedure for segregation decisions be made more transparent to prisoners and effective.

Moreover, the CPT would like to be provided with an update on the measures taken to ensure that all data pertaining to the use of the segregation units are properly recorded and stored.

---

58 Prisons' Segregation, Monitoring & Review Group ("SMARG").

6. Health care services

a. general health care

94. Health-care services for prisons in England and Wales are run by the National Health Service (NHS) and each prison falls under the responsibility of a local Primary Care Trust; the system has remained broadly unchanged since the CPT's 2016 visit.[59]

95. As regards health-care staffing, at *Doncaster Prison,*[60] there was a sufficient number of nursing staff[61] who provided 24-hour nursing cover. That said, there were only 0.7 equivalent full-time (FTE) General Practitioner (GP) (two part-time GPs) for general health care, which was clearly insufficient to meet the needs of over 1,000 inmates. The delegation also noted with concern that there were various vacancies within the health-care team, notably, five posts were vacant in the general and mental health-care medical team and three in the Substance Misuse team. The prison had regular access to relevant specialists (dentist, optician, podiatrist, physiotherapist, transmissible diseases specialists, among others) and dental care was adequate.

At *Liverpool Prison,*[62] health-care staffing was good (not least because the prison population had halved while the staffing levels had remained approximately the same). There were the two FTE GPs (three GPs on rotation), and sufficient nursing staff in general health care and the in-patient unit, who provided 24-hour nursing cover.[63] Liverpool Prison also had one full-time dentist and a dental nurse and dental care was generally adequate. Equally, it was visited regularly by other relevant specialists (optician and podiatrist, among others).

At *Wormwood Scrubs Prison,*[64] there were two FTE GPs (three GPs on rotation) three nurse practitioners, and adequate nursing staff in general health-care and the in-patient unit, who provided 24-hour nursing cover.[65] Also, there were also sufficient numbers of pharmacists[66] and the prison was visited regularly by other relevant specialists, and dental care was generally adequate. However, the delegation noted that there were around five vacant nursing posts and one vacant health care assistant post within the health-care team.

The CPT recommends that the provision of GPs be increased at Doncaster Prison to a total of at least two, and preferably three, FTE GPs and that serious efforts be undertaken to fill all of the remaining vacancies within the health-care team at Wormwood Scrubs Prison.

96. The CPT's delegation was pleased to note that all inmates at *Doncaster*, *Liverpool* and *Wormwood Scrubs Prisons* were screened by a nurse within 24 hours of arrival and were also seen, if necessary, by a medical doctor. Moreover, the CPT's delegation found that the medical screening was of a good quality.

---

59 See Report on the visit to the United Kingdom from 30 March to 12 April 2016, CPT/Inf (2017) 9.

60 An occupancy of 1086 inmates.

61 Nursing staff positions: 15 nurses, 10 health-care assistants and one nurse for learning disabilities. There was also one pharmacist (0.6 equivalent to full-time) and eight pharmacy assistants

62 An occupancy of 681 inmates.

63 Nursing staff positions: 17 nursing staff and 10 health-care assistants in general health care, and 16 health-care assistants for the in-patient unit.

64 An occupancy of 1073 inmates.

65 Nursing staff positions: 17 nursing staff (2 clinical nurse managers and 15 nurses (4.69 vacant posts) and seven health-care assistants.

66 One principal pharmacist, one clinical pharmacist and 12 pharmacist assistants (with one vacant post).

97. In the course of the visit, the CPT's delegation received several complaints from prisoners about delays in accessing specialist medical support at both *Wormwood Scrubs* and *Liverpool Prisons*. One specific case at *Wormwood Scrubs Prison* merits reference.

Mr X, a young inmate in his early 20s, entered *Wormwood Scrubs Prison* on 6 December 2018. The following day, Mr X refused to move from the First Night Centre (FNC) to the general mainstream population and at around 11.30 a.m. was restrained and forcibly moved to a main wing cell in B-Wing. During the restraint Mr X alleges that he had a seizure during the time that he was pinned to the floor, with several officers applying pressure to his legs and spine. Staff did not believe that Mr X had had a seizure but he was referred to hospital later that day by the prison GP as Mr X could not move his legs. The hospital, when discharging him back to the prison, recommended that he be seen by a physiotherapist and that if there were any future concerns, he should be referred directly to the neurosurgeons at Imperial College.

Mr X was returned to prison and given a wheelchair on the same main wing, as he could still not walk, but no other considerations were made for him (no adapted cell, no work placement review for accessibility, etc.). Further, wing staff – the same staff involved in the restraint operation – considered that he did not have real mobility issues and his wheelchair was removed for a time.

The delegation interviewed Mr X on 21 May 2019, and he was examined by the delegation's medical doctor; at that time, he was still located in an unadapted cell, with broken glass in the hatch of the door, the cell dirty and the walls covered in graffiti. He was reliant on a walking frame to pull his legs behind him. He alleged that he could not access work (because he could not climb stairs) and that staff were too busy to facilitate his use of the accessibility ramps for his wheelchair. Equally, every time he had a shower or used the toilet, he feared that he would slip and hurt himself. Moreover, he claimed that he was treated with disdain by the custody staff responsible for his wing, who remained the same officers who had performed the control and restraint operation on him on 7 December, which he alleges caused his legs to stop functioning. The custody staff confirmed to the delegation that they believed Mr X could walk.

Moreover, Mr X had submitted three separate complaints, alleging that his wing staff had used excessive and unauthorised force during the above control and restraint operation on 7 December 2018 and that he wanted an investigation to be opened. The CPT's delegation found that while all three complaints had been registered as received and logged onto the overall complaints register, two of the three complete complaints could not be found at all, and management acknowledged that they were "missing"; one of the complaints, which dated back several months, was subsequently found during the delegation's visit in the complaints clerk's drawer (see *accountability procedures*, Section 2(b)(v)).

98. An examination of the relevant medical and other records, including CCTV and BWVC footage, as well as interviews with staff, give cause for some concern. While the link between the restraint and the fact that the prisoner cannot walk is difficult to establish medically, nevertheless, there are a number of deficiencies in the medical and social care provided to Mr X from December 2018 to May 2019. After his evaluation at the A&E on 7 December 2018, Mr X was not sent to the hospital for further investigation by a neurologist or a neurosurgeon, as he should have been, for nearly five months. The delay in carrying out an MRI in this context (young man with walking problems) is excessive. Further, Mr X also was not placed in an adapted cell for his disabilities. Health-care staff should have explained to custody staff and management that Mr X did have problems walking and his medical and social needs should have been met, even if the symptoms were considered to be "functional".[67]

The delegation raised its concerns with the Prison Director and, by email on 31 May 2019, the delegation was informed by the prison authorities that "Mr X has been referred to a specialist neurologist by Health care and is currently living in the disability enabled cell on A-Wing. This enables him to shower and toilet with the disability aids fitted in the cell".

99. **The CPT calls on the United Kingdom authorities to ensure that an independent investigation be undertaken into this case with a view to analysing the reasons for Mr X not receiving prompt medical care and appropriate support in prison for his condition. The CPT would like to receive a copy of the investigation report and to be informed of any "lessons learned" to improve existing procedures and practices to avoid similar such situations arising.**

Further, the CPT recommends that Mr X's serious complaints about alleged ill-treatment during the episode of control and restraint on 7 December 2018 be effectively investigated and the procedure of complaints involving staff ill-treatment be reviewed across the estate and, notably at Wormwood Scrubs Prison, be redesigned to ensure the primacy of the safety of the complainant at all times (see *Violence* and *Investigation* Section 2 above).

100. As regards the quality of medical documentation, the CPT's delegation found that at *Doncaster* and *Liverpool Prisons* it was mostly good. Notably, there was generally a full description of injuries and regular (but not systematic) use of body maps, as well as the use of the reporting procedures (Form 213) for injuries to prisoners.

However, at *Wormwood Scrubs Prison*, forms designed to record injuries were found to be incomplete or inaccurate, or indeed, were often not completed at all. Moreover, in each of the three prisons, there was little evidence of any conclusions formulated by doctors as to the causal link between the injuries observed and any allegations of ill-treatment made by the prisoners. Further, it was not clear to the delegation that Form 213 were automatically forwarded to an independent body empowered to conduct investigations, including criminal investigations.

---

67 The term "functional" is used to denote a possible psychological disorder, observed in the absence of any evident, treatable, organic lesions.

The CPT recommends that steps be taken by the United Kingdom authorities to ensure that the prison medical services at the establishments visited fully play their role in the system for preventing ill-treatment, ensuring that:

- **at *Wormwood Scrubs Prison*, when recording injuries, health-care professionals systematically and fully complete the body maps and Form 213 reporting procedures;**

- **at *Doncaster*, *Liverpool* and *Wormwood Scrubs Prisons*, health-care professionals indicate at the end of their traumatic injury reports, whenever they are able to do so, any causal link between one or more objective medical findings and the statements of the person concerned;**

- **at all prisons, traumatic injury reports relating to injuries likely to have been caused by ill-treatment (even in the absence of statements) be automatically forwarded to an independent body empowered to conduct investigations, including criminal investigations, into the matter; and**

- **at all prisons, the health-care professionals advise the prisoner concerned that the writing of such a report falls within the framework of a system for preventing ill-treatment, that this report automatically has to be forwarded to a clearly specified independent investigating body and that such forwarding does not replace the need for the prisoner to lodge a complaint in proper form.**

101. The CPT found that medical confidentiality was problematic at all three prisons visited. At *Doncaster Prison*, medication continued to be given out in an open corridor where other inmates could easily overhear the conversations between the nurse and inmates concerned.[68] Moreover, medication was dispensed through a barred window in the corridor, which, in the CPT's view, is not conducive to facilitating adequate relationships between health-care staff and inmates.

At *Liverpool Prison*, the In-Patient Unit clinics run by the health-care staff were conducted in the presence of prison officers, which undermines medical confidentiality. Moreover, the delegation observed that where prisoners returned from hospital without a letter of discharge, the health-care professionals relied on the escorting prison officer to relay the hospital decision about that prisoner-patient. This is not appropriate and hardly conducive to facilitating adequate relationships between health-care staff and inmates.

At *Wormwood Scrubs Prison*, prisoners queued along the main thoroughfare prison corridor for their medication to be dispensed which not only facilitated other inmates to see and hear conversations between the nurse and inmates concerned, but it also exposed vulnerable non-offence protection prisoners from E-Wing to intimidation and violence by inmates from other wings passing by (see '*Inter-prisoner violence*' Section). Alternative means should be found to guarantee that the dispensation of medication is carried out in a safe way that respects medial confidentiality.

The CPT recommends that the United Kingdom authorities take steps to ensure that medical confidentiality is respected in all prisons. In particular, at Doncaster, Liverpool and Wormwood Scrubs Prisons, steps should be taken to ensure that medication is not given to inmates in an open corridor nor dispensed through a barred window, and clinics should not take place in the presence of custody staff.

---

68 Report on the visit to the United Kingdom carried out by the CPT, 30 March to 12 April 2016, CPT/Inf (2017).

b. mental health care & the prevention of self-harm and suicide

102. Mental health-care services are provided by the BE Trust (sub-contracted by Care UK) at *Wormwood Scrubs Prison* and by Nottinghamshire Health Care NHS Foundation Trust for *Doncaster Prison* and by Mersey Care for *Liverpool Prison*.

Each of the three prisons visited had an in-patient health-care unit for those prisoners who suffered from mental health disorders and who could not be managed on the prison wing. There were also Mental Health In-Reach Teams at all three prisons that provided a secondary level of care. The mental health staffing levels at *Liverpool*[69] and *Wormwood Scrubs*[70] *Prisons* were adequate. While there was a generally reasonable complement of mental health staff at *Doncaster Prison,*[71] a notable exception was that 0.4 FTE psychiatrist was insufficient to meet the needs of 1,100 inmates.

Based on the size of the prison population, as well as the inmates' mental health needs, the CPT recommends that the presence of a psychiatrist at Doncaster Prison be increased to at least one FTE psychiatrist.

103. As regards transfers to hospital of prisoners suffering from severe mental health illnesses, the 2009 Bradley Report recommended that such prisoners should be transferred to a hospital within 14 days. In its report on the 2016 visit, the CPT considered that this 14-day limit was still too long, and the United Kingdom authorities responded[72] that NHS England was revising transfer guidance and the expectation was that transfers from prisons to hospitals, under the MHA, would be carried out within 14 days as the norm.

Nevertheless, the delegation observed that extended delays (i.e. longer than 14 days) continued to occur; for example, three prisoners at *Doncaster*, four prisoners at *Liverpool* and 10 prisoners at *Wormwood Scrubs*: the delays lasted from several weeks to several months; some patients were waiting since March or February, and one since January 2019. It appeared that the main reason for delays was a lack of available beds in specialised psychiatric facilities. In three cases (two at *Doncaster Prison* and one at *Liverpool Prison*), the CPT's delegation formally requested that the referral process be expedited. It was pleased to note that these requests were acted upon promptly by the Governors and health-care teams in the establishments concerned.

Conversely, the delegation also received information from the authorities that in some cases there were delays in discharging prisoners back to prison after the completion of their treatment, occasionally lasting for up to four weeks. This too was problematic given the already scare numbers of psychiatric hospital places available in the United Kingdom.[73]

---

69 At Liverpool Prison, the mental health team included: one matron, one psychiatrist four days per week and one consultant psychiatrist two-three days per week, six mental health staff nurses for the In-patient Unit, 15 mental health nurses for the units, one full-time psychologist.

70 At Wormwood Scrubs Prison, the mental health team included: 1.6 equivalent full-time psychiatrist and a full-time junior psychiatrist, 6.5 registered mental health nurses; at the In-patient Unit: eight registered mental health nurses; three health-care assistants and five temporary health-care assistants.

71 At Doncaster Prison, the mental health team included: one 0.4 equivalent full-time psychiatrist, five registered mental health nurses, six registered mental health nurses in psychiatric care, one part-time psychologist and one full-time counsellor.

72 Letter dated 28 June 2016 from the United Kingdom authorities to the Committee.

73 Report on the visit to the United Kingdom carried out by the CPT, 30 March-12 April 2016, CPT/Inf (2017)9 (Mental Health section).

Equally, the delegation noted that the in-patient health-care units at all three prisons continued to be used to primarily hold prisoners in need of psychiatric in-patient care. As recommended by the CPT in 2016, care should be taken to ensure that these units do not become a substitute for the transfer of a patient to a dedicated facility that can better respond to their mental health needs; and that the potential perceived lack of urgency to effect their transfer does not slow down the transfer process of prisoner-patients to the appropriate hospital.

The CPT reiterates its recommendation that a high priority be given to increasing the number of beds available in psychiatric hospitals to ensure that the in-patient health-care units at Doncaster, Liverpool and Wormwood Scrubs Prisons do not become a substitute for the transfer of patients to a dedicated hospital facility. To this end, the CPT would like to be informed about the outcome of the NHS review of the 2011 Department of Health Prison Transfer and Remission Guidance which they were undertaking in 2017, as well as the service review across all adult high, medium and low secure mental health services which commenced in June 2016.[74]

104. The CPT's delegation found once again that prisoners with severe mental health disorders were placed in segregation units at all three prisons visited.

At *Doncaster, Liverpool* and *Wormwood Scrubs Prisons*, there were several prisoners on ACCT review[75] placed in the segregation unit, some of whom were diagnosed by prison psychiatrists as suffering from severe mental health disorders and were awaiting transfer to hospital under the Mental Health Act, and others who were being held under an ACCT in the segregation unit without a pending transfer, despite having been diagnosed as suffering from severe mental health issues. At *Doncaster Prison*, the delegation's medical expert considered that segregation was a wholly inappropriate environment for such inmates and recommended that two of these inmates be transferred urgently to a psychiatric establishment to receive the appropriate treatment (see above).

Moreover, it was also not unusual that prisoners on ACCTs attempted self-harm or suicide while in segregation. At *Liverpool Prison*, a prisoner-patient (Mr Y) was being held in segregation at the time of the delegation's visit and had recently severely self-harmed. He was diagnosed by the prison psychiatrist as "medically fit to be held in segregation", but when interviewed by the delegation, the psychiatrist confirmed that Mr Y "presents as psychotic and there are associated risks to others (continuing psychotic symptoms around sacrificing someone) […]." The psychiatrist decided to recommend that Mr Y be transferred to the prison in-patient unit, and if necessary, be transferred to a psychiatric hospital.

The CPT recommends that prisoners with severe mental health conditions be immediately transferred for treatment in a closed hospital environment, suitably equipped and with sufficient qualified staff to provide them with the necessary assistance. Pending such transfer, they should be accommodated in the prison health-care in-patient unit and not held in segregation.

---

74 See paragraph 114, p. 31 of the response by the United Kingdom (CPT/Inf (2018) 1), to the report on the visit to the United Kingdom carried out by the CPT, 30 March to 12 April 2016, CPT/Inf (2017) 9.

75 Assessment, Care in Custody and Teamwork (self-harm prevention procedure).

105. The statistics provided by the United Kingdom authorities on the increase of self-harming incidents in prisons is alarming, with 2019 setting "a new record high". From March 2018 to March 2019, there were 57,968 incidents of self-harm, an alarming 24% increase from the previous year. In the most recent quarter (January to March 2019), self-harm incidents increased by 1% to 14,415 incidents. [76]

This high and steadily increasing numbers of self-harming incidents was reflected in the three prisons visited by the CPT's delegation, with each one appearing to be on a new record-high trajectory for 2019.[77] It was also of serious concern to the delegation that the incidents of serious self-harming requiring hospital treatment were also very high. By way of illustration, at *Doncaster Prison*, from 1 January to 30 April 2019 there were 231 incidents of self-harming involving, *inter alia*, 26 incidents of hanging, 14 of self-strangulation.

106. Self-inflicted deaths are of particular concern to the CPT. It notes that nation-wide, there were 92 self-inflicted deaths in prisons for 2018, which was an increase from 70 in 2017.[78] At *Doncaster, Liverpool and Wormwood Scrubs Prisons*, there were a number of recent deaths in custody.[79]

The CPT was concerned by the findings of deficiencies in the ACCT procedures raised by the Prison and Probation Ombudsman (PPO) at all three prisons visited by the CPT, including checks not regularly undertaken, delays in calling ambulances, insufficient numbers of staff to escort prisoners in urgent need to hospital, inconsistent health-care staff attendance at ACCT reviews, incomplete care-map actions and prison and health-care staff not sharing information as they should. All these point to the three prisons failing to adequately manage prisoners at risk of serious self-harm or suicide.[80]

107. While some of the findings on self-harm from the 2019 visit involved inmates apparently desperate to attract attention from staff, others seemed to be more general manifestations of inmates in deep crisis and cries for urgent help. Indeed, the delegation notes with deep concern that the self-harming situation was far worse in 2019 than in 2016.

In light of these findings, the CPT is of the view that the overall mental health strategy and self-harm prevention measures, most notably the ACCT review procedure, were not working adequately to fulfil their primary protection purpose. It was also concerned that the PPO and HMIP had in 2018 found that in more than half of inspected adult male prisons, the quality of support for prisoners in crisis, delivered through assessment (ACCT case management), was weak. […] too often, care planning did not target concerns or support was ended without the proper resolution of issues […] and despite recommendations, prisons were still not making enough effort to address the needs of prisoners in crisis.[81]

---

76 Op.cit. footnote 24.

77 At Doncaster Prison, in 2018 there were 854 self-harm incidents; in the first quarter alone 296 incidents. At Liverpool Prison, in 2018 there were 392 self-harm incidents; in the *first quarter alone* 226 incidents. At Wormwood Scrubs Prison, in 2018 there 403 incidents involving 205 prisoners; in the first quarter (alone) 191 incidents, involving 99 prisoners.

78 Op.cit. footnote 23.

79 At Doncaster Prison, in 2017 there were five deaths (natural causes); in 2018, 4 deaths (two of which were self-inflicted) and in 2019 one death; at Liverpool Prison, in 2017, there were four deaths (three of which were self-inflicted), in 2018 there were six deaths (four of which were self-inflicted) and no deaths in 2019 for the period January to May. At Wormwood Scrubs prison: in 2017, there were two deaths (one self-inflicted and one natural causes) and in 2018, 6 deaths (including one murder, and (three self-inflicted), in January to April 2019, there were two deaths (one self-inflicted and one natural causes).

80 For example, at Liverpool Prison, PPO report on Mr D, who died in custody in 2018 where the PPO underlined "I am appalled at the condition of the cell that Mr D was moved to three days before he died […] these were not acceptable living conditions for any prisoner, let alone one who had been assessed at increased risk of suicide and self-harm". See PPO website.

81 HM Chief Inspector of Prisons for England and Wales Annual Report 2017–18; Presented to Parliament pursuant to Section 5A of the Prison Act 1952 as amended by Section 57 of the Criminal Justice Act 1982.

The CPT considers that more concrete action and effective measures are urgently required to be put in place to stem the rising numbers of prisoners self-harming in the English prison system. Fundamental structural problems raised above (i.e. insufficient experienced staff, unaddressed violence, more mentally ill persons being sent to prison from the outside, long periods of time locked up with too little structure, prisoners' frustration at their needs being perceived as being repeatedly unmet by staff), can all cumulatively exacerbate the situation for those suffering from mental illnesses and increase the risk of self-harm.

The prevention of self-harming – in all of its guises, either to attract staff attention in order to satisfy a desperate need, or as a real attempt to end one's own life – falls squarely within the mandate of the prison management. The United Kingdom authorities have a duty of care to provide safe custody to persons held in prison; in light of the rising number of self-harm incidents and the deficiencies in the prevention measures, it is clearly failing to discharge this duty of care**.**

The CPT recommends that the United Kingdom authorities urgently revise the self-harm prevention measures, and most notably the ACCT procedure, currently in place, and develop more effective operational strategies in prison to address the escalating numbers of prisoners at risk of self-harm and self-inflicted deaths in Doncaster, Liverpool and Wormwood Scrubs prison, as well as nation-wide.

In particular the CPT recommends that in light of the significant increase in prisons of self-harming and suicides, the United Kingdom authorities should revise the ACCT procedure to:

- **ensure the proper identification of individuals at risk upon arrival (history of self-harming, mental health disorders, etc.);**
- **ensure that every time a prisoner is placed on an ACCT, the attendance of the meeting is made mandatory for health care staff (general and mental health care);**
- **organise regular training for prison staff and health care staff on the prevention of self-harming and suicide;**
- **take measures to combat the possible formation of "clusters" of prisoners who might wish to emulate others who self-harm;**
- **require prison management to ensure that the ACCT meetings are conducted sufficiently expeditiously, most notably for the particularly serious risk and repetitive cases; and**
- **ensure that prison staff are sensitised through regular training to the needs of people in crisis and prisoners who self-harm.**

c. substance use

108. Linked to inter-prisoner and inmate-on-staff violence (and, to some extent, the increased levels of self-harming) is the issue of the volume of drugs, notably synthetic drugs, flowing into prisons in England and Wales. The United Kingdom authorities acknowledge that the use of drugs in prisons is one of the biggest challenges facing the criminal justice system today; it is seen as prevalent and contributing to violence, crime and vulnerability within prisons, as well as hindering the delivery of effective regimes.[82]

82 2019, HMPPS and Ministry of Justice, Prison Drugs Strategy 2019.

The situation has deteriorated significantly in recent years according to the authorities,[83] and drug use in prisons is now widespread, particularly in male local and category C prisons. The percentage of positive results from random Mandatory Drugs Tests (rMDT) shows a steady year-on-year rise, with 20.4% of rMDT positive in 2017/18. This includes the results of tests for psychoactive substances. The spread of Novel Psychoactive Substances (NPS) has been significant, with psychoactive substances present in 60% of all positive samples in 2017/18.[84]

The almost undetectable NPS renders policing the in-flow of drugs and their use in the prison estate a complex task, but the authorities clearly understand that reducing drug flow is crucial to ensuring the safety of prisons in the United Kingdom. The authorities of the United Kingdom have put several measures in place to counter the in-flow of NPS into the prison system, including a blanket ban of NPS in 2016.[85] They have also built upon the 2017 Drugs Strategy with a new Prisons Drugs Strategy for 2019 aiming to reduce the use of drugs in prisons. This focuses on three objectives: restricting supply, reducing demand and building recovery and centres its approach on five areas (People, Procedural, Physical, Population and Partnership).[86] Further, a pilot "10 Prisons Project" (see paragraph 12) has recently finished, whereby reducing drug use was a key objective and within which £6 million was allocated to tackling drugs within prisons and £9 million dedicated to a pilot project to focus on drug recovery strategies within prisons. Ten prisons, including *Liverpool Prison*, have been provided with additional body scanners, drug detection dogs, additional staff and security equipment.

109. At all three prisons visited, a similar approach was taken towards addressing drug use. Each prison had mandatory and voluntary drug testing policies in place. Upon admission, nurses ascertained prisoners' substance use habits and a decision was taken by the drug use and health-care teams as to whether to place a prisoner on a detoxification/substitution programme and manage their treatment on a particular wing. The delegation noted that accessibility to – and information about – these were clearly posted on the wings. Harm-reduction education was generally available to inmates at the three prisons visited. Primary prevention was undertaken, mainly by the drug use team through initial screening upon prisoners' arrival and random drug testing and follow-up, as well as through the discipline and regime incentives process.

110. Despite increased efforts to counter the flow of drugs into prisons, the CPT's delegation found widespread availability of drugs, and in particular, NPS. At the three prisons visited, approximately a quarter of the prisoner population[87] was being treated by the drug use teams for withdrawal symptoms and there continued to be high numbers of drug finds per month at each prison.[88] Results from random drug testing remained very high, for example, at *Wormwood Scrubs Prison* the results of random drug testing averaged around 30% positive and in *Doncaster Prison*, the random testing for 2019 averaged around 20% positive.

---

83 2019, HMPPS and Ministry of Justice, Prison Drugs Strategy 2019.

84 United Kingdom Prison Drug Strategy, 2019, p. 9.

85 Legislation: Psychoactive Substances Act 2016. In May 2016 the Psychoactive Substances Act was passed, making it a criminal offence to possess or supply psychoactive substances in a custodial institution. The maximum sentence is 7 years' imprisonment and an unlimited fine, with an aggravating factor for a supply offence to a prison. To further address the dangers posed by such substances, the Misuse of Drugs Act was amended in December 2016 to make all third generation synthetic cannabinoids (a group of psychoactive substances) a Class B drug. The Act carries a heftier sentence of 10 years' imprisonment for those found in possession of psychoactive substances.

86 2019 United Kingdom Prison Drug Strategy.

87 At the time of the delegations' visit (May 2019), 270 prisoners were being treated for drug use at Doncaster Prison, 100 prisoners at Liverpool Prison and 321 at Wormwood Scrubs Prison.

88 For example, Doncaster Prison: 61 cases of finds of illicit substances in January 2019, 58 in February 2019, 42 in March and 49 in April 2019.

Further, despite a new national Prisons Drugs Strategy in place, the drug use teams at all three prisons appeared to have limited actual knowledge of the Drugs Strategy and how it should be implemented in practice. The CPT's delegation gained the distinct impression that national and prison-specific drugs strategies did not reflect the reality of how drug use was actually being tackled within each prison visited. Moreover, none of the three prisons had drug-free units, apparently mainly due to challenges associated with the high turnover of prisoners in large local male prisons.

111. At all three prisons visited, prisoners informed the delegation that it was easy to obtain drugs. Most notably, at *Doncaster Prison*, the smell of drugs wafted along the corridors even in plain daylight. The delegation observed for itself a prisoner smoking NPS openly and not being challenged by staff; the situation was apparently much worse at night, and prisoners pleaded with the delegation to ask the prison management to crack down on the drug-taking at night as the smell and fumes permeated the cell vents of other prisoners, contributing to "passive smoking" in their small enclosed cell spaces. Convulsive fits or worse due to NPS overdoses were common as the delegation observed for itself. More generally, the pernicious effects of drugs in promoting violence (both inter-prisoner violence and assaults on staff) and creating an unsafe environment, including an increase of drug-related medical interventions required, was evident.

The CPT considers that tackling the increasing drugs problem should indeed be a main priority for the United Kingdom authorities, as the increasing flow of NPS into prisons has a huge influence on daily life in prison, including impacting the functioning of the normal regime. It welcomes the drug strategies, initiatives and investment undertaken so far to combat and try to reduce the inflow of drugs into prisons. However, it is also evident that tackling drug use can only be achieved through a multi-faceted approach, as outlined in the 2019 Drugs Strategy, but which must also include increased ratios of properly trained staff, the use of dynamic security,[89] and the application of a daily regime which sees prisoners engaged in purposeful activities (work, vocational training, education, sport, recreation, outdoor exercise) outside of their cells for at least eight hours a day.

The CPT trusts that the necessary resources will be allocated to ensuring that the 2019 Drugs Strategy can be effectively implemented in all prisons. To this end, it recommends that there be a better co-ordination between the drug use teams working in individual prisons and the HMPPS headquarters.

It also recommends that the proper implementation of the Drugs Strategy be complemented by other measures including ensuring adequate ratios of properly trained staff, the use of dynamic security,[90] and the application of a daily regime which sees prisoners engaged in purposeful activities outside of their cells for at least eight hours a day (see Sections 3 and 4).

More specifically, the CPT recommends that, notably at Doncaster Prison, staff be trained and empowered to systematically identify and challenge drug use by prisoners. Further, steps must be taken to clamp down on the omnipresent drug taking.

In addition, drug-free units should be established at Doncaster, Liverpool and Wormwood Scrubs Prisons, as a concrete measure designed to help implement the principles enshrined in the new Prisons Drug Strategy.

---

89 See also paragraph 44.

90 See also paragraph 44.

B. Detention centres for juveniles

1. Preliminary remarks

112. The youth justice secure estate in England and Wales consists of three types of establishment – young offender institutions (YOIs),[91] secure training centres (STCs)[92] and local authority secure children's homes (SCHs)[93]. Each varies in terms of size, staff to child ratios, the nature of the children accommodated and ethos. In September 2017, the overall responsibility for commissioning of youth custody transferred from the Youth Justice Board[94] to the Ministry of Justice (MoJ). The new Youth Custody Service (YCS) – under HMPPS – took over responsibility for individual placements of children and young people into youth custody (in all three types of establishments) and now ensures the delivery of services in YOIs and STCs.

At the time of the visit, the youth justice estate was holding 830 juveniles and 64 young persons who had recently turned 18 years old (of which 861 were boys and 33 girls). Of these, 27% were on remand. Three quarters of the juveniles were accommodated in YOIs (for 15 to 17-year olds), which are similar in design and ethos to adult prisons. Just under 20% of the juveniles who are younger and/or more vulnerable were held in STCs (who can take in young persons from the age of twelve), two of which continue to be managed by private contractors.

In the year ending in March 2018, the majority of detained children (58%) had spent less than three months in custody. It is interesting to note that over the same period, children remanded in custody accounted for 24% of the average monthly population of juveniles in custody, and that a majority of them (63%) did not subsequently receive a custodial outcome.[95] Given the high numbers of juveniles remanded in custody who are subsequently discharged without being sentenced, **the CPT would like to be informed about the measures being taken to ensure that young persons are only ever placed in detention as a last resort.**

113. The CPT's report on the April 2016 periodic visit raised serious concerns over the situation at Cookham Wood YOI, where the response to sustained levels of violence had resulted in a much greater resort to segregation of young people and to the use of force by staff, with a detrimental impact on the general regime. The conclusion was that the treatment of juveniles within the establishment fell short of ensuring safe and satisfactory custody. The CPT had recommended a shift of strategy and culture change towards a truly child-centred approach, which in its view, would be supported by well-staffed, smaller living units, small enough to enable individualised care. Until such a change occurred, the CPT had recommended that the various restrictions (among which separation, removal from association, cellular confinement or segregation) imposed on juveniles should only be applied as a last resort and not jeopardize access to a full regime including education, physical exercise and possibilities of association.

---

91 There are five YOIs for under-18s: Cookham Wood, Wetherby, Feltham A, Parc and Werrington.
92 There are three STCs: Oakhill, Rainsbrook and Medway.
93 There are 15 SCHs in the country, seven which may accommodate children placed on criminal grounds.
94 The Youth Justice Board continues to oversee the youth justice system in England and Wales.
95 Youth Justice Statistics 2017/18, England and Wales, Youth Justice Board / Ministry of Justice, Statistics bulletin, Published 31 January 2019.

Since the 2016 visit, increasing levels of violence have been recorded across the youth secure estate.[96] The CPT's findings in May 2019, particularly those concerning the YOIs visited where even higher levels of violence were in evidence, make it more imperative than ever to promote an alternative approach along the lines advocated by the CPT.

114. In this respect, the CPT notes that since 2016 progress has been made towards rethinking the secure youth estate. Following the recommendations of the "Taylor Review",[97] the UK authorities have announced the creation of a new model of establishment, known as a secure school, which should place "education, health care and purposeful activity at the heart of rehabilitation" and combine "the ethos and practice of the best alternative provision schools with the support of the best secure children's home".[98] They will be set up and run by secure academy trusts and will be led by headteachers, with a capacity of 60 to 70 places. The first secure school is due to open in 2020, on the site of Medway Secure Training Centre and the contract has been awarded to Oasis Charitable Trust. The governmental investment of £5m will include refurbishment of classrooms and residential areas.

The CPT welcomes the rethinking by the UK authorities of its approach towards juvenile detention, as the CPT considers that smaller institutions with a socio-educative welfare approach are better suited to respond to the complex needs of juveniles in custody. Nevertheless, a number of questions remain unanswered to date regarding: the staffing ratio to young persons; the profile of the staff (care workers as opposed to custody officers); regime; size of living units; the mix and profile of the young persons; the timetable for the rolling out of secure schools once Medway is opened. Other pending questions relate to how the approach will compare to the existing STC and SCH models and to what extend it will be oriented towards small community living units (cooking, eating and living together). **In the light of the above, the CPT would like to receive information regarding the timetable, scope and operation of the proposed secure schools.**

At the same time, it is clear that departing from the current system of juvenile detention, notably the YOIs, will require considerable investment and a new conceptual approach which cannot be implemented overnight. In the meantime, urgent measures are needed, especially in respect of YOIs to bring down the levels of violence, to create a safe environment and to offer young persons a meaningful regime and support for re-entering the community. The very serious findings contained in this report relating to the high levels of violence and poor regimes, and the recent very critical reports of HMIP serve only to reinforce the CPT's thinking on this question. **The CPT would like to be informed about the system-level measures being introduced immediately to address the current crisis in the youth secure estate.**

---

96 For example, according to the Youth Custody Service, the number of assaults had risen from 2,900 assaults in the year ending March 2016 to over 3,500 incidents in the year ending March 2018, marking an increase of 20%.

97 Review of the Youth Justice System in England and Wales, by Charlie Taylor, December 2016. The report stated: "Rather than seeking to import education into youth prisons, schools must be created for detained children which bring together other essential services, and in which are then overlaid the necessary security arrangements".

98 Secure Schools: How to Apply Guide, HM Government, October 2018. Alternative provision schools are schools which provide education for pupils outside of mainstream education, who have behaviour issues or short or long-term illness. Nearly 50,000 pupils are taught in alternative provision schools.

2. Young Offenders' Institutions (YOIs)

a. preliminary remarks

115. In the course of the 2019 visit, the CPT's delegation carried out a follow-up visit to Cookham Wood YOI and visited the juvenile section of Feltham YOI for the first time since 2001. Detention within a YOI is regulated by the Young Offender Institutions Rules (YOI Rules)[99] which apply to all YOIs accommodating young adults (aged 18 to 21), with specific provisions for juveniles.

Cookham Wood YOI was described in the report on the 2016 visit[100] and, at the time of the 2019 visit, was accommodating 159 male juveniles (for a CNA of 188), of whom 42% were awaiting trial and 25 were sentenced to longer than five years, including eight who were serving life sentences.

Feltham YOI, located in the vicinity of Heathrow Airport, is comprised of two sections: Feltham B, for young adults (aged 18 to 21) and Feltham A, which accommodates juveniles. Feltham A had a capacity of 155 places and, at the time of the visit, was accommodating 124 boys, of whom 31% were unsentenced and ten had a release date between 2022 and 2024. Feltham A consists of seven independent house blocks, each originally equipped with 29 cells, and connected to one another via a secure outside corridor. It should be noted that shortly after the CPT's visit, HMIP conducted an inspection at Feltham A which revealed "a collapse in performance and outcomes for the children being held" and triggered the Inspectorate to invoke its urgent notification process.[101] As a result, new admissions to the institution were halted.

b. ill-treatment

116. The delegation received a small number of allegations, in both YOIs, from boys regarding use of excessive force when being physically restrained (tight handcuffing, knees to the body during restraint, punches before a restraint). A few boys also alleged that some staff members had used insulting language against them. These boys were aware of the fact that they could complain about such acts and while some had indeed done so, others stated that they had no confidence in the complaints system when it concerned their word against the word of one or more custody officers.

The CPT recommends that the authorities of the United Kingdom regularly deliver the clear message to custodial staff in the YOIs that all forms of ill-treatment, including verbal abuse, are not acceptable and will be punished accordingly.

117. As was noted in 2016, any complaint or suspicion of ill-treatment concerning a member of staff was automatically referred for external consideration to the community services in charge of child protection issues. The Local Authority Designated Officer (LADO) decided, liaising with partner agencies and the juvenile institution, whether the case was admissible, and determined the course of action to be taken, and ultimately, on a multi-agency decision basis, decided on the outcome of the case (unfounded, malicious, unsubstantiated or substantiated). Substantiated cases could trigger either criminal investigation or an internal disciplinary investigation.

---

99 The YOI Rules 2000 were later amended in 2002, 2008, 2009, 2014, 2016 and 2018.
100 See CPT/Inf (2017) 9, paragraph 84.
101 See HMIP Urgent Notification.

At Cookham Wood, in the eight months preceding March 2019, 76 cases had been referred to the LADO, 68 of which concerned an alleged excessive or unnecessary use of force. At Feltham A, in the first four months of 2019, 34 cases had been referred, of which 22 concerned an alleged excessive use of force (the rest were allegations of emotional, verbal or sexual abuse), and for the year 2018, there had been a total of 72 allegations against staff (including 53 cases related to allegations of unnecessary or excessive use of force by staff and eleven allegations of a sexual nature[102]).

The supporting documentation examined by the CPT's delegation confirmed that allegations were taken seriously and followed up in a timely fashion. Immediate measures were taken to safeguard the alleged victim (the boy was interviewed by safeguarding staff, his family was informed of the allegation made and precautionary measures were taken, such as no contact between the alleged perpetrator and victim, pending results of the investigation). However, the CPT has taken note that the majority of referrals were either deemed not to meet the required threshold for LADO consideration or were closed as being "unsubstantiated", due to inconclusive evidence (lack of useable video footage for instance, reliance on staff written accounts). For example, at Feltham A, among all cases opened since the beginning of 2018, only eight cases had been substantiated and investigated. The outcome of the investigation was not always mentioned.

Positively, a number of cases which had not gone past the LADO consultation phase had however entailed some follow up action, in terms of training, advice or internal review of practice.

The CPT would like to be informed of the number of cases at Cookham Wood and Feltham A for 2018 and 2019 concerning allegations of excessive use of force, of a sexual nature, and other allegations against staff, and of the disciplinary, criminal or other outcomes where relevant.

c. violence and violence reduction strategies

118. According to national statistics, between 2016 and 2019, the number of assaults (all assaults on juveniles and staff) had increased throughout the YOI estate and, more specifically, by 10% at Cookham Wood and by 60% at Feltham A. The management of the institutions visited viewed the phenomenon as being both cyclic (with peaks and troughs over the year) and structural.

At Cookham Wood, in the first three months of 2019, there had been some 35 to 40 assaults by boys on other boys each month. At Feltham A, 231 assault incidents had been sanctioned between 1 January and 10 March 2019, which included 67 fights involving two or more boys.

Inter-juvenile violence was explained mostly as a result of gang culture and affiliations being imported from the community, combined with the fact that a high proportion of the young persons were children placed in care,[103] often with a history of trauma and/or mental health issues. It was also suggested that the growing proportion of remand prisoners could be an added factor as young persons were generally more disruptive during the pre-trial period while they tended to settle down after they were sentenced. Contrary to the adult prison estate, drugs were not considered to be a determining factor in the prevalence of violent incidents in the youth estate.

---

102 Allegations of this nature mostly concerned inappropriate contact during search / sexualized conversations.

103 The definition of looked-after children (children in care) is found in the Children Act 1989. A child is looked after by a local authority if a court has granted a care order to place a child in care, or a council's children's services department has cared for the child for more than 24 hours.

119. Violence reduction strategies in both establishments included engaging juveniles, by promoting and rewarding positive behaviour (namely through the Incentives and Earned Privileges (IEP) schemes), early detection of risks and limiting interactions between young persons who were identified as potential rivals. By way of example, the delegation was informed that in Cookham Wood, 78 gangs were represented through 127 affiliated boys (80% of the population). This resulted in a five-page document listing names of which boy could not associate with which boy(s).

Dedicated conflict resolution teams had been deployed and were actively engaged (via mediation, restorative play and sports competitions) but managing "mixing issues" had become perhaps the most determining key element in organising life within the institutions, be it for allocating rooms, designing timetables and planning movements, so that gangs or rivals did not come into contact. Restrictive security, separation and use of force continued to be the basis of the approach to violence containment. However, not only were these strategies ineffective, as both YOIs remained unsafe, but they severely impacted the regime, preventing many young persons – not only those concerned directly with mixing restrictions - from accessing education, training or health care (see paragraphs 131 and 158) and generated frustration and more violence. For any **strategy to be effective in tackling the high levels of violence in the current environment it is necessary to reduce radically the number of young persons on a unit. This will enable the current efforts outlined above to have a greater impact.**

d. resort to the use of force

120. Between 2013 and 2016, a new policy was rolled out in all juvenile YOIs whereby the "control and restraint" policy regulating the use of force has been replaced by the Minimising and Managing Physical Restraint (MMPR).

MMPR puts considerable emphasis on using appropriate de-escalation and deceleration techniques (non-physical interventions) to ensure that force is only ever used as a last resort, when no other intervention is possible or appropriate. When physical restraint is necessary, it provides for a series of twelve approved use of force techniques, of increasing intensity (from a "guiding hold" to pain-inducing techniques[104]). It sets out safeguards around the use of force, in terms of recording and reviewing all instances of use of force, but also in terms of medical precautions and follow-up, systematic debriefings of staff and children involved, and practice review. Each YOI has MMPR coordinators who are tasked with training other staff in MMPR techniques and with reviewing use of force incidents. Parents, carers or legal guardians must be informed (by the caseworker) of instances when use of force has been used against a child.

121. The CPT welcomes the fact that the new framework places additional emphasis on verbal de-escalation and non-physical incident response. It also recognises that physical interventions are sometimes necessary which makes it all the more important that they must be strictly regulated and performed by trained staff.

---

104 The latter include mandibular angle, wrist flexion (inverted wrist hold – flexion, inverted wrist hold – rotation) and thumb flexion.

122. In practice, in both YOIs visited resort to the use of force appeared to be widespread.

Firstly, the examination of the reportable incidents register at Feltham A revealed that between January and mid-May 2019, the response to over 40% of all reportable incidents had entailed the resort to the use of force (meaning that de-escalation of the situation had failed). The number of uses of force incidents in Feltham A had considerably increased since 2016.[105]

Secondly, the proportion of higher level MMPR techniques – amongst all instances of resort to the use of force - was significant. At Cookham Wood, there had been as many as 541 use of force incidents recorded between January and April 2019 and in the year to April 2019, 1,442 such incidents, of which 46% had required the application of MMPR restraint techniques. At Feltham A, 573 use of force incidents had been recorded between January and mid-May 2019, of which more than 60% of which had entailed resort to physical restraints.

123. The delegation witnessed a number of incident responses over the course of its visit, prompted by general alerts whereby staff reinforcements were called in from all sides of the establishment to deal with the incident. The response was usually very effective with ten to over fifteen officers arriving promptly on the scene, the majority of whom remained present until the all-clear was signalled. When such general alerts were going off ten or more times a day it is not surprising that it impacted negatively on the regime as many areas of the prison were left understaffed and young persons locked up. The CPT recognises the primary duty of staff to ensure the safety of prisoners and of other staff. Nevertheless, **the CPT invites the UK authorities to consider promoting alternative arrangements to incident responses which would allow for more proportionate support which would be less disruptive and not result in the lock down of an entire wing.**

124. As regards the incidents themselves, the delegation observed that verbal de-escalation techniques were attempted in the first instance. However, it also witnessed and viewed footage of several instances where the necessity of applying force appeared questionable. For example, at Cookham Wood, a young person refused to remove a jumper from his head when re-entering the unit from outside which degenerated into a stand-off between staff and the young person, especially when more and more staff arrived on the scene, and eventually to the use of physical force for refusal to obey a lawful order. Surely such a situation could have been addressed via other means including the disciplinary provisions and a one-on-one discussion at a later moment in the day. In another case, which was viewed on CCTV footage, a boy was seen to be restrained (head hold and arm hold), without there being any evidence of him being violent or posing a risk to himself or others. Such cases raise a doubt as to the extent to which physical restraints are used, in practice, to manage cases of passive non-compliance. **The CPT recommends that the authorities of the United Kingdom review the guidelines and training for staff regarding management of passive non-compliance with rules where there is no threat of violence or harm to self or others.**

125. MMPR authorises pain-inducing techniques "in the limited circumstances where it is necessary to protect a young person or others from an immediate risk of serious physical harm and where there is no other viable means of achieving this".[106] In practice, resort to these techniques was not widespread.[107]

---

105 The rate of use of force incidents per month per 100 young persons in custody had risen from 37.5 in 2016/17 to 54 between April 2018 and February 2019 (Source: Youth Justice Statistics 2017/2018 and bespoke MMPR returns from establishments).

106 PSI 06/2014 - Use of Force – Implementation of Minimising and Managing Physical Restraint

107 At Cookham Wood, such techniques had been applied on ten occasions in the first four months of 2019, while in Feltham A they had been resorted to on 19 occasions between 1 January and mid-May 2019.

However, and as already expressed in the past, the CPT is of the view that any force used to bring juveniles under control should in no way be an occasion for deliberately inflicting pain. Only specifically designed non-pain-compliant manual restraint techniques, combined with better risk assessment of young people and enhanced staffing skills, should be used in juvenile establishments. In that light, the CPT fully endorses the recommendations of the UK Parliament's Joint Committee on Human Rights, as presented in their recent report[108] on youth detention, based on medical evidence that such pain-inducing techniques inflict physical distress and psychological harm in the short and longer term, and that the deliberate infliction of pain on a child is incompatible with international human rights law. **The CPT reiterates its recommendation that the application of pain-inducing techniques on juveniles should be abolished in law and practice.**

The CPT welcomes the fact that, as a first step, a review of pain-inducing techniques had been commissioned and was on-going at the time of the visit. **The CPT would like to be informed of the conclusions of the review.**

126. An examination of the relevant documentation revealed a number of gaps in the procedural safeguards surrounding the use of force. Firstly, not all episodes of use of force were reviewed as required by policy. Secondly, documentation was either missing or incomplete. Third, debriefings of juveniles were not systematically organised nor timely. By way of example, the CPT's delegation examined the files of five instances where pain-inducing techniques had been applied (between September 2018 and May 2019) at Cookham Wood and found that only one of these files included a completed Incident Review. Further, none of the files contained any mention of a debriefing taking place with the boy concerned. One would expect that such episodes of resort to the most invasive and restrictive type of use of force to be scrupulously reviewed.

In addition, the delegation found that CCTV footage often only provided inadequate coverage (and therefore evidence) of an incident and body-worn video cameras (BWVC) were not systematically switched on by frontline staff during interventions.

127. The documentation revealed that, in some cases, use of force had been applied in a manner inconsistent with policy. For example, on 16 May 2019, in Feltham A, B.M. was restrained using a straight arm lock. The use of this technique on juveniles is forbidden by policy, although it is lawful in the adult prison estate. Further, B.M. was restrained in a prone position, when there were clear indications in his personal "handling plan" that this should be avoided due to known breathing disorders. While it is positive that the review process has allowed for staff to pick up on these anomalies, **the CPT would like to be informed of the measures taken by the management of Feltham A after it was made aware of this incident.**

In light of the observations above, **the CPT recommends that measures be taken to ensure that:**

- **staff strictly adhere to the MMPR policy at all times, in particular:**

- **restraint techniques are limited to those approved by the policy and all precautionary measures (including handling plans) are taken into account;**

---

108 Cf Youth detention: solitary confinement and restraint

- **reporting and review procedures regarding any resort to the use of force are scrupulously applied, as per the policy, including the systematic debriefing of the young persons concerned;**

- **MMPR guidance, training and review procedures focus not only on the technical application of use of force techniques but also on the appreciation of the necessity and proportionality of such a resort;**

- **the use of body-worn cameras is made mandatory during all response interventions requiring the resort to the use of force;**

- **failure to comply with the above should constitute a disciplinary offence.**

e. regime and activities

128. The CPT is of the view that juvenile inmates should be unlocked for the majority of the day and should be provided with a full programme of education, vocational training, sports and other recreational and social activities, for at least eight hours per day and preferably more. This should include at least two hours of daily outdoor exercise.

The YOI Rules[109] stipulate that juveniles must be occupied in a programme of activities with at least 15 hours per week of education or training and at least two hours per week of physical education. In the YOIs visited, set objectives were higher than those provided by law, with a claimed target of between 25 and 30 hours of education and organised sports per child per week. In addition, the weekly timetables indicated slots for association periods (time when a boy is able to mix with others on the unit) and for outdoor exercise.

However, at both YOIs, differentiated regimes were in operation based on allocation of individuals according to their status, behaviour and needs. Level of activity was closely linked to the Incentives and Earned Privileges (IEP) scheme, which divided the boys into different categories (basic, standard and enhanced levels[110]).

129. At Cookham Wood, the regime was meant to ensure seven hours out-of-cell time on weekdays[111] and four hours on weekends.[112] However, it appeared that "association periods" were exclusively reserved for boys placed on enhanced status, which made up less than half of the population.[113] Yet, even for them, the foreseen regime was often curtailed. In the weeks and even months preceding the delegation's visit, association periods had been rare, which brought out-of-cell time down to between 5 and 6 hours on weekdays, and to levels which bordered on solitary confinement-type conditions at weekends, when they were offered just one or two hours out of their cells.

---

109 Rule 37 of the YOI Rules 2000.

110 Referred to as Bronze, Silver and Gold in Feltham A.

111 Five hours of education, 30 minutes of outdoor exercise in the morning and 1.5 hours of association within the unit in the evening.

112 Three hours of association time and one hour of outdoor exercise each day.

113 At the time of the visit to Cookham Wood YOI, 70 boys were on Enhanced level, 55 boys on Standard level, 34 boys on Basic level.

130. At Feltham A, on the three units accommodating young persons on either Basic or Standard IEP level (i.e. Dunlin, Eagle and Heron units), the planned regime guaranteed little more than four hours on average of out-of-cell time per day from Monday to Friday,[114] whereas on the enhanced units, boys could in theory benefit from 6.5 hours of out-of-cell time.[115] On weekends, the theoretical regime provided three to four hours of out-of-cell-time per day[116] but in reality, was usually much less. It is noteworthy that in Feltham A, because showers and phones were communal, these had to be used during the time slots reserved for association (i.e. daily for young persons on enhanced IEP but only three times a week for young persons on basic or standard IEP status).

131. Education was meant to make up the core activity for boys during the week. Education providers[117] offered a wide array of vocational training, academic studies, creative arts and personal and social development. There were some vacancies and difficulties in retaining teaching staff, but each boy was theoretically allocated to a class, whether in a classroom or for one-to-one sessions (called "outreach"). However, many juveniles who were enrolled in education complained that classes were often cancelled, especially in the afternoons.

This was reflected in the low attendance rates, provided by the education managers. By way of example, over a six-week period in February-March 2019, attendance rates at Cookham Wood were between 50 and 60% (and as low as 20% for one-to-one sessions). This meant that over this period, on average, boys had only attended 15 hours of classroom education per week, as against the officially provided 27 hours. Unauthorised absences affected no less than a quarter of all planned education hours.[118] This was explained primarily by the fact that boys were not being brought to class.

Attendance was also very low at Feltham A. At the time of the visit, 83 boys (out of 124) had been allocated to a class but only 50 attended. In the first three weeks of May 2019, the attendance rate had oscillated between 37 and 63%. However, the management denied that this was due to a lack of custodial escorts although no other clear explanation was provided.

132. Sports was offered as part of the school curriculum (four sessions per week at Feltham A), but given the low attendance rate in education, this meant that access to physical education and the gym was at best irregular. In Cookham Wood, access to the gym was also linked to IEP status (only one weekly session for boys on basic regime). In the view of the CPT, physical exercise should constitute an important part of the juveniles' daily programme as it provides one of the best outlets to channel the energy of that age group.

133. Entitlements for outdoor exercise had not changed since 2016, when the CPT reiterated once again that providing young persons with only half an hour of outdoor daily exercise was totally insufficient.

---

114 Over the week: 15 hours of education + 4 hours of association + 30 minutes of outdoor exercise each afternoon.

115 Over the week: 22.5 hours of education + 7.5 hours of association per week + 30 minutes of outdoor exercise each afternoon.

116 1.5 hours association on the unit + 30 minutes outdoor exercise + 1 session of physical education (max. 2 hours).

117 Educational services were contracted to Novus in Cookham Wood and to Prospects in Feltham A.

118 This did not include cases when the inmate refused to attend education, or cases where the inmate had to attend court or hospital, etc (these were counted as authorised absences).

Moreover, in the course of the 2019 visit, the CPT's delegation received indications that there had been instances when boys had not been taken outside at all. For instance, at Feltham A, several boys on Curlew Unit alleged that outdoor exercise was only organised every two or three days which was compatible with the entries in the unit's logbook.[119] Still at Feltham A, after an incident broke out on Jay Unit on Friday 17 May, patrol state was declared and as a result all ten people on the unit were locked up in their rooms and deprived of outdoor exercise (and of any out of cell time) until Monday 20 May.[120] Similarly, at Cookham Wood, the delegation received an allegation that during a weekend in April 2019 boys on Unit B3 (enhanced unit) had not been taken outside for almost 48 hours (Friday, 4 p.m. to Sunday afternoon). Denying young persons access to the open air for two or three days, or for any longer than 24 hours, is unacceptable. **The CPT would like to be informed of the reason for such measures, particularly regarding the incident described at Feltham YOI.**

134. According to the IEP scheme, boys placed on the higher levels had access to more in-room recreation (TV, game console), higher weekly earnings, more association time, more activities, and more visiting rights (see section on Contacts with the outside). Conversely, those boys placed on basic regime were denied most privileges (in-cell TV, recreational association periods other than education, full earnings). These "losses" were similar in nature to the sanctions which could be imposed by the governor through the adjudication procedure. This potentially created a level of confusion between the IEP and the adjudication systems. **The CPT would like to receive clarification regarding the inter-relation between the IEP scheme and the formal disciplinary procedure. Further, it considers that the removal of in-cell TVs should only occur as a sanction.**

135. In conclusion, the CPT found that the YOIs do provide a wide range of purposeful activities but that they are unable at present to offer the full regime even for those juveniles not on special restrictions. Moreover, even when the full regime was provided, it continued to fall short of the CPT's recommended minimum of eight hours of out-of-cell time engaged in purposeful activities. Given the low attendance in education, the curtailment of association time and very limited outside exercise, a majority of boys were left locked up in their cells for far too much of the day.

In the light of the above observations, **the CPT reiterates its recommendation that the authorities of the United Kingdom take immediate measures to introduce a daily regime in YOIs of at least eight hours out-of-cell time engaged in purposeful activities, including on weekends and public holidays, for all juveniles, regardless of their IEP status. This should include daily opportunities to practise sports and at least two hours of outdoor exercise.**

Regarding incentive-based regimes, the CPT recognises that a behavioural approach can be beneficial in encouraging juvenile inmates to abide by the norms of living within a group and pursue constructive paths of self-development. However, withdrawal of incentives due to non-compliance can quickly reach a level of deprivation which is incompatible with minimum requirements. **The CPT recommends that, should the authorities of the United Kingdom wish to maintain a differentiated incentive-based regime within the YOIs, the IEP scheme should be re-designed in order to ensure that conditions of detention under the lowest levels do not infringe minimum entitlements.**

---

119 No exercise was recorded for 13, 15, 16 May, yet it was recorded for 14th, 17th, 18th, 19th May.

120 Only one person from the group had been taken out briefly.

f. material conditions

136. At Cookham Wood, the premises were largely unchanged since 2016. The facility comprises seven residential units of which one is a segregation unit and another a so-called "transitional" unit (Bridge Unit). The premises were in a satisfactory state of repair and cleanliness as were the single occupancy cells. One shortcoming was the absence of chair in the cells. Communal areas on each landing were fitted with carpeted floors and equipped with tables and chairs, and screens for requests (kiosk) while the "enhanced" units had additional recreational equipment (TV, table tennis, table football).

137. At Feltham A, each unit consists of some 29 cells laid out in a L-shape on two floors with an open communal area of the ground floor equipped with sofas and, when in use, recreational games. Each unit has its own outdoor exercise area accessed from the communal area. The layout of the units meant that staff were constantly worried about boys running up the stairs to stand on the upstairs railings. The cellular accommodation was generally quite poor, with rooms measuring only 6m², including the unpartitioned toilet. This is below the CPT's minimum standard of 6m² plus a fully partitioned sanitary annexe.[121] Further, the cells were not equipped with a chair and in a number of the rooms visited mattresses were worn out and there was no proper ventilation, and a number of the cells were dilapidated. The communal shower areas on certain units (notably Dunlin, Jay and Heron) were dirty, damp and in a poor state of repair, with mould, flaking paint and cracks evident.

138. Although the communal areas on the units in both YOIs were spacious enough, their design was not conducive to community-living. They were used as circulation areas for all movements in and out of the units and were equipped with few amenities and only official information posters. Moreover, the capacity of the units (between 25 and 30 rooms) was too large to foster any sense of community in a safe environment. There was always a lot of shouting from behind closed doors, creating a noisy and stressful environment.

The outdoor yards attached to each unit contained some equipment for physical exercise but could have benefitted from being better equipped and used for more communal activities. They had a carceral appearance. It would also be much preferable that the yards be left open whenever the young persons were allowed to associate on the wing together during daylight hours and that they be equipped with some protection against the rain and sun.

139. Regarding clothing, at Cookham Wood, a uniform was compulsory (grey track suit), while juveniles at Feltham A could wear their own clothes. However, the induction booklet indicated that boys placed on basic regime had to wear the prison uniform. **The CPT considers that in principle juveniles in detention ought to be able to wear their own clothes**.

---

121 See CPT/Inf (2015) 44, "Living Space per prisoner in prison establishments".

140. The CPT's delegation received many complaints concerning both the insufficient quantity and the quality of the food (lack of variety). Meals were provided three times a day, with a hot meal provided at 4.45 p.m. All religious and medical requirements were catered for. However, the CPT considers that it is not sufficient for growing adolescents to be provided with their final meal as early as 4.45 p.m., and that they ought to be offered a snack later in the evening, The CPT also believes that meal times are a good opportunity within an institution to foster a sense of community by promoting communal eating, with the participation of staff. This may not be possible with 25 young persons at once, but it could be done with smaller groups. Forcing young persons to spend so much time alone including during meal times is hardly an appropriate recipe for supporting their reintegration into the community.

141. In view of the above, **the CPT recommends that, in both YOIs visited, all cells be fitted with a chair and that, at Feltham A, steps be taken in order to ensure that the communal shower areas are renovated and the state of repair in the cells improved, including the ventilation. Further, steps should be taken to upgrade the outdoor exercise yards and equip them with a shelter against inclement weather and a means of rest.**

The CPT also recommends that the dietary requirements of the young persons at both YOIs be reviewed so as to ensure that the meals provided are suitable for their specific needs. Further, steps should be taken to initiate the eating of the evening meal communally. Consideration should also be given to serving the tea-time meal later or to providing an additional snack later in the evening. Further, the CPT recommends that a nutritionist regularly examine the menus and the meals.

The CPT would also like to receive the reaction of the United Kingdom authorities regarding the remarks above in relation to clothing for young persons in detention.

More generally, the CPT considers that the small size of the rooms at Feltham A in particular should be compensated for by increased out-of-cell time.

g. staff

142. Both YOIs reported that custodial staffing levels had improved in recent times, following a recruitment drive by the government with 193 custodial officers (band 3 to 5) in post at Cookham Wood and 186 at Feltham A. However, there were still a number of unfilled custodial positions.[122] Further, there were high levels of absence and sick leave. At the time of the visit, 21 staff at Cookham Wood were absent. At Feltham YOI (A and B), the delegation was informed that the sickness and absence rate had doubled over the previous 12 months, meaning that the establishment had been running a limited regime (Red operating state). The increased rate of absence was linked to assaults or injuries sustained when responding to incidents. Retention of staff remained a significant challenge.

On the living units in both of the YOIs visited, which according to staffing plans required a theoretical staff presence of four officers, the delegation often found just one or two. The lack of staff meant that it was not possible to run a full regime which resulted in more young persons staying back on the wings during the day which in itself required a greater staff presence. Breaking this vicious cycle requires a change of approach.

---

[122] 17 vacancies out of 203 positions in Feltham A, 35 vacancies out of 228 positions at Cookham Wood.

143. At both YOIs, most of the staff were young (average age of new recruits was 20-21 years old) and relatively inexperienced. At Feltham A, the delegation was informed that 70% of custodial staff had less than two years of on the job experience. Custodial officers had been provided with an initial training of about three months. When asked about on-the-job training, most staff referred to MMPR refresher trainings only, with a focus on restraint techniques.

Generally, at both YOIs, the CPT's delegation observed a good level of engagement and commitment by custodial staff, sometimes working in difficult conditions. The delegation witnessed on several occasions a staff member being on his own on a unit with up to a dozen boys locked in their cells, most of them trying to get his or her attention. The staff member literally had to go from one door to the next, listen to the boy, answer him, and deal with his request if feasible as well as bear the brunt of the boy's frustration at being confined to his cell. This required patience and resilience which they mostly demonstrated by staying calm and professional. Likewise, the delegation met staff members on some of the more sensitive units who expressed a high level of motivation in their work.

That said, the delegation sensed that the lack of professional and life experience of the many new and young officers could translate into a lack of confidence on the job with some officers adopting an overly risk-averse approach, including quicker-than-necessary resort to the use of force.

The CPT is also concerned that staff members who were very exposed to violence did not always receive the necessary support from managers; more should be done to prevent burn-out and exhaustion.

144. In the view of the CPT, the custody and care of juveniles deprived of their liberty is a particularly challenging task. The staff called upon to fulfil that task should be carefully selected for their personal maturity and ability to cope with the challenges of working with - and safeguarding the welfare of - this age group. More particularly they should be committed to working with young people and be capable of guiding and motivating the juveniles in their charge. All such staff, including those with purely custodial duties, should receive professional training, both during induction and on an ongoing basis, and benefit from appropriate external support and supervision in the exercise of their duties.

In the light of the above remarks, **the CPT recommends that the United Kingdom authorities put in place measures to extend the initial and on-going training of custodial staff working in YOIs, as well as adequate psychological support and remuneration to reflect the challenging nature of the role of a custodial officer.**

The CPT recommends that the remaining vacancies at Cookham Wood and Feltham A YOIs be filled and that staffing requirements and deployment be reviewed in order to ensure that a full regime can be implemented at all times. A structural "absence rate" needs to be considered when setting staffing needs.

h. discipline

145. The disciplinary system for juveniles in YOIs had not changed since 2016.[123] Solitary or cellular confinement cannot be imposed as a sanction.[124] An examination of the disciplinary records at both YOIs visited showed that the safeguards and procedures laid out in law were applied in practice. Juveniles attended adjudication sessions in person and were invited to express their views and seek any support they wanted. Further, the CPT's delegation noted that in the adjudication hearings it attended the governors attempted to seek ways to break the cycle of repeat offenders and that where reports by staff were vague and the young persons explained a situation, the charges would be dismissed. The adjudication system was generally perceived as fair.

i. segregation

146. As is the case for adult prisoners, the Governor of a prison may arrange for the "removal from association" of a juvenile prisoner for the maintenance of "good order or discipline or in his own interests" (GOOD) under Rule 49 of the YOI Rules. In the report on the 2016 visit, the CPT expressed its serious concern at juvenile inmates being held in conditions akin to solitary confinement for prolonged periods under this provision. The CPT considers that on those occasions when particular juveniles may need to be managed separately for short periods, the juvenile concerned should be provided with additional support from staff and have access to purposeful activities, including physical exercise and education. More generally, the CPT recommended that juveniles who require management under Rule 49 should it be placed in small staff-intensive units, where their behaviour can be better managed, and they can be gradually reintegrated into the main inmate population.[125]

The United Kingdom authorities responded to the CPT once again that HMPPS "does not use solitary confinement" and that any segregation is not for punishment purposes and is surrounded by specific safeguards and regular review.[126] Nevertheless, the fact is that juvenile inmates who are separated under Rule 49 are often kept in conditions akin to solitary confinement as they are confined alone in their cells for 23 or more hours per day. The findings of the 2016 visit clearly demonstrated this state of affairs and, regrettably, the findings from the 2019 visit show that solitary confinement remains a real concern. This is also supported by HMIP reports.

147. That said, in the course of the 2019 visit, the CPT's delegation found that increased efforts were being made to manage those juveniles who presented particular challenges for staff. At Feltham A, any juvenile who could not interact for more than two hours per day with at least two other inmates was considered as being under Rule 49, whatever the motive or location. This in itself was positive as not only did it trigger regular reviews, but it also required the establishment of a plan by a multi-disciplinary team together with the young persons to work towards getting the young person off Rule 49. The result of this more systematic approach meant that the CPT's delegation came across fewer (yet persistent) cases of "unrecorded segregation" than during the 2016 visit to Cookham Wood.

123 See Young Offender Institution (YOI) Rules 59 to 64.
124 Cellular confinement for disciplinary reasons is only possible for young adults over 18.
125 See CPT/Inf (2017) 9, paragraph 98.
126 See CPT/Inf (2018) 1, paragraphs 146 and 155.

148. The CPT recalls that removal from association for more than 72 hours may be authorised by the Governor in writing for further periods of up to 14 days each up to 42 days. Thereafter, the Secretary of State for Justice may authorise removal, in writing, for subsequent periods of up to 42 days.[127] The prison service policy[128] lays down that the Deputy Director of Custody (DDC) for Young People in England must authorise in writing any continued application of Rule 49 beyond 21 days and thereafter every 21 days. Continued placement beyond 91 days must be authorized by the Director of Public Sector Prisons in England. Within each YOI, a multi-disciplinary review board[129] together with the young person concerned must meet after 72 hours and thereafter once every seven days. Any young person under Rule 49 should be checked on by custodial staff every hour and visited daily by the duty Governor, health care and the chaplaincy.

149. At the time of the 2019 visit, of the 12 boys on Rule 49 at Feltham A, four were accommodated on the Enhanced Support Unit (ESU or Albatross unit), three in the health care centre (Wren unit on B side) and five on an ordinary accommodation wing. At Cookham Wood, of the 16 boys on Rule 49, six were accommodated in the segregation unit, six on the Bridge unit and four on an ordinary accommodation wing.

150. At Cookham Wood, the designated segregation unit (Phoenix unit or "Care and Separation Unit") was holding six boys at the time of the visit. One of them had been in the segregation unit for nearly two months and was awaiting a psychiatric assessment. Two others had been there for a month and a half, and a third boy had just completed one month. Of the 178 placements in the segregation unit between May 2018 and April 2019, 47 had lasted more than 14 days.

Despite some renovation (painting) of the cells since 2016, material conditions in the unit – which had a capacity of 12 – remained poor. In fact, two cells were entirely out of order after being badly damaged by young persons. In several of the cells, the alarm call button was not functioning. The exercise equipment in the dedicated small yard was out of use and (as in the other yards) there was no shelter against inclement weather. A positive development was that the activity office within the unit was now in use for some one-to-one education sessions or meetings with the mental health team. But such sessions were not regular and did not benefit all occupants. Consequently, most boys on the wing had no activity at all and remained locked up in their cells for over 23 hours a day. Given how long young persons were spending on this unit, such a regime is clearly detrimental to their well-being. The CPT's delegation was interested to learn that the unit was scheduled to be closed down.

151. At Feltham YOI, following a court ruling, juveniles on the A side were no longer placed in the segregation unit which was located on the young adult B side. This had resulted in a re-evaluation of how to manage particularly challenging young persons and at the time of the 2019 visit no clear solution had been developed.

---

127 YOI Rules, Rule 49 (as amended in 2015).

128 Reviewing and Authorising Continuing Segregation & Temporary Confinement in Special Accommodation: Amendment to Policy set out in PSO 1700; NOMS September 2015.

129 An operational manager, a member of the healthcare team, a Personal Officer or Caseworker; Youth Offending Team worker. In addition, if appropriate, Local Authority Social Worker; Young person's family or carers; Safer Custody Team Representative and a member of the Psychology Team at 21 days. Advocacy Services (if requested by the young person) may also attend.

The closing of the segregation unit had led to the transformation of Falcon unit into a non-residential day unit set up to provide a calm down space for those boys who were causing disruption on their units. Part of the rooms were fitted with safe, moulded furniture. The idea was to have a conflict-resolution area which would provide the space for various interventions to take place in terms of discussions with staff, psychology or external agencies. It was well-staffed (with four to five officers during the day). However, the delegation gained the impression that the unit was still in the process of bedding in and its place within the architecture of managing young persons in Feltham A was not yet fully defined. It appeared that most of the time the boys remained locked in their cell. The unit was also the place to which boys were transferred pending an adjudication hearing each morning, which also took up valuable staffing resources. **The CPT would like to receive information regarding the development of Falcon unit.**

152. Within the juvenile YOI estate, there had been a developing acknowledgement that young persons with complex needs should not be maintained on segregation units or in conditions akin to solitary confinement, and that on the contrary, they were in need of extra support and care.

At Feltham A, this had resulted in the creation of an Enhanced Support Unit (ESU) on Albatross unit in November 2017. The rationale was to provide those boys with complex needs,[130] who demonstrated persistent difficulties including high-risk behaviour to themselves or others, and were not engaging in the mainstream regime, with a safe and secure environment, enhanced support, and a tailored and progressive treatment plan devised and implemented by multi-disciplinary teams. The unit had a reduced capacity of 16, although in practice it has never operated with more than six young persons, and with a higher staffing level[131] (with additional training[132] and supervision). The aim was to establish an environment which would encourage the boys to partake in a community approach.

The CPT finds that there is much to commend such an approach, and it was impressed by the experience and dedication of several of the permanent staff members on the unit. However, at the time of the visit, it was not operating according to its initial philosophy but rather as an alternative segregation unit with all four of the young persons on Rule 49. Indeed, there had been no community regime in operation for more than three months. Two of the young persons were on six and four officers unlock, respectively, in full personal protective equipment (i.e. akin to anti-riot gear) which hardly facilitated meaningful interaction. Further, there had been too many occasions when the exchange of information between staff had not been accurately relayed, which had led to the trust between the young persons and the ESU team being undermined, notably in respect of the boy who was on six officers unlock at the time of the visit.

For an ESU to function properly there must be a less risk-averse approach taken to the management of young persons which negates the necessity for officers to wear PPE and which allows the young persons to leave their cells for several hours a day. To this end, it is right that the move by a young person onto the unit should be properly prepared and that they realise what such a unit entails in terms of their behaviour.

---

130 Mainly autism, ADHD, and learning disabilities.

131 5 or 6 custodial officers during the day shift.

132 For instance, staff on both units had been the first ones within their respective institution to be trained in the "Secure stairs" programme which was meant to educate frontline staff so that they could support the mental health teams on child development, attachment, trauma and other key theories to help staff remain child-centred when facing challenging behaviours.

153. The Bridge unit at Cookham Wood was termed a "transitional" or "progressive" unit and accommodated boys who were either referred from the main wings, as an alternative to formal segregation (in the segregation unit) or as a form of progression from the segregation unit. It had a capacity of 26 places and, at the time of the visit, was accommodating 13 boys. There was no fixed regime as the idea was to work with an individualised approach. The unit manager tried to ensure that each day, each boy took part in at least one activity (education, gym, dining out or other enhancement activity). There were a couple of activity rooms on the unit used by different facilitators. There were attempts to manage boys in small groups of two or three. However, due to "non-mixing" concerns, the reality was that the community approach was not able to be promoted and that many boys had to remain on Rule 49. One boy even said that he had had more interaction on the segregation unit than on Bridge unit.

154. In conclusion, despite the positive attempts to establish units that address the complex needs of particularly challenging young persons, the result at the time of the visit was that a number of boys were in practice confined to their cells for some 23 hours per day (and therefore managed under Rule 49). They were effectively in conditions akin to solitary confinement and in many instances, they remained in such a situation for prolonged periods (i.e. for longer than 14 days). The case of a young person held for under Rule 49 for 151 days between September 2018 and February 2019 in Feltham A should not be allowed to occur.

The CPT commends the gradual shift away from placing juveniles in segregation units for the purposes of GOOD to investing in small staff-intensive units. However, **it recommends that:**

- **these units be properly resourced (both in terms of equipment and staff), and greater efforts be made to avoid them becoming *de facto* segregation units;**

- **juveniles who are removed from association continue to be granted access to education, physical exercise and possibilities of association;** to this end, the units should be designed to be as self-sufficient as possible so that activities can be offered to the young persons pending their reintegration into the mainstream.

The CPT invites the authorities of the United Kingdom to share their views on the functioning of the special units and on any reforms foreseen in order to improve outcomes for juveniles and to ensure that the units better meet their intended purpose.

More generally, and until such time as the above two recommendations are fully implemented, **it recommends that the authorities ensure that the separation, removal from association, cellular confinement or segregation of juveniles – in whatever form it takes – be applied only as a means of last resort, and that the juveniles concerned continue to be granted access to education, physical exercise and possibilities of association.**

j. health care

155. At Cookham Wood, the primary health care service had been reinforced since 2015 and now consisted of four general practitioners (3x 4 hours per week, including Saturday morning), a senior nurse[133] acting as primary health care manager, nine fully trained nurses, and two nursing assistants. There was one nursing vacancy at the time of the visit. There were three nurses per shift (between 7 a.m. to 9 p.m. on weekdays and between 7 a.m. to 7.45 p.m. on weekends). A dentist and a dental nurse visited once per week (half day) and an optician, a dietician and a physiotherapist visited once per month. There was also a team of four substance-use professionals.

Arrangements were made so that one custodial officer trained in first aid was present on each shift (including at night when no health care staff were present). **It would be preferable if such a person had a nursing qualification.**

The mental health staff complement included one manager nurse, two mental health nurses, two clinical psychologists, one assistant psychologist and, one and a half occupational therapists, as well as one part-time speech therapist. A child and adolescent psychiatrist visited three full days per week.

156. At Feltham, staff resources were shared and worked on A and B sides of the establishment on a rota basis. Two general practitioners ensured a presence of two half days at Feltham A. Doctors could be called in at any time from the young adults' institution (which had a medical presence seven days a week). There were two nurses and one assistant present each day until 9 p.m. and one nurse at night. A dentist and dental nurse were present two half days per week and an optician visited every second week. A sexual health nurse visited once per month and a substance misuse worker visited twice a week.

Mental health staff shared their time between Feltham A and B and included mental health nurses, (two during the day, one at night), one child and adolescent mental health nurse present on weekdays, a full-time psychiatrist, a visiting psychiatrist two half days per week, a clinical psychologist, three assistant psychologists, a speech therapist and an occupational therapist on working days, as well as four psychosocial workers.

157. The screening process was of a very high standard. All incoming juveniles were medically assessed through a comprehensive health assessment tool (CHAT). This included an initial assessment upon reception, within two hours of their arrival. Efficient arrangements were in place in both establishments to ensure that this could occur at night if needed. There were then four stages (physical check, substance misuse, mental health and neuro-disability assessments) which all had to be completed within ten days. This provided the base to formulate a comprehensive and holistic health plan with the input of different health professionals. Boys were offered voluntary testing for hepatitis, HIV and chlamydia as well as vaccination. Consent to share medical information was always sought. **The CPT invites the authorities of the United Kingdom to include a systematic screening for any history of abuse, including sexual abuse, in the initial assessments.**

---

133 The person was qualified in non-medical prescribing and on-site full-time Monday to Friday and on call for screenings in the late evenings.

158. Primary health care services ensured that all boys were routinely checked every six months. Long-term conditions seemed to be well-managed by the GPs with referrals to specialists if necessary. In Cookham Wood, two slots for external appointments were set each day.

As regards access to health care, at Cookham Wood young persons could make appointments either through the electronic system or kiosk or by way of (pictorial) paper applications which were collected and triaged each day by the nurses. At Feltham A, only paper applications existed. In case of urgent need, a doctor could be seen on the same day.

However, at both institutions, health care professionals complained that it was difficult to meet with the patients, that a great number of sessions had to be cancelled, due to both a lack of consultation rooms and shortage of custodial staff to accompany the movements of patients. By way of example, at Cookham Wood, the psychiatrist reported that due to these logistical problems, she only managed to meet with four or five boys per week. At the time of visit, she had just waited 1.5 hours for one boy to be brought in on Bridge unit. The psychologist team reported similar problems, as well as substance misuse team. Clearly, this is a waste of expensive NHS resources. Similarly, at Feltham A, the delegation noted that there had been 106 primary health care appointments cancelled in March and April 2019 due to the non-presentation of patients. This was corroborated by the fact that the delegation received several allegations from young patients at Feltham A who sometimes had to wait for a long time (up to several months) before they could meet a health professional.

The CPT recommends that dedicated health care centres be established at both Cookham Wood and Feltham A in order to facilitate access of patients to services and to support the multi-disciplinary work of the primary care and health and wellbeing teams. To this end, the CPT fully supports the plan to open a health care facility within Feltham A (in the education building). **In the meantime, urgent measures must be taken to review escort arrangements in order to prioritise the access of young patients to health care appointments.**

159. Medicine supply, storage and prescribing were adequate. Medical confidentiality of data and consultations were respected. The electronic health records were well kept. Injury recording was satisfactory.

160. Boys placed in segregation (Rule 49) or accommodated on "special units" were visited daily by health care staff. Checking the health of boys placed in solitary confinement is a good practice promoted by the CPT. However, after each check, health care staff were required to fill in a "fit to remain in segregation" form, which is not appropriate.

Likewise, health care staff were required to assess boys after they had been involved in a restraint operation or a fight, to be checked for injuries. An injury form (F213) had to be filled in accordingly. This is also good practice. However, it appeared that these checks usually consisted in asking the boy through the door if he was alright or had any injury.

In addition to checking boys after an instance of use of force, health care staff were required to be present during such episodes. This meant that every time an alert was triggered during an incident, health care staff had to rush to the scene.

Closely monitoring the health of persons placed in isolation or subjected to the use of force are important safeguards against ill-treatment. However, health care staff should not intervene, or be perceived as intervening, in the decision-making process leading to the imposition of a security measure. Consequently, in the CPT's view, health care staff should not be required to fill in "fit for segregation" forms and should not systematically have to run to the scene of any incident, but rather upon request. When asking and checking for injuries, health care staff should enter the room of the person in order to enable better communication. **The CPT recommends that the role of the health care staff in respect of checking boys on Rule 49 or in segregation and incidents of use of force be reviewed in light of the above.**

161. Mental health care needs were considerable, with close to 80% boys having a history of neglect and/or trauma, and 40% of boys having been in care. Services provided included one-on-one interventions (psychiatric consultations, psychological therapy, art therapy, supportive contact) and group sessions (for example, motivational skills, thinking skills, anger management, living with ADHD). At Cookham Wood, an additional psychiatrist position (for an additional three full days per week) was vacant. **This vacancy should be filled.**

Referrals to psychiatric hospitals were difficult and lengthy, whatever the age of the inmate. They were usually limited to patients with purely psychotic, or manifestation of trauma, symptoms. Even so, at Cookham Wood, one boy[134] diagnosed with complex trauma had been waiting for over two months for an external psychiatric assessment during which time he was held in conditions akin to solitary confinement in the segregation unit. He refused to interact with most staff members including health care staff and could not communicate in English. **The CPT would like to receive an update of the situation of this person.**

Information gathered by the delegation confirmed that health care teams in both YOIs continued to deal with cases which were very difficult to manage outside a mental health care facility. **The CPT would like to receive information about the number of referrals to psychiatric establishments requested from YOIs in the last three years and the number of transfers accepted.**

162. Substance use interventions mainly consisted of awareness sessions, and there was little need for medical interventions. In general boys had no experience of using NPS (novel psychoactive substances).

163. The health care unit in Feltham B (Wren unit) was used for juveniles who required in-patient care. The 12-bed facility was generally adequate in terms of material conditions and juveniles were kept separate from young adults. There was a permanent presence on the unit of primary health and mental health care staff. Education, as well as interventions, took place on the unit. At the time of the visit, there were three juveniles on the unit, including one who had been transferred back from a mental health hospital, and one who was under constant bed watch. However, the third juvenile had been placed on the unit solely for security reasons and according to the health care staff, such placements were not uncommon.

The CPT recommends that steps be taken to ensure that dedicated health care facilities such as the Wren unit at Feltham are used solely for treating patients in need and not used to accommodate inmates for other, including security-related, non-health related reasons.

---

134 A Syrian national, who had been hospitalized in Turkey and Greece before his arrival in the United Kingdom. An interpreter had visited several times.

k. reception, induction and access to information

164. Reception and first night procedures as a whole have an important role to play; performed properly, they can identify at least certain of those at risk of self-harm and relieve some of the anxiety experienced by all newly-arrived prisoners. Newcomers in both institutions were placed on an induction unit for a duration of one to two weeks. This period was used to provide comprehensive information to them and to conduct the numerous initial assessments. During this time, the young person met his caseworker, social worker, safeguarding, health, education and conflict-resolution teams. A peer mentoring programme had been established on the induction units, although it was not operating at Feltham at the time of the visit as candidates had not been security vetted. **The CPT would like to receive confirmation that the peer mentoring scheme is now operating in Feltham A.**

However, the regime afforded to newcomers offered little more than taking part in short assessment interviews over the course of a week. While a programme could not be established immediately, new arrivals should not be locked in their cells for 22 hours a day but be offered a regime which allows them to leave their cells for at least a few hours in both the mornings and afternoons. **The CPT recommends that the regime of juveniles on the induction unit be reviewed accordingly.**

During the induction period, the boys received a great amount of information orally and in writing. The rules were laid out in a "Compact" document which the boys had to sign. In addition, the information was summarized in a Welcome booklet which was user friendly. The fact that in Cookham Wood it had been compiled with the help of juveniles was noted by the delegation as a good practice.

The CPT regrets that a number of admissions in the YOIs visited took place at night, when most staff were absent, potentially causing additional anxiety for the young person. **The CPT recommends that measures be taken to avoid late admissions.**

165. On all units, there was extensive information provided via posters. Information about complaints was widely available and the delegation found the system at Cookham Wood, whereby complaints could be filed electronically via the kiosk system on each unit, to be both efficient and effective in terms of issues being dealt with.

An independent child advocacy service (Barnardo's) was present on site every day in each institution. Further, each institution had an Independent Monitoring Board whose members met the Governor every month and reported to the Secretary of State. Representatives of the Board as well as Barnardo's could sit on adjudications and Rule 49 reviews. Additional information was provided for contacting other organisations (Samaritans, Prisons' Ombudsman, Howard's League).

Further, HMIP visited all YOIs on a regular basis, usually every year.

l. contacts with the outside world

166. Boys accommodated in Cookham Wood had ready access to telephones in their rooms and they could use them for up to three times a day for 20 minutes each time. This is positive. At Feltham A, shared telephone booths could be accessed during association periods, meaning at least three times a week (for those on young persons on basic level IEP). It was noted that there were plans to install in-room telephones in Feltham A by 2022.

Arrangements for visits were generally satisfactory. Boys on remand had unlimited visit entitlements. Regarding sentenced juveniles, visit entitlements varied according to IEP status: at Cookham Wood, the minimum (basic) was four visits per month of up to two hours each, while in Feltham A, it was only two one-hour visits per month. In the CPT's view, all juveniles, irrespective of the regime, should benefit from a visiting entitlement of more than one hour per week. Further, any reduction in contact with the outside world should not be the subject of the incentives and privileges scheme.

The CPT recommends that all juvenile prisoners, regardless of legal or IEP status, should benefit from a visiting entitlement of more than one hour every week.

3. Rainsbrook Secure Training Centre (STC)

a. preliminary remarks

167. Rainsbrook STC, located near Rugby, is operated by MTC Novo, a private-sector provider of justice services, since May 2016. A representative of the Youth Custody Service, based in the institution, oversees and monitors contract implementation.

At the time of the visit, Rainsbrook STC had a capacity of 76 places, and accommodated 39 boys and 11 girls between the ages of 14 and 17; 38 of them were sentenced. Over two-thirds of the young persons had previously been in care. The premises comprised four accommodation blocks of two to four living units, two education blocks and a sports centre. Boys and girls were accommodated in separate residential units.

STCs are regulated by the STC Rules 1998,[135] which refer to juveniles as "trainees".

b. ill-treatment, violence and resort to the use of force

168. The delegation received no allegations of ill-treatment of young persons by staff. On the contrary, the young persons generally spoke positively about the members of staff.

The same safeguarding principles apply in the STCs as in the YOIs (see paragraph 117). Any allegation or suspicion of ill-treatment or abuse by a staff member is immediately referred externally to determine if and how it should be investigated and followed up.

---

135 These rules were amended in 2003.

In 2018, a little over 150 of such referrals were made to the local authorities (LADO). While only six cases had been deemed to be "substantiated" at the end of the investigation process, internal follow-up action had been taken in some 60 cases. While a considerable number of cases were restraint-related, there was a variety of concerns, including of a less serious nature, for which referrals had been made and external oversight sought. It is also noteworthy that only one-third of the cases (56) had been brought forward by the young persons themselves (through either a written or verbal complaint), with the majority of concerns referred by members of staff (operations, education, health care) or services working in the institution (such as the advocacy service Barnardo's).

169. Violence among young persons was an issue of concern. The total number of assaults (against staff or against other young persons) had doubled between 2016/17 and 2017/18 and had further increased in the period up to March 2019.[136] On average, two-thirds of recorded assaults were between young persons.[137]

Staff generally intervened promptly during incidents between young people and were held accountable for not doing so. In one case, disciplinary action had been taken against staff members who were held to have failed to intervene during a fight between young persons and who had subsequently not reported the incident.

While there seemed to be a general perception by management, staff and young persons that levels of violence were of a relatively low intensity, data provided by the institution revealed, on the contrary, that a majority of assaults between young people were recorded as higher-level assaults (this included punching, scratching, kicking and grabbing).[138] This begs the question as to whether lower-level incidents were being recorded as "high level assaults" or whether staff and young persons thought that such levels of violence were "normal". **The CPT recommends that the management of Rainsbrook STC pursue their efforts to minimise the levels of violence between young persons including through promoting alternative conflict resolution measures. Further, the CPT would like to be informed of the number of inter-young person assaults and their recorded level for the three last quarters of 2019.**

170. As in the YOIs, resort to the use of force in the STCs is regulated by the MMPR framework. An examination of records at Rainsbrook revealed that the use of force was both widespread and of high intensity. Since 2017, there had been around 1,000 episodes of use of force each year, and physical restraint techniques had been applied in about 40% of cases. This proportion was similar to which was recorded in the YOIs visited. Pain-inducing techniques had been applied seven times both in 2017 and in 2018 and four times since the beginning of 2019.

A review of the documentation of recent use of force incidents, including when pain-inducing techniques were applied, showed that incidents appeared to be systematically reviewed and discussed with the young persons concerned. In one case, a member of staff had been dismissed for applying a restraint technique not compliant with MMPR. However, some of the paperwork was incomplete[139] and/or did not always state clearly the steps taken before resorting to the measure.

---

136 The rate of assault per 100 increased from 63.9 in 2016/17 to 123.2 in 2017/18 and stood at 130 in the first quarter of 2019 with a downturn in April 2019 (data source: Bespoke analysis of the Behaviour Management Toolkit).

137 Rainsbrook STC Operational Update – May 2019 – Reportable incidents: Assaults (page 14).

138 Out of 157 assaults on young persons which had occurred between February and April 2019, 124 had been recorded as "high level assaults" (Rainsbrook STC Operational Update – May 2019 – Assaults on Young People breakdown).

139 For example, in several cases the duration of the measure was not mentioned.

The CPT would like to receive the comments of the authorities of the United Kingdom regarding the frequency and intensity of the resort to the use of force by staff as recorded at the STC.

Further, it reiterates its recommendation, formulated in paragraph 127**, for measures to be taken to ensure that:**

- **staff strictly adhere to the MMPR policy at all times, in particular:**
- **restraint techniques are limited to those approved by the policy and all precautionary measures (including handling plans) are taken into account;**
- **reporting and review procedures regarding any resort to the use of force are scrupulously applied, as per the policy, including the systematic debriefing of the young persons concerned;**
- **MMPR guidance, training and review procedures focus not only on the technical application of use of force techniques but also on the appreciation of the necessity and proportionality of such a resort;**
- **the use of body-worn cameras is made mandatory during all response interventions requiring the resort to the use of force.**
- **failure to comply with the above should constitute a disciplinary offence.**

Likewise, the CPT recommends that the application of pain-inducing techniques on juveniles in STCs should be abolished, in law and practice.

c. material conditions

171. Generally, material conditions in Rainsbrook STC were good and the infrastructure, in size and design, was conducive to creating a community environment.

At the time of the visit, 12 of the 14 living units, each with a capacity of five to nine rooms, were operational.

Apart from the Mother and baby unit, all accommodation units were of similar design; a communal area composed of a dining table and chairs, a pool table, a sitting area furnished with sofas and a TV, and a small kitchen (open 5-6 hours per day). Off each end of the communal area was a corridor with several bedrooms. Each room measured about 12m², had carpeted flooring and was equipped with a bed, and a moulded shelving unit and table, and totally partitioned sanitary annexe with shower, washbasin and toilet. However, there was no chair and the windows could not be opened. Some of the rooms were stuffy and damp and the state of some bathrooms was rather poor (rusty steel toilets on Dunchurch or Gilmorton units for instance). Access to natural light was generally sufficient but on some of the units the electric blinds (which were centrally controlled at unit-level) could not be pulled up. All rooms were equipped with a functioning call bell. Rooms were generally personalised and on each door was a sign with the name of the juvenile and all the staff responsible for his/her care.

The Mother and baby unit had three bedrooms, a large living/dining area and a kitchen. It was colourful, child-friendly, nicely decorated and equipped with toys and all the necessary amenities for babies.

Outside facilities included two large yards (with a lawn and a few benches) a dedicated outside area for the Mother and baby units (with a playground) and a large hard court used for collective sports, none of which offered any protection against rain or sun.

The CPT recommends that all rooms at Rainsbrook STC be equipped with a chair and that steps be taken to review the general state of repair of all bathrooms as well as to improve the ventilation in the rooms and to repair electric blinds. Further, outdoor exercise yards should be equipped with a shelter against inclement weather.

172. The different activity areas (sports hall, outdoor playing area, educational facilities) were of a very high standard. Within the educational facilities, there was an area for the more formal classroom work, and another area for vocational training (cooking and hospitality, beauty and hair salon) and creative activities (arts room, performing arts centre).

173. A major complaint from young people concerned food, which was considered to be bland and to be mostly starchy, "sandwich food", with too little fruit and vegetables. The delegation also observed that the hot meal at dinner was served particularly early, at 4.45 p.m. As a rule, meals were prepared in a central kitchen by contracted staff; however, once a week, simple meals were prepared or warmed up in the unit kitchens by the young persons. In the CPT's view, the planning, preparation, cooking and eating of a meal should be a communal experience and, if the facilities exist, should take place regularly under the supervision of a custodial care officer (CCO). Such an approach would provide greater individual responsibility as well as promote specific skills and enhance the community approach. For example, each day the responsibility for a meal could pass to a different young person and the menu for the week could be decided upon by the whole unit.

The CPT recommends that the dietary requirements of the young persons at the STC be regularly reviewed by the dietician, so as to ensure that the meals provided are suitable for their specific needs. Consideration should also be given to serving the tea-time meal later or providing a snack. Moreover, consideration should be given to promoting a more communal approach to the preparation and cooking of meals.

d. regime and activities

174. Rule 27 of the STC Rules stipulates that a trainee should be engaged in education, training, and physical education. Convicted trainees, should also attend programmes designed to tackle offending behaviour. An individual training plan must be drawn up for each juvenile within two weeks of admission and be reviewed on a regular basis (every two or three months according to length of sentence). According to Rule 28, juveniles must attend 25 hours per week in education and training. Educational services in Rainsbrook STC were contracted to NOVUS for 25 hours of education and 5 hours of enrichment activities[140] per week.

175. Each CCO on the units was allocated one or two trainees for whom she/he had increased responsibility in terms of individual follow up, which included holding a weekly behaviour session. **The CPT encourages recent developments to ensure greater participation of CCOs, who demonstrated a good knowledge of the young persons, in the formulation of care plans and their reviews.**

---

140 This included music, football, fitness, multi-sports, cooking.

176. Young persons were only confined to their rooms at night from 9 p.m. to 7:30 a.m. The day started with breakfast, eaten communally on the unit, and a one-hour group work (or "intervention"), followed by morning education (from 10 a.m. to noon). Lunch was taken either on the unit or in the cafeteria, where staff also ate, followed by education from 1 p.m. to 4 p.m.). Dinner was served on the units at 4:45pm., after which young persons were engaged in various activities until 9 p.m. (cleaning and recreation on the unit, thirty minutes of outdoor exercise and, on some days, an enrichment activity outside the unit).

On weekends, the days were less structured, and the delegation gained the impression that the level of activities offered, as well as the amount of time spent outside the unit, depended in part on the CCOs on duty. Many young persons complained of boredom and idleness on weekends.

Each young person was issued a hand-held tablet containing a group of functions collectively known as the Youth Portal. It could be used not only to liaise with staff, but also to access educational material and as an electronic messaging device.

Part of the regime was incentives-based. According to their behaviour, each trainee was attributed a level (levels 1 to 3) every week. Privileges included in-room television, higher weekly earnings and access to all enrichment activities (as opposed to only a few), without impacting the core programme. An enhanced unit (Ledwell Unit) had recently been created, which had free access to the attached courtyard.

177. Attendance in education was high (90 to 96% between January and April 2019). Nine separate curricula (known as pathways) were available from which boys and girls, who attended class together, could choose, and twelve teachers were on-site Monday to Friday together with four learning support practitioners. In total, there was a pool of 20 teachers and 10 learning support practitioners for additional support for young people with special needs. Some CCOs attended education and provided support in the classrooms, on a voluntary basis. At the time of the visit, only a couple of trainees were not attending school and were receiving one-to-one sessions on their unit.

It is positive that the weekly education timetable included four hours of sports (on Monday, Wednesday and Friday) as well as some sports-related enrichment activities. Providing young persons with regular sports activities is important.

178. It is commendable that all young persons in Rainsbrook STC had access to a purposeful regime and spent most of their time out of their rooms. Nevertheless, the CPT considers that while there were some elements of community living (undertaking chores on the unit, eating together, associating together on the unit) more could be done to promote group activities, including activities involving boys and girls when appropriate, and greater communal living. For example, as outlined above, having units prepare their meals or planning a special activity.

Based on the above observations, **the CPT recommends that measures be taken to ensure that the weekly planning is managed in such a way that young persons are offered at least two hours in the open air each day, whether in an organised sports activity or enjoying some free time outside. In addition, the weekend schedule should be revised in order to ensure that each day, juveniles are offered some structured activities.**

e. staff

179. At the time of the visit, there were 111 Custodial care officers (CCOs) posted at Rainsbrook STC, which left 20 vacant positions. According to the STC's director, minimum staffing requirements to run the institution was 27 CCOs during the day and seven at night. Under normal circumstances, three CCOs were allocated to each unit during the day (between 7.30 and 9.30 pm), and one during nights. The staffing levels were therefore intensive, and despite the vacancies, the centre was in full operating mode.

180. Custody officers were often young and relatively inexperienced. There were no minimum formal qualifications required for applying for a CCO position and the initial training was limited to seven or eight weeks, followed by a period of shadowing an experienced officer. On-the-job training included a one-day training every six weeks[141] and an MMPR refresher course every six months. On a positive note, a number of modules were well adapted to the specificities of the STC's population (child development, mental health, safeguarding, quality and diversity). In general, the delegation observed positive interaction between CCOs and young persons on the units, albeit with varying degrees of engagement by staff members, with some pro-actively organising group activities, volunteering to assist in the classrooms, while others displayed a more passive supervisory role.

As expressed in paragraph 144, the CPT holds that the custody and care of juveniles deprived of their liberty is a particularly challenging task. The staff called upon to fulfil that task should be carefully selected for their personal maturity and ability to cope with the challenges of working with - and safeguarding the welfare of - this age group. More particularly they should be committed to working with young people and be capable of guiding and motivating the juveniles in their charge. All such staff, including those with purely custodial duties, should receive professional training, both during induction and on an ongoing basis, and benefit from appropriate external support and supervision in the exercise of their duties.

In the light of the above remarks, **the CPT recommends that the United Kingdom authorities put in place measures to extend the initial and on-going training of custodial staff working at Rainsbrook STC, and possibly other STCs, as well as adequate psychological support and remuneration to reflect the challenging nature of the role of a custodial officer.**

Further, **efforts should be made to ensure that the pool of custody and care officers comprise a variety of profiles, including a proportion of individuals with significant life and work experience. CCOs should also be supported in their efforts to engage the young persons in meaningful activities outside the core programme, with a view to fostering a sense of community living on the units.**

f. discipline and segregation

(i) loss of privileges

181. There is no mention of a disciplinary procedure in the STC Rules. At Rainsbrook, the main behaviour management tool was the incentives-based regime scheme. In case of non-compliance to the rules, a young person was given a red or yellow "behaviour slip", which could lead to demotion to a lower level of the scheme, resulting in a loss of privileges. According to the young persons, the typical sanction was having the in-room television removed for a few days.

---

[141] For example, the following subjects had been tackled: security searches, safeguarding, formulation plan.

The CPT's delegation noted that an internal policy stated "(r)epeated incidents of red behaviours that do not correspond to documented staff interventions may result in a recommended YOI placement".[142] Given the very different nature of a YOI compared to a STC such a measure must be considered as exceptional and based on a thorough risk and needs assessment of the young person concerned.

The incentives scheme was generally perceived by the young persons as being fair in principle. However, there were complaints that it was not being consistently applied from one unit to the next. **The CPT recommends that the management of Rainsbrook STC take the necessary measures to ensure that the incentives-based regime scheme is applied in a consistent manner in all units. Further, the CPT would like to be informed how many boys were transferred from Rainsbrook STC to a YOI in 2019 due to their behaviour and to be informed of the procedures and safeguards surrounding such a measure.**

The delegation also noted that the number of sanctions had considerably increased over the last couple of years,[143] despite the management of Rainsbrook declaring a will to steer away from a sanction-based towards a reward-based behaviour management system. **The CPT would like to receive comments on this point.**

(ii) segregation

182. Under Rule 36 of the STC Rules, a young person may be removed from association and placed alone in his room in order to prevent either significant harm to himself or others, or significant damage to property. The rule specifies that this measure may not exceed three hours over a period of 24 hours. In such a case, staff need to check on the young person every 15 minutes.

According to the registers consulted, between January and April 2019, single separation had been used on 25 to 30 occasions each month, for an average duration of one hour per episode.

During an episode of single separation, the young person was kept in his/her room, or alternatively, if the incident occurred during education, in one of two "chill out" or "time out" rooms located in the education blocks. The latter had been decorated with wall paintings and there were plans to equip them with bean bags for young persons to sit on.

The delegation was informed that these rooms were sometimes used at the request of a young person. However, no such motive appeared in the registers provided. **The CPT recommends that that all episodes of single separation, whatever the reason and whatever the duration, be fully and accurately recorded.**

183. Based on the above, the delegation confirmed that there was no use of solitary confinement at Rainsbrook, be it for any purpose.

g. health care

184. Young persons at Rainsbrook had access to a range of age-appropriate health services, delivered by a suitably-staffed integrated primary care and mental health team.

---

142 MTCnovo Operating Procedure – Rainsbrook STC – Incentive and Earned Privileges Scheme – March 2019, section 7.1.10.

143 650 sanctions in 2017, 1095 in 2018 and 440 between January and April 2019.

A core team of six permanent nurses was allocated to the centre (one full-time and one part-time registered nurse, two full time mental health nurses and two full-time learning disability nurses). Additional nurses were contracted out to cover the daily minimum staffing requirements which were: on weekdays, four nurses during the early shift and two nurses during the late shift; on weekends, two nurses on each shift. In practice, staffing levels usually exceeded these requirements. Whenever possible, each shift was staffed by nurses with different specialisations. Nurses were present from 7.30am to 10pm; after 10pm, a nurse was on call.

The CPT recommends that measures be taken in order to ensure the presence at night of a person qualified in first aid, preferably a person with a nursing qualification.

Further, in the view of the CPT, increasing the number of registered nurses within the "regular" pool would provide more stability and benefit the maintenance of trust between juveniles and health care staff.

185. In addition, the primary health care team consisted of two general practitioners (3 hours per week each).

The mental health team consisted of two forensic psychologists and one assistant psychologist employed by the Ministry of Justice, one clinical psychologist and two assistant psychologists employed by NHS and a consultant clinical psychologist engaged by Secure Stairs. A psychiatrist visited the centre three hours per week, a speech and language therapist twice a week. An occupational therapist post was vacant at the time of the visit. **The CPT would like to receive confirmation that the position of occupational therapist has now been filled.**

There were two full time substance misuse workers, and the STC was also visited by a dentist (once a week) and a dental nurse or dental therapist (daily) an optician (once per month), a physiotherapist (recently recruited) and a paediatrician (depending upon need).

186. The screening process was of a very high standard and provided the basis for comprehensive care plans which were regularly updated. However, **screening for previous forms of abuse, including sexual abuse, should be included** (see paragraph 157). The CPT welcomes the introduction of a gender-neutral HPV[144] vaccination programme.

The quality of somatic care was of a good standard. Further, young persons were provided with effective psycho-social, sexual behaviour interventions as well as full psychiatric assessments.

187. Medicine supply, storage and prescribing were adequate. Electronic health records were well-kept and injury recording was satisfactory.

188. Medical confidentiality of consultations was respected. However, the delegation observed that medical information was available on the units, in the offices of custodial staff, where lists of young persons were pinned to the wall referring to their medical diagnoses. This information should not be on display. While it may be useful for non-medical staff to be provided with medically-informed advice (such as triggers to avoid or to recognise), sharing of medical information should be strictly on a need-to-know basis. **The CPT recommends that the necessary measures are taken to ensure that the medical information which is shared with non-medical staff respects this principle.**

144 Human Papilloma Virus.

189. Health care staff were readily accessible. Nurses did morning rounds on the units every day including weekends. Each young person was assigned a specific nurse which ensured a personalised follow up of patients.

However, the health staff regretted that due to a lack of escorts, a number of consultations and clinics were cancelled and that young patients were sometimes brought in late to collect their medication. **To the extent that there was no sign of custodial staff shortage, the CPT trusts that measures will be taken promptly to remedy this situation.**

190. As was the case in the YOIs, health care staff were expected to attend use of force interventions and to meet with the young person afterwards. **The recommendation and comments formulated in paragraph 160, equally apply to Rainsbrook and other STCs.**

191. Finally, the delegation was informed that juveniles were routinely handcuffed during transfers to external medical facilities. The CPT has consistently stated that the handcuffing of any person, let alone a child, deprived of their liberty during transfers out of an establishment should never be a routine practice but always based on an individual risk assessment. **The CPT recommends that measures be taken in order to ensure that juveniles are only placed in handcuffs when deemed strictly necessary, based on an individual risk assessment.**

h. other issues

192. The admission and induction process did not call for any comment other than the fact that late arrivals of young persons were frequent. As expressed at paragraph 164, **the CPT recommends that measures be taken to avoid late admissions.**

193. As regards contacts with the outside world, young persons were entitled to a weekly visit of one and a half hours per week, which usually took place in the dining hall. The centre was flexible towards families who had long travel times.

Young persons could make free phone calls from their rooms, after school hours, for twenty minutes per day, and incoming calls were limited to one hour per call. In addition, the Youth Portal tablet included an electronic messaging function.

194. The young persons at the STC had ready access to information and advocacy services (through Barnardo's). They were also well aware of the complaint procedures. Complaints could be addressed in paper form or through the Youth Portal, and they were replied to efficiently.

195. The Office for Standards in Education, Children's Services and Skills (Ofsted) regularly inspected STCs, in co-ordination with HMIP. Rainsbrook STC had last been visited in October 2018.

APPENDIX I

LIST OF THE ESTABLISHMENTS VISITED BY THE CPT's DELEGATION

Adult prisons

- HMP & YOI Doncaster
- HMP Liverpool
- HMP Wormwood Scrubs

Juvenile detention establishments

- HMYOI Cookham Wood
- HMYOI Feltham (A)
- Secure Training Centre Rainsbrook

APPENDIX II

LIST OF THE NATIONAL AUTHORITIES AND NON-GOVERNMENTAL ORGANISATIONS WITH WHICH THE DELEGATION HELD CONSULTATIONS

A. National authorities

David GAUKE Lord Chancellor and Secretary of State for Justice

Robert BUCKLAND Minister of State for Prisons and Probation

Edward ARGAR Parliamentary Under Secretary of State

Her Majesty's Prisons and Probation Service (HMPPS) and Ministry of Justice (MoJ)

Jo FARRAR Chief Executive Officer of HMPPS

Phil COPPLE Executive Director of Prisons, HMPPS

Helga SWIDENBANK HMPPS, Executive Director, Youth Custody Service

Nick POYNTZ MoJ, Deputy Director, Prison Safety and Security

Ed CORNMELL HMPPS, Deputy Director, Long Term and High Security Estate

Alice ADAMSON MoJ, Deputy Director, Global Strategy and Rights

Jenny REES HMPPS, Head of Prison Safety Team

Anthony THOMPSON MoJ, Team Leader, Youth Justice Policy

Alison STRADLING MoJ, Team Leader, Head of Domestic and UN Human Rights

Sergio MORENO MoJ, Senior Policy Adviser, Global Strategy and Rights

Simon VAN GELDER MoJ, Policy Adviser, UN Human Rights Team

Other authorities

Bob NEILL Chair, House of Commons Justice Select Committee

David HANSON Member of House of Commons Justice Select Committee

Victoria PRENTIS Member of House of Commons Justice Select Committee

Marie RIMMER Member of House of Commons Justice Select Committee

Lord WOOLF	Parliamentary Joint Committee on Human Rights
Baroness HAMWEE	Parliamentary Joint Committee on Human Rights
Eleanor HOURIGAN	Counsel to the Joint Committee on Human Rights
Simon CRAN-MCGREEHIN	Lords Clerk
Peter CLARKE	Her Majesty's Chief Inspector of Prisons
Sue MCALLISTER	Prisons and Probation Ombudsman
Anne OWERS	National Chair of the Independent Monitoring Boards
John WADHAM	Chair of the United Kingdom National Preventive Mechanism
Louise FINER	United Kingdom National Preventive Mechanism co-ordinator
Emily FRITH	Head of Policy and Advocacy, the Children's Commissioner
Meadbh DEMPSEY	External Policy and Communications Officer, the Children's Commissioner

B. <u>Non-governmental and other organisations</u>

The British Medical Association

The Children's Rights Alliance for England

The Howard League for Penal Reform

Independent Inquiry into Child Sexual Abuse (IICSA)

INQUEST

Mind

Prison Reform Trust

REDRESS

The Royal College of General Practitioners