During our scrutiny visits many prisoners told us that they understood the reasons for the restrictions, but they felt drained, despondent, depleted, helpless and without hope. To manage the chronic boredom, some told us they listened to the ticking of the clock or counted down the days on the calendar. One prisoner said:

> 'It's like being in prison, while you're in prison.'

The conclusions of our thematic review are particularly concerning in light of our other inspection findings. We found that most mental health services had ceased routine assessments or interventions and were focusing only on urgent and acute care. Prisoners often faced considerable waits to see mental health practitioners; in our survey, over half of prisoners told us they had mental health problems (52%) but less than a quarter said it was easy to see mental health workers (22%). There was also widespread curtailment of other health care services that left a long backlog of cases. At one prison we found prisoners waiting more than a year to see the GP.

There is no doubt that rehabilitation should be one of the main purposes of prisons, yet too many prisoners were locked up with too little to do before the pandemic and the situation became much worse this year, even in training prisons. In the last year leaders have had to make difficult decisions about staffing and services. This has meant that many prisoners have been denied the opportunity to get onto programmes that were part of their sentence plan and have therefore been unable to progress to a lower category prison or to a successful parole hearing.

Open (category D) prisons have been particularly hard hit by restrictions on release on temporary licence (ROTL) and some of the most frustrated prisoners I have met have been in these establishments. They arrived having proved they could be trusted in a less secure environment with the expectation that they would begin to experience life as a citizen rather than as a prisoner.

Visits have recently restarted in some establishments, but many prisoners have not seen family or friends for over a year. This is concerning because regular contact is a critical factor in holding families together and preventing reoffending. Even where visits have been possible, many prisoners have preferred not to be visited at all when constraints have forbidden any physical contact, even with young children. We came across one case where a prisoner was banned from visits for a month and sent into quarantine because his toddler came and sat on his lap; elsewhere we saw a more understanding approach.

Quick response, but tough restrictions

We found that, following the forecast from Public Health England of an acute risk of loss of life within the high-risk nature of the prison environment, establishments had acted swiftly in taking action to keep detainees safe and to control the spread of COVID-19. However, this response had come at the expense of locking detainees up for almost the entire day. Except in the open prisons, most adult prisoners were locked up for at least 23 hours a day following restrictions imposed by HM Prison and Probation Service (HMPPS) in March 2020 – some had even less time out of their cell. Children in the four public sector YOIs had been locked up for more than 22 hours a day; this had gone on for 15 weeks in two establishments by the time of our visit.

The restrictions imposed in March included separating new arrivals into 'reverse cohort units' (RCUs) for their first two weeks, isolating detainees with symptoms or shielding those most at risk, suspending visits, cancelling activities and limiting prisoner time out of cell.

While the initial response from prisoners to these measures was supportive, as time went on they were increasingly frustrated at the restrictions and the effects of a lack of social contact, an absence of activity, and the inability to see family and friends on their well-being. The withdrawal of external services – such as education, rehabilitation, specialist health services and specialist support for some very vulnerable women – also had a negative impact.

We found that the restrictions imposed had not taken into consideration the specific needs of women and children in prison.

When restrictions in the community eased in June, there was little sign of change in prisons as there were still live outbreaks at various sites which continued into late summer. During this time governors had limited discretion to lift some of the restrictions.

Children in custody

Young offender institutions

At the start of the pandemic, HMPPS gave too little attention to the distinct needs of children in custody. Leaders in public sector young offender institutions (YOIs) had made efforts to provide a regime that could meet the needs of children safely, but these were undermined by HMPPS decisions nationally to treat children in the same way as prisoners held in the adult estate. This was despite most children in custody meeting the definition of a vulnerable child; in the community face-to-face education was maintained for such children when the COVID-19 restrictions took effect. The result was a negative impact on children's access to services, including education and visits. Children in these YOIs also spent extensive periods locked in their cells (see Section 2). We found that fewer of these restrictions were placed on children held in Parc, who continued to have access to education.

The specific needs of children in custody were recognised as the pandemic progressed. By the time of our scrutiny visits to Wetherby and Feltham A, local managers were able to provide face-to-face services to children and make some improvement to the time they could spend out of their cells each day. At both sites, part-time education was provided for children to attend in small groups.

Grouping children into smaller 'family groups' had improved relationships between staff and children, but this had been at the cost of fewer hours of education and social interaction for each child and many had become detached from resettlement planning. At Wetherby, there was also evidence that the prolonged use of very small family groups, or bubbles, had resulted in children becoming unused to mixing with others and tension between different groups. This had created an understandable anxiety among staff and children about mixing the groups. At Feltham A, the emerging concern was the increasing number of assaults within groups, which also created anxiety.

The challenge for the Youth Custody Service (YCS) following the pandemic period will be to build on lessons learned during this time, while providing children with increasing hours of constructive time out of their cells.

Secure training centres (STCs)

We carried out an assurance visit at Rainsbrook STC jointly with Ofsted and the Care Quality Commission (CQC) in October 2020, where we raised several serious concerns (see box). Leaders had failed to assure children's safety and well-being consistently, and to address deficiencies in their care; support plans for vulnerable children were generic and did not detail the risk to the child or any strategies needed to keep them safe.

At a further visit in December, we decided to invoke the Urgent Notification procedure (see Glossary). Despite assurances from leaders at the centre, national leaders and YCS monitors, children continued to be locked up for 23.5 hours a day for days or weeks following arrival at the centre. It was inexplicable that leaders were unaware of this practice in a centre holding just 45 children. At a further visit in January 2021 we found some improvements in oversight, but weaknesses in education provision remained.

We also made an assurance visit to Oakhill STC in December. Leaders had responded well to the pandemic restrictions by gradually lifting the highly restrictive measures that were imposed initially. Education had recommenced and children had a suitable amount of association time together. Attendance at outreach education was high and, following a recruitment drive for teaching staff, there had been rapid progress in meeting the recommendations from the last full inspection. Children said they felt safe, and levels of violence and use of force were low. A well-integrated health care team, who had good oversight of children's needs, provided support.

Rainsbrook – an appalling lack of care for children

At a joint assurance visit carried out by Ofsted, HM Inspectorate of Prisons and the CQC in October 2020, inspectors found three boys on the reverse cohort unit (RCU), a unit holding newly admitted children for 14-days quarantine. All three children were assessed as needing heightened observations; staff were so concerned about one child that his observations were at five-minute intervals. Despite the identified vulnerabilities, these children were effectively in solitary confinement, locked in their cells with no interaction with staff or other children for 23.5 hours a day. They were allowed just 30 minutes a day in the open air. One 15-year-old, who was new to custody, received a visit from his caseworker and education staff in his cell on his first day, which was his sole induction to custody. After 24 hours, he was assessed as needing increased 15-minute observations, but his risk assessment did not reflect the reasons why or include any strategies to help him. This practice was reflected across the centre for newly arrived girls and those who had left the centre on escort for any reason.

The inspection team raised a serious concern and we were subsequently given assurances by national leaders in the YCS that this practice had ceased. However, at a further visit in December we found that leaders in the YCS and the centre had allowed these restrictions on new arrivals to continue and that no provision had been made for girls, leading to one being locked up for 48 hours without leaving her room. The team invoked the Urgent Notification process following this visit.

At a further visit in January 2021 we found some improvements in standards. Children who required quarantine were now given adequate time out of cell, but there continued to be weaknesses in the delivery of education. Work was still needed to address our previous recommendations.