

Report on an unannounced inspection of

# **HMP Stocken**

by HM Chief Inspector of Prisons

**29–30 June; 6–10 July 2015**

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### **Glossary of terms**

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

# Introduction

HMP Stocken is a category C training prison near Oakham in Rutland that, at the time of this inspection, held 672 adult men. The prison performed its central training function well but other outcomes were more fragile and needed to be strengthened in a number of important areas.

Most prisoners had good time out of their cells and, other than on the induction wing, we found few locked up during the working day. The prison had an effective partnership with Milton Keynes College and together they provided a generally good range of purposeful activity with sufficient full-time places to meet the needs of the population. There were good relationships between teachers and their students, prisoners behaved well in classes and workshops, and effective use was made of prisoner peer mentors. Together they helped prisoners to achieve. Most prisoners therefore spent their days busy in purposeful activity. Most communal areas and cells were clean and in good condition. Health care was good. Prisoners were also more positive about the food than in similar prisons. These were considerable strengths and made the prison a reasonable place for most prisoners, most of the time. Nevertheless, weaknesses in other areas risked undermining these strengths.

The good quality activities supported the rehabilitation of prisoners but were not linked to offender management processes or sentence plans. There was a large OASys (the main risk assessment and sentence planning tool) backlog and although offender supervisors were diligent and enthusiastic they received inadequate supervision, their work was too reactive and they had too little contact with individual prisoners. Offender management did not sufficiently drive individual prisoners' sentence plans and was not central to the work of the prison. Nevertheless, important core processes such as public protection were delivered well. Stocken had not been designated a resettlement prison and few prisoners were released directly from it. Specific resettlement services had been dismantled and offender supervisors normally made adequate ad hoc arrangements for those who were, but these needed to be more systematic. The good range of offending behaviour courses available was important and it was pleasing to see good work to help prisoners maintain or develop healthy relationships with their families.

Some poor relationships between uniformed staff and prisoners created a significant weakness. Fewer prisoners than in comparable establishments and at the last inspection said staff treated them with respect or that they had a member of staff they could turn to with a problem. Forty per cent of prisoners told us they had been victimised by staff, which was also higher than at similar establishments (29%) and at the last inspection (34%). We saw distant and dismissive behaviour that bore out prisoners' perceptions and staff spent too much time in their offices, out of contact with prisoners. Prisoners from black and minority ethnic backgrounds, Muslim prisoners and prisoners with disabilities reported more negatively than the rest of the population and some monitoring data suggested unequal outcomes. The prison's work on equality and diversity issues had deteriorated and too little had been done to investigate and address these findings. The quality of responses to complaints was too variable and the complaints system did not provide a reliable mechanism for resolving legitimate concerns.

Weaknesses in relationships undermined dynamic security. Almost half of the prisoners told us they had felt unsafe at some time in the prison and almost one in five told us they felt unsafe at the time of the inspection. Over a third told us they had been victimised by other prisoners. The number of violent incidents was high, although it had reduced over the last year. There had been a number of serious incidents before the inspection which had culminated in a serious disturbance that resulted in the closure of a wing. Like too many other prisons we have been to recently, the availability of new psychoactive substances appeared to be a significant factor in these concerns. Half of the prisoners in our survey told us it was easy to get drugs in the prison. The prison had been too slow to get to grips with the problem, although by the time of the inspection an appropriate strategic response was in place. Other procedural safety and security measures were reasonable. The care for men at risk of

suicide or self-harm was good despite high levels of need and there had been no self-inflicted deaths in the prison for a long time.

HMP Stocken's very good purposeful activity pulled the rest of the prison up and provided good outcomes for most prisoners by equipping them with the skills they needed to get and hold down a job after release. However, Stocken had significant weaknesses and determined efforts will need to be made to address them if they are not to threaten the prison as a whole. The prison is not safe enough and it has a significant drugs problem. The systems and processes in place to tackle this are mostly appropriate but their effectiveness is undermined by some poor staff attitudes. Prisoners with protected characteristics report more negatively than the population as a whole and much of the prison's own monitoring data supports their concerns. Offender management is not sufficiently central to the work of the prison and so good work, learning and skills is not properly linked to clear plans to address attitudes and behaviour. The prison needs to respond effectively to these weaknesses if the good work it does is to be sustained.

**Nick Hardwick**  
HM Chief Inspector of Prisons

September 2015

# Fact page

**Task of the establishment**

HMP Stocken is a category C closed training prison.

**Prison status (public or private, with name of contractor if private)**

Public

**Region/Department**

East Midlands

**Number held**

672

**Certified normal accommodation**

648

**Operational capacity**

713

**Date of last full inspection**

6–10 August 2012

**Brief history**

HMP Stocken opened in 1985 with an operational capacity of 320. Successive building projects expanded the provision. All the original accommodation has now been closed and demolished. Since the previous inspection, permission has been given to build another new wing. K wing is currently closed following a recent disturbance and fire, and is due for refurbishment; this has temporarily reduced the certified normal accommodation and operational capacity.

**Short description of residential units**

F wing: 99-bed cellular accommodation with integral sanitation (with three double cells)

H wing: 130-bed cellular accommodation with integral sanitation (with 10 double cells), for prisoners on induction

I wing: 78-bed cellular accommodation with integral sanitation (with 14 double cells), for prisoners undergoing drug recovery

K wing (currently closed, awaiting refurbishment): 130-bed cellular accommodation with integral sanitation (with 10 double cells), including space for the integrated drug treatment system (IDTS)

L wing: 202-bed cellular accommodation with integral sanitation (with 18 double cells)

M wing: 204-bed cellular accommodation with integral sanitation (with 20 double cells)

**Name of governor/director**

Michael Wood

**Escort contractor**

GeoAmey

**Health service provider**

Primary care and substance misuse: Nottinghamshire Healthcare NHS Foundation Trust

Mental health care: Northamptonshire Healthcare NHS Foundation Trust

**Learning and skills providers**

Milton Keynes College

**Independent Monitoring Board chair**

Mike Siswick

# About this inspection and report

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

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

A3 All Inspectorate of Prisons reports carry a summary of the conditions and treatment of prisoners, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. The tests are:

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

A4 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. There are four possible judgements: In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.

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

- A5 Our assessments might result in one of the following:
- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
  - **housekeeping points:** achievable within a matter of days, or at most weeks, through the issue of instructions or changing routines
  - **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for prisoners.
- A6 Five key sources of evidence are used by inspectors: observation; prisoner surveys; discussions with prisoners; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.
- A7 Since April 2013, all our inspections have been unannounced, other than in exceptional circumstances. This replaces the previous system of announced and unannounced full main inspections with full or short follow-ups to review progress. All our inspections now follow up recommendations from the last full inspection, unless these have already been reviewed by a short follow-up inspection.
- A8 All inspections of prisons are conducted jointly with Ofsted or Estyn (Wales), the Care Quality Commission or Healthcare Inspectorate Wales, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

## This report

- A9 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of prisoners and conditions in prisons*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.
- A10 Details of the inspection team and the prison population profile can be found in Appendices I and IV respectively.
- A11 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix V of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.<sup>1</sup>

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<sup>1</sup> The significance level is set at 0.05, which means that there is only a 5% chance that the difference in results is due to chance.

# Summary

## Safety

- S1** *Most prisoners were positive about escort staff. Early days processes were generally good and the induction programme was effective. Prisoners reported high levels of victimisation and many said that they felt unsafe. There had been a number of serious violent incidents. The overall number of assaults was relatively high. Such incidents were investigated well and general strategic management was good. Care for prisoners at risk of self-harm was good. Safeguarding and social care arrangements were reasonable. Security was generally proportionate but there were some exceptions. Procedural security was reasonably well managed but a few practices were disproportionate. There was a growing drug problem involving new psychoactive substances. Suitable prisoners were not always able to access the enhanced level of the incentives and earned privileges scheme. The level of use of force was high. Documentation usually suggested the use of force was justified, but we were not assured that de-escalation was fully used in all appropriate cases. The use of segregation was high but reintegration planning had improved. Substances misuse services were good. **Outcomes for prisoners against this healthy prison test were not sufficiently good.***
- S2** *At the last inspection in 2012, we found that outcomes for prisoners in Stocken were reasonably good against this healthy prison test. We made 19 recommendations in the area of safety. At this follow-up inspection we found that 10 of the recommendations had been achieved, five had been partially achieved, three had not been achieved and one was no longer relevant.*
- S3** Prisoners reported positively on their experiences of escort journeys but not all had been given sufficient notice of their transfer to the prison. The reception area was clean and functional, and staff and peer mentors were welcoming and respectful. However, some prisoners waited for many hours in reception. All were routinely strip-searched, which was disproportionate; resultant finds were minimal. The number of prisoners arriving at the prison who said that they had mental health problems had increased. First night cells were well prepared and good peer support helped new arrivals to settle in, but first night interviews did not focus sufficiently on vulnerabilities. Induction was comprehensive and well delivered, and prisoners reported positively on it.
- S4** Many prisoners said that they felt unsafe. They also reported high levels of victimisation from other prisoners and staff. The number of recorded assaults had increased since the previous inspection and was higher than at similar prisons, although it had reduced since the previous year. There had been a number of serious recent incidents, including a major disturbance that had resulted in the closure of a wing. The flow of information into the safer custody team was good and investigations into violent incidents were thorough. The strategic oversight of bullying and violence reduction was generally good. An effective safety, order, control and tasking (SOCT) meeting was held weekly to share information and identify concerns that needed to be addressed. Wing staff were not always aware of which prisoners needed support and did not always monitor perpetrators of violence frequently enough.
- S5** There were fewer self-harm incidents and prisoners subject to self-harm monitoring than at comparator prisons and than at the time of the previous inspection. There had been no suicides for more than 10 years. There was reasonable access to Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) but there was no longer a Listener suite as this had been on the wing that had closed (see above). The quality of assessment, care in custody and teamwork (ACCT) case management

documentation for prisoners at risk of suicide or self-harm was variable; however, the case review we observed was conducted sensitively and prisoners on ACCTs told us that they were cared for well.

- S6 There was no prison-wide safeguarding policy but support for prisoners with safeguarding needs was coordinated effectively through the SOCT meeting. Partnership working with Rutland County Council and Nottinghamshire Healthcare NHS Foundation Trust had recently started and appeared promising in helping to meet the social care needs of prisoners.
- S7 Procedural security was reasonably well managed but a few practices, such as routine strip-searching in reception, were disproportionate. Security meetings were well attended and the management of intelligence was reasonably good. Staff supervision of prisoners in some areas was inadequate and some poor staff–prisoner relationships undermined dynamic security. There had been several serious incidents over the previous few months, many of which had been attributed to new psychoactive substances (NPS) (new drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects). In our survey, far more respondents than elsewhere and than at the time of the previous inspection said that it was easy to get drugs in the prison.
- S8 Few prisoners reported that the incentives and earned privileges scheme was fair or had encouraged them to change their behaviour. Not all motivated prisoners had the opportunity to undertake work that could lead to enhanced status. The regime for the small number of prisoners on the basic regime was better than we usually see.
- S9 The number of adjudications was high but hearings were conducted fairly. Punishments were fair and consistent but records showed some petty charges that could have been dealt with less formally. The level of use of force was comparatively high. Paperwork was completed promptly and usually indicated that force had been justified, but some accounts did not give assurance that de-escalation was always used to its full effect. Governance arrangements were inadequate.
- S10 Use of segregation was high but lengths of stay on the unit were not excessive. Living conditions there were reasonably good but some showers were dirty and the cage-like exercise yards were stark. Day-to-day relationships between staff and prisoners on the unit were generally good, and case management and reintegration planning had improved.
- S11 The drug and alcohol team delivered a comprehensive and well-integrated service. The recovery unit achieved good overall outcomes. Although the random positive mandatory drug testing rate was low, this did not reflect the growing problem with undetectable NPS. An NPS committee had recently been formed and an action plan was being developed.

## Respect

- S12** *The prison was generally clean, but some prisoners were in cramped cells and had inadequately screened toilets. We saw some good staff–prisoner relationships but also too much distant and dismissive staff behaviour. There was an inadequate focus on equality and diversity issues. In our survey, minority groups reported more negatively than others. Faith provision was good. Too many responses to complaints were inadequate. Health services were good. The standard of the food provided was good. **Outcomes for prisoners against this healthy prison test were reasonably good.***

*S13 At the last inspection in 2012, we found that outcomes for prisoners in Stocken were reasonably good against this healthy prison test. We made 23 recommendations in the area of respect.<sup>2</sup> At this follow-up inspection we found that six of the recommendations had been achieved, three had been partially achieved, 13 had not been achieved and one was no longer relevant.*

- S14 Most communal areas were clean and most cells were in good condition. Several cells designed for one held two people, and cabinets in some cells could not be locked. Some in-cell toilets were inadequately screened and showers were in need of an upgrade. Prisoners had insufficient access to the extensive outside grounds. Following recent changes, the applications system had improved and was reasonably effective.
- S15 In our survey, fewer prisoners than at similar prisons and than at the time of the previous inspection said that staff treated them respectfully and that they had a member of staff they could turn to for help. Staff–prisoner relationships were variable and, although we saw some staff engaging positively with prisoners, we also saw some distant and dismissive staff behaviour. Consultation arrangements were reasonable but some issues were repeated from month to month without resolution.
- S16 The strategic oversight of equality and provision for protected groups had deteriorated and promotion of equality was weak. Most of the prison’s equality monitoring data were out of range, and meaningful investigations had not yet been completed. Equality representatives did not meet together and their role was ill defined. There was no longer any consultation for those with protected characteristics. In our survey, Muslim prisoners and those with a disability reported more negatively than their counterparts. Prisoners with a disability waited too long for reasonable adjustments to be made. Evacuation plans were not always accurate and some night staff were unaware of prisoners needing assistance.
- S17 Faith provision was reasonably good. Facilities for worship were welcoming and arrangements for Ramadan had been well managed.
- S18 More than a third of complaints submitted by prisoners were upheld. The quality of replies was variable; some were appropriate but others were perfunctory, unclear and unhelpful, failing to deal with issues that had been raised. Quality assurance of the responses to complaints was weak. Legal visits were insufficiently private.
- S19 Health services were good. Prisoners had timely access to GP, dental and nurse appointments, but waited too long for most other services. Governance arrangements and joint working between the providers were effective. Access to emergency first aid was reasonable but we noted one instance where there had been a delay of nine minutes in calling an ambulance following a ‘code red’ being called. Health promotion activity was underdeveloped but the prisoner mentor-led smoking cessation service was an impressive initiative. Dental care was good. Pharmacy services were reasonable. The mental health support available was very good, but discipline staff did not receive regular mental health awareness training.
- S20 In our survey, prisoners were more positive than at comparator prisons about the food provided, and the range and quality were mostly good. There was regular and meaningful consultation on the menus. Prison shop arrangements appeared to work appropriately.

<sup>2</sup> This included recommendations about the incentives and earned privileges scheme which, in our updated Expectations (Version 4, 2012), now appear under the healthy prison area of safety.

## Purposeful activity

**S21** *The amount of time out of cell was generally good and most prisoners were usefully occupied for the full working day. There were enough activity spaces for the population. Although some work was insufficiently challenging, most workshops provided meaningful employment. There was effective use of peer workers. The quality of education was good. Achievements were good overall and prisoners could develop a wide range of vocational skills. Library provision was reasonable. PE provision was generally good. **Outcomes for prisoners against this healthy prison test were good.***

**S22** *At the last inspection in 2012, we found that outcomes for prisoners in Stocken were not sufficiently good against this healthy prison test. We made 12 recommendations in the area of purposeful activity. At this follow-up inspection we found that seven of the recommendations had been achieved, two had been partially achieved, one had not been achieved and two were no longer relevant.*

**S23** The amount of time that most prisoners spent out of their cells was good. Few prisoners were locked up during the core working day, except on the induction wing, where prisoners spent too much time behind their doors. The regime at weekends was sometimes curtailed as a result of staff shortages but all prisoners still had a minimum of four hours a day unlocked.

**S24** Good partnership working between prison and Milton Keynes College managers had resulted in a well-planned and coherent curriculum, based on high-quality labour market information. College managers made good use of data to support self-assessment judgements. The observation of teaching and learning process was good, although subsequent action planning was not challenging enough. The quality improvement group was a valuable improvement forum but recent meetings had been poorly attended.

**S25** The prison provided sufficient full-time activity places for the population and allocation procedures were efficient. The range of accredited provision was good and included a wide choice of industrial workshops that matched commercial standards and helped prisoners to develop meaningful employability skills. By contrast, the two commercial assembly workshops were unchallenging and did not develop prisoners' skills.

**S26** The quality of education, training and work was good. Prisoners' attendance and behaviour during activities was good and learning support workers and peer mentors provided additional support in classrooms and workshops. Specialist tutors provided good English and mathematics support in vocational workshops. Classrooms were well resourced. Target setting in individual learning plans was often too vague, with few or no targets for the achievement of interpersonal skills.

**S27** Prisoners' achievements, both in gaining qualifications and in developing a wide range of vocational skills, were good. Outcomes in English and mathematics had improved considerably but required further improvement.

**S28** The library was well stocked and prisoners could participate in a range of reading initiatives. Prisoners could have one half-hour library visit a week, and most visited on Friday afternoons or at weekends. Access to the library's computers was inappropriately limited to Friday afternoons.

**S29** Prisoners engaged in a wide range of sports activities, and PE facilities were good. Success rates on the prison's fitness-related qualifications were high. Gym staff had productive relationships with the health services team, but links with Milton Keynes College were less well developed.

## Resettlement

- S30** *Current resettlement outcomes were good but the offender management unit was not sufficiently driving prisoners' sentence plans. Most prisoners had limited offender supervisor contact and there was a large backlog of offender assessment system (OASys) assessments. Public protection work was generally good. Recategorisation processes and assessments were completed well and progressive moves were not problematic. There were few current resettlement needs and they were being met. Visits provision and work to promote family ties were good. Prisoners could access a range of appropriate offending behaviour courses. **Outcomes for prisoners against this healthy prison test were reasonably good.***
- S31** *At the last inspection in 2012, we found that outcomes for prisoners in Stocken were reasonably good against this healthy prison test. We made 14 recommendations in the area of resettlement. At this follow-up inspection we found that four of the recommendations had been achieved, five had been partially achieved and five had not been achieved.*
- S32** Most resettlement outcomes were currently good, despite the fact that the prison did not have the support of a community rehabilitation company (CRC) or other resettlement support. It faced a difficult strategic challenge to meet the identified resettlement needs for the small number of prisoners released directly from the establishment. Not enough use had been made of a helpful needs analysis to inform future focus and provision.
- S33** Offender supervisors were well motivated and responded well to specific tasks such as parole reviews. However, their work was usually reactive and they had little contact with prisoners to motivate and support them through their sentence. There was a lack of clear direction, supervision and quality assurance of offender supervisors' work by offender management unit (OMU) managers. There was a large backlog of offender assessment system (OASys) assessments and a number of prisoners had no assessment at all. Most of the backlog was the responsibility of external offender managers. The quality of OASys assessments was mixed; sentence plans were not always well structured and some risk analysis and management plans were inadequate. The OMU was not driving the work undertaken with prisoners and there was insufficient coordination between the sentence planning process and other functions, such as activities. There was no specific provision for life-sentenced prisoners and many we spoke to were frustrated at their lack of contact with offender supervisors.
- S34** Public protection procedures on arrival were generally well managed, and the public protection issues in our case sample had been dealt with appropriately. Monthly interdepartmental risk management team meetings were not consistently attended by relevant departments, and there was not always sufficient input from offender supervisors. Recategorisation reviews were timely and generally well informed, and transfers usually took place quickly.
- S35** As most of the population moved to a resettlement prison during the final 12 weeks of their sentence, they had few pre-release needs and there was therefore little provision. For the small number released directly from the establishment, offender supervisors were responsible for ensuring that resettlement pathway-related needs were met, in the absence of CRC input. Most released prisoners had settled accommodation but not enough had received careers advice or action plans regarding next steps. The links between advice and guidance and sentence planning were underdeveloped.

- S36 Arrangements to ensure continuity of health care on transfer and release were good. The drugs team had good links with local community support agencies and was developing connections with resettlement prisons in the region. There was also a family link worker.
- S37 There was a large, relaxed visits hall, with a play area that was staffed for all sessions. Visitors that we spoke to were positive about their experience. Access to family days was good and the library provided Storybook Dads (in which prisoners record stories for their children) and 'Me and My Dad' (in which fathers and children complete structured activities and send them to each other, creating a memory book). Many prisoners were held a long way from home and several told us that this created difficulties in maintaining relationships with their family, particularly because of the prison's remote location, and many prisoners wanted a transfer, to be closer to their families.
- S38 A range of offending behaviour programmes had been commissioned on the basis of evidenced need, and access was good. Sufficient offending behaviour work was done in most cases. A victim awareness course was in place but it did not meet all the identified need.

## Main concerns and recommendations

- S39 Concern: The number of recorded assaults had increased and was far higher than at similar prisons. There had been a number of recent serious violent incidents. Prisoners reported negatively across a wide range of survey questions relating to safety and victimisation, including in relation to physical assaults. Several serious incidents had been attributed to new psychoactive substances (NPS). Distant and dismissive staff behaviour undermined dynamic security.

**Recommendation: The prison should address the high levels of violence and negative prisoner perceptions relating to safety and victimisation revealed in our survey. The contribution of staff attitudes and behaviour to the lack of safety should be specifically addressed.**

- S40 Concern: The strategic oversight of equality and provision for protected groups had deteriorated considerably. There was no local strategy and there was no consultation for those with protected characteristics. In our survey, Muslim prisoners and those with disabilities were particularly negative about their treatment. The prison's own equality monitoring data were consistently out of range and concerns had not been properly investigated or addressed.

**Recommendation: The management and promotion of equality should be robust and informed by routine consultation with groups with protected characteristics. The negative perceptions of minority groups and the disparities in treatment suggested by monitoring data should be rigorously investigated and addressed.**

- S41 Concern: The OMU was not driving the work undertaken with prisoners, and offender supervisors had little contact with prisoners to motivate and support them through their sentence. Offender supervisors themselves lacked supervision and direction, and the quality of OASys assessments was variable.

**Recommendation: The offender management unit and the sentence planning process should drive all work undertaken with prisoners, and offender supervisors should have regular and meaningful contact with prisoners to motivate and support them throughout their sentence. This work should be subject to robust management oversight and quality assurance of offender supervisor work.**



# Section 1. Safety

## Courts, escorts and transfers

### Expected outcomes:

**Prisoners transferring to and from the prison are treated safely, decently and efficiently.**

**I.1** *Journey times to the prison were usually short. Most prisoners said that escort staff had treated them well and that they had felt safe during the journey. Prisoners received insufficient notice of their transfer.*

**I.2** An inspected escort vehicle was reasonably clean but contained graffiti dating back a year. Most new arrivals came from other prisons in the region, so journey times were usually less than two hours. All prisoners we spoke to said that they had been treated well by escort staff and felt safe during the journey. Refreshments had been offered to them.

**I.3** Prisoners disembarked from vehicles promptly and were not handcuffed. All the new receptions we spoke to had been transferred from another prison and had only been told about the move that morning. They had not had enough time to prepare properly or notify friends or family.

### Recommendation

**I.4** **Unless there are overriding security reasons, prisoners should be given 24 hours' notice of planned transfers.**

## Early days in custody

### Expected outcomes:

**Prisoners are treated with respect and feel safe on their arrival into prison and for the first few days in custody. Prisoners' individual needs are identified and addressed, and they feel supported on their first night. During a prisoner's induction he/she is made aware of the prison routines, how to access available services and how to cope with imprisonment.**

**I.5** *The reception area and holding rooms were clean. Newly arrived prisoners were welcomed and treated courteously by staff. All prisoners were strip-searched. Prisoners spent too long in reception before being transferred to the induction wing. First night cells were clean, well equipped and prepared. Peer support was available to all new prisoners before being placed in a cell. First night risk interviews took place but were too brief, not conducted in private and had insufficient focus on vulnerabilities. Prisoners felt safe on their first night. The induction process started on the day after arrival, was comprehensive and was tracked to ensure that all prisoners received it.*

**I.6** The reception area was clean. Holding rooms contained good information notices, prison newspapers and a television. Staff were courteous to prisoners throughout the reception process. We saw several prisoners who had been in reception for between three and four

hours before being transferred to the induction wing, and in our survey fewer prisoners than at comparator establishments said that they had spent less than two hours there.

- I.7** There were no showers in reception but prisoners could take a shower on arrival on the induction wing. Induction mentors (prisoners who offered advice on the induction process) were available in reception.
- I.8** All prisoners were strip-searched in reception, which was disproportionate, especially as resultant finds were minimal (see paragraph I.34). All new arrivals received a health screen before being taken to the induction wing. First night cells were clean and well prepared, and induction mentors helped new prisoners to settle in. In our survey, most prisoners said that they had felt safe on their first night.
- I.9** First night interviews took place systematically but were not always in private, were too brief and had insufficient focus on vulnerabilities. Many prisoners said that they had not had this interview, or were not aware that its purpose was to gauge any potential vulnerability. This was particularly concerning as in our survey, more respondents on the induction wing than on other wings claimed to be feeling depressed or suicidal (24% versus 15%). The number of prisoners arriving at the prison reporting mental health problems had also increased since the previous inspection. All induction unit staff were adequately briefed on newly arrived prisoners and conducted regular checks during the night.
- I.10** The induction course started on the day after arrival, took five days to complete and was tracked to ensure that all prisoners received it. The course was delivered well and the content was comprehensive. In our survey, more prisoners than at comparator prisons said that it had covered everything they needed to know (64% versus 59%). Staff monitored the quality of the induction course and conducted a survey at the end of it. The results of these surveys were positive.

## Recommendation

- I.11 Prisoners should move through reception quickly and have a private first night interview that focuses on vulnerabilities.**

## Bullying and violence reduction

### Expected outcomes:

**Everyone feels and is safe from bullying and victimisation (which includes verbal and racial abuse, theft, threats of violence and assault). Prisoners at risk/subject to victimisation are protected through active and fair systems known to staff, prisoners and visitors, and which inform all aspects of the regime.**

- I.12** *Many prisoners felt unsafe and victimised. The number of fights and assaults was high. Some violent incidents were serious, including one that had resulted in the closure of a wing. The strategic oversight of violence was generally good. Not all victims received adequate support and the monitoring of perpetrators was sometimes too infrequent.*

- I.13** Many prisoners reported feeling unsafe and victimised. In our survey, more prisoners than at comparator establishments and than at the time of the previous inspection said that they felt unsafe and more than a third said they had been victimised by either staff or prisoners. Around one in 10 prisoners said that they had been hit, kicked or assaulted by staff and

a similar number said they had been assaulted by other prisoners (see main recommendation S39).

- I.14** Despite a slight reduction from the previous year, the number of violent incidents was high. The number of assaults had increased since the previous inspection and was higher than at similar prisons, and the number of fights in the previous six months was higher than elsewhere. Some violent incidents had been serious and involved hostage taking, hospitalisation of staff and, in one instance, a member of staff being knocked unconscious. Shortly before the inspection, a major incident, involving 63 prisoners, had resulted in a wing being closed owing to fire damage. The increase in violence was considered to be due to gangs, debt and the availability of new psychoactive substances (NPS) (new drugs that are developed or chosen to mimic the effects of illegal drugs such as cannabis, heroin or amphetamines, and which may have unpredictable and life-threatening effects).
- I.15** The strategic oversight of bullying and violence reduction was reasonably good. The safer custody team – comprising a senior manager, manager, officer and two administrators – was responsible for reducing the number of bullying and violent incidents as well as preventing self-harm and suicide. The quarterly safer custody meetings were reasonably well attended. There was a violence reduction policy but the action plan was vague and underdeveloped. Shortly before the inspection, the prison had initiated weekly safety, order, control and tasking (SOCT) meetings to discuss prisoners who required additional attention or support. The meetings were multidisciplinary and a useful forum for sharing information. A safer custody survey was conducted during the inspection, the first since 2011. The results had yet to be collated.
- I.16** There was a good flow of information to the safer custody team. Violent incidents were appropriately logged and investigated thoroughly. Perpetrators were managed through a three-stage system, which ranged from discreet monitoring to segregation. On one day during the inspection, 34 prisoners were on the first stage, two on the second and none on the third. In theory, those subjected to bullying were supported through victim support plans. In practice, however, wing staff were not always aware of prisoners in their care who required support. Staff did not always monitor perpetrators of violence frequently enough.

## Recommendation

- I.17** **Victims of violence should be supported and perpetrators monitored as specified in their respective support and violence reduction plans.**

## Housekeeping point

- I.18** The violence reduction action plan should be specific, detailed and robust.

## Self-harm and suicide prevention

### Expected outcomes:

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

**I.19** *The number of self-harm incidents and of prisoners in crisis was lower than at comparator prisons. Prisoners generally had reasonable access to Listeners. There were some shortcomings in assessment, care in custody and teamwork (ACCT) documentation but prisoners in crisis felt supported. Counselling services were available. A constant watch cell was inappropriately located on the segregation unit.*

**I.20** In the six months before the inspection, there had been 48 self-harm incidents, and assessment, care in custody and teamwork (ACCT) case management processes for prisoners at risk of suicide or self-harm had been used 68 times. Both of these figures were lower than at comparator prisons and than at the time of the previous inspection. There had been no suicides for more than 10 years. On the first day of the inspection, four prisoners were being supported through ACCT processes. There was insufficient support for newly arrived prisoners (see paragraph I.9).

**I.21** There were only seven Listeners but the Samaritans planned to train more in September 2015. There was reasonable access to Listeners. The Listener suite was out of use at the time of the inspection because it was located on the wing where the serious disturbance had taken place (see paragraph I.14).

**I.22** Prisoners at risk of self-harm we spoke to felt supported. The safer custody manager was working with the mother of one man to support him through his crisis. Thirty-four prisoners were receiving counselling from volunteers trained by the British Association for Counselling and Psychotherapy. About 80 staff who had contact with prisoners were out of date with training on safer custody procedures.

**I.23** The quality of ACCT documentation was variable; next of kin details were sometimes incomplete, actions in care maps were not always followed up and cases were not reviewed post-closure. Some cases had sufficient mental health input but not all reviews were sufficiently multidisciplinary. We attended one review, and this was handled sensitively.

**I.24** There were three constant watch cells, one of which was on the segregation unit, which was an inappropriate location. In the previous six months, 15 prisoners on ACCTs had been held on the segregation unit.

### Recommendations

**I.25** **All staff should be trained in safer custody procedures and ACCT documents should be completed to a high standard.**

**I.26** **Prisoners in crisis should not be held in the segregation unit for reasons of self harm risk alone.**

## Safeguarding (protection of adults at risk)

### Expected outcomes:

**The prison promotes the welfare of prisoners, particularly adults at risk, and protects them from all kinds of harm and neglect.<sup>3</sup>**

**I.27** *At-risk prisoners were discussed at useful safety, order, control and tasking meetings. There was no prison-wide safeguarding policy. The prison had developed partnerships with external bodies to meet prisoners' social care needs.*

**I.28** The health care department had a safeguarding policy but there was no prison-wide policy. At-risk prisoners and those requiring additional support were discussed at the weekly SOCT meeting (see paragraph I.15). A partnership between the prison, Rutland County Council and Nottinghamshire Healthcare NHS Foundation Trust had been initiated in light of the Care Act 2014. An agreement between the three institutions was in draft form and appeared promising in meeting the social care needs of prisoners. At the time of the inspection, an occupational therapist from the council was involved in assessing the needs of two prisoners. A discharged prisoner was also receiving support from the council.

### Recommendation

**I.29** **The prison should develop guidance and procedures to help to prevent the harm or abuse of at-risk adults.**

## Security

### Expected outcomes:

**Security and good order are maintained through an attention to physical and procedural matters, including effective security intelligence as well as positive staff-prisoner relationships. Prisoners are safe from exposure to substance misuse while in prison.**

**I.30** *Procedural security was reasonably well managed but a few practices were disproportionate. Security meetings were well attended and the weekly safety, order, control and tasking meeting was effective. There was good management of intelligence. Dynamic security was undermined by distant and dismissive behaviour by some staff. There was insufficient staff supervision of prisoners in some areas. There had been a number of serious incidents over the previous few months.*

**I.31** There were no obvious weaknesses in the prison's physical security. Sufficient checks and searches of perimeter fences took place every day, along with routine searches of communal areas and activities buildings.

<sup>3</sup> We define an adult at risk as a vulnerable person aged 18 years or over, 'who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'. 'No secrets' definition (Department of Health 2000).

- I.32** Intelligence was managed effectively and security committee meetings were well attended. Security objectives were agreed and reviewed through the appropriate consideration of intelligence. The SOCT meeting was also an effective means of sharing security information and identifying concerns that needed to be addressed (see paragraph 1.15). Joint work with the local policing teams was effective. Police intelligence officers had been appointed to collate intelligence, particularly in terms of gang- and drug-related issues. They provided useful information to help inform and develop strategies.
- I.33** The prison regime was predictable and most prisoners had access to work or a meaningful activity. The supervision of prisoners on residential units was often poor, however, and we saw many examples where residential officers were not adequately engaging with prisoners on their wings (see paragraph 2.13). This undermined dynamic security (see main recommendation S39).
- I.34** Procedural security was generally well managed but a few practices were disproportionate, such as strip-searching all prisoners in reception and on admission to the segregation unit (see paragraph 1.8). Closed visits were not used excessively, but too many had been imposed for reasons not directly related to visits. Reviews took place monthly, but many were cursory and prisoners usually stayed on restrictions for at least three months without further supporting information. Risk management systems were generally effective and during the inspection we saw no evidence to suggest that the prison was risk averse in terms of allocating activity spaces to prisoners.
- I.35** The positive random mandatory drug testing (MDT) rate for the six months to the end of June 2015 was very low, at 1.99%. However, this was not an accurate indicator of drug use as there was strong evidence of a problem with NPS, which were undetectable under the existing MDT panel (see paragraph 1.14). In our survey, far more respondents than at comparator prisons and than at the time of the previous inspection (51% versus 36% and 24%, respectively) said that it was easy to get drugs in the prison.
- I.36** Suspicion testing positive rates were also very low, at 2.4%, from 41 tests in the same six-month period. This further suggested that prisoners were presenting with symptoms of using undetectable drugs. There had been several serious incidents over the previous few months, many of which had been attributed to NPS. The security department was sighted on the threats and issues of NPS supply, and had introduced several specific initiatives, a committee and an action plan to address these (see paragraph 1.15).

## Recommendations

- I.37** **Staff should adequately supervise prisoners on residential units.**
- I.38** **Prisoners should not be strip-searched unless an individual risk assessment justifies this step being taken.**

## Housekeeping point

- I.39** Closed visits should only be authorised for issues directly related to visits.

## Incentives and earned privileges<sup>4</sup>

### Expected outcomes:

**Prisoners understand the purpose of the incentives and earned privileges (IEP) scheme and how to progress through it. The IEP scheme provides prisoners with incentives and rewards for effort and behaviour. The scheme is applied fairly, transparently and consistently.**

**I.40** *Not all motivated prisoners had the opportunity to undertake work that could lead to enhanced status. Prisoners routinely lost previously granted enhanced status on arrival. The regime for the small number of prisoners on basic included more time out of cell than we usually see.*

**I.41** The incentives and earned privileges scheme offered appropriate differentials in access to private cash, visits and some extra time out of cell. At the time of the inspection, about 85% of prisoners were on the standard level, 13% were on the enhanced regime and 2% were on basic. Many prisoners told us that they were unsure how to advance, particularly to the enhanced level of the scheme, and we were not assured that opportunities for promotion were adequate. The regime for prisoners on basic was better than we usually see, and they were able to attend activities and have predictable periods of association.

**I.42** To be enhanced, prisoners needed to demonstrate motivation towards rehabilitation and that they had helped other prisoners or staff – for example, by acting as Listeners or mentoring other prisoners. These positions were limited in number and during the inspection we saw that not all motivated prisoners had the opportunity to undertake this work. Prisoners routinely lost their previously granted enhanced status on arrival, without a meaningful assessment of their behaviour or achievements.

**I.43** In our survey, fewer respondents than at comparator prisons and than at the time of the previous inspection said that they had been treated fairly in their experience of the scheme (34% versus 51% and 52%, respectively) or that it had encouraged them to change their behaviour (35% versus 46% and 51%, respectively).

### Recommendations

**I.44 All motivated prisoners should have opportunities to obtain enhanced status.**

**I.45 Prisoners should be allowed to retain their enhanced status when they arrive at the establishment.**

<sup>4</sup> In the previous report, incentives and earned privileges were covered under the healthy prison area of respect. In our updated Expectations (Version 4, 2012) they now appear under the healthy prison area of safety.

## Discipline

### Expected outcomes:

**Disciplinary procedures are applied fairly and for good reason. Prisoners understand why they are being disciplined and can appeal against any sanctions imposed on them.**

**I.46** *The number of adjudications was high and some charges were petty. Hearings were generally conducted fairly. The level of use of force was comparatively high. Paperwork was completed promptly but we saw examples where we were not assured that de-escalation was used to its full effect. Governance arrangements were inadequate. Use of segregation was relatively high but lengths of stay were not excessive. Living conditions were reasonable and day-to-day relationships between staff and prisoners were generally good. Case management had improved but required further development.*

### Disciplinary procedures

- I.47** The number of formal adjudications was relatively high, at 798 in the previous six months. The hearings we attended and the written records we examined indicated that proceedings were conducted fairly and that prisoners were given the opportunity to explain fully their version of events. Adjudicators ensured that the prisoner fully understood each stage of the process before moving on and all were offered the opportunity to seek legal advice.
- I.48** Punishments were fair and consistent but records showed some petty charges that could have been dealt with less formally.

### Recommendation

- I.49** **Minor infringements of prison rules should be dealt with without resorting to the formal adjudications process.**

### The use of force

- I.50** The use of force was comparatively high, at about 87 in the previous six months, and monitoring was weak. Information about the nature of incidents was collated but there was insufficient analysis to identify patterns and trends. Although we were told that duty managers reviewed incidents the following day, there was little evidence that important paperwork, including accounts from officers, was scrutinised sufficiently. There was no dedicated use of force committee to oversee processes and provide governance.
- I.51** The quality of the paperwork we examined generally indicated that the use of force had been justified but some did not give assurance that de-escalation was used to its full effect. The video recordings of incidents that we watched usually reflected well-conducted interventions but there was insufficient managerial scrutiny and we were not assured that the force used was always proportionate.

### Recommendation

- I.52** **Managerial oversight of, and the monitoring and analysis of information about, use of force should be robust.**

## Segregation

- I.53** Living conditions on the segregation unit were generally good and had improved. Communal corridors and offices were clean and brightly decorated. Cells were generally clean and free from graffiti but some showers were dirty and the three cage-like exercise yards just outside the unit were stark.
- I.54** The use of segregation was relatively high, at about 199 separate cases in the previous six months, but similar to the level at the time of the previous inspection. However, the length of stay on the unit was reasonably short, at about seven days. Governance was good and had improved. The segregation monitoring and review group, led by a senior manager, met every month to monitor the number of prisoners held in segregation and the reasons behind this.
- I.55** Day-to-day relationships between staff and prisoners on the segregation unit were good. Officers engaged positively with the prisoners in their care and had an appropriate interest in their welfare. Their responses to demanding behaviour were not over-reactive or heavy handed and we saw them dealing patiently with difficult situations in a calm and mature way.
- I.56** The daily regime for segregated prisoners was limited but better than we often find, and had improved since the previous inspection. It included daily showers, exercise, access to telephones and in-cell education work. Education staff sometimes visited the unit and provided prisoners with educational material and some limited individual coaching. Following risk assessments, prisoners were sometimes permitted to attend sessions in the gym.
- I.57** At the time of the inspection, there were 18 prisoners in segregation. The average stay of the current population was about six days but many had been segregated for several weeks. Some reviews of segregation, although timely, were poorly attended and some care planning was poor. We were told by segregation staff that about 80% of the men on the unit felt unsafe on their residential wings (also see sections on bullying and violence reduction and security). Reintegration planning was being developed and had improved. Individual prisoner management plans had been drawn up for the more complex cases, and behaviour improvement targets had been set and monitored. Some segregated prisoners had spent incrementally increasing periods on the normal wings for association and some had been gradually reintroduced to education classes and work.

## Recommendation

- I.58** **The cage-like exercise yards should be replaced to allow segregated prisoners to exercise in decent conditions.**

## Housekeeping point

- I.59** Showers in the segregation unit should be cleaned.

## Substance misuse

### Expected outcomes:

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

- I.60** *The drug and alcohol team delivered a comprehensive and well-integrated service. The recovery unit on I wing was a supportive environment. The weekly safety, order, control and tasking meeting was effectively bringing departments together to work on individual cases and incidents. The recently formed new psychoactive substances committee was bringing a renewed strategic approach to tackling drugs.*
- I.61** Integrated clinical and psychosocial substance use services were provided by the Nottinghamshire Healthcare NHS Foundation Trust, operating under the name 'SMART'.
- I.62** Following an incident of concerted indiscipline on the drug treatment wing (K wing), all prisoners who had been receiving opiate substitution treatment had been transferred to other establishments. Nevertheless, the clinical team was well integrated with the psychosocial team and primary health care and support for detoxified prisoners were good.
- I.63** The SMART psychosocial team dealt with drug and alcohol problems alike. In our survey, more respondents than at comparator prisons (87% versus 77%) said that the support they had received for drug and alcohol problems had been helpful. A wide range of recovery-based group work programmes was available. Additional short interventions addressed harm reduction issues for specific substances, including NPS, which were increasingly becoming a problem in the prison (see also paragraphs I.14 and I.35). Prisoners could also access one-to-one support from SMART workers and weekly Alcoholic Anonymous fellowship meetings. There was one SMART peer mentor, providing one-to-one support and co-facilitating some group sessions. There were plans to increase peer mentor numbers in the near future.
- I.64** The recovery wing (I wing) held 78 prisoners. Approximately 10% of those housed there were not involved in any recovery interventions. This was managed reasonably well, with wing staff taking care to monitor and minimise the potential for negative behaviour.
- I.65** The recovery wing and other substance misuse work was enhanced by the input of four dedicated SMART team officers, who organised weekend recovery-based activities, conducted compact-based drug testing and provided drop-in and day-to-day support sessions.
- I.66** The SOCT meeting was effective at bringing departments together to work on individual cases and incidents. However, since the absorption of the drug strategy committee into the quarterly reducing reoffending meeting, a whole-prison approach to drugs had only been achieved with the recent introduction of an NPS committee. Only one such meeting had been held but a dynamic action plan was emerging and there was a renewed strategic approach involving all relevant departments. In the three months to June 2015, 32 health-related incidents had been reported as being connected to the suspected use of NPS; there had been none in the preceding three months (see also section on security).

## Section 2. Respect

### Residential units

#### Expected outcomes:

**Prisoners live in a safe, clean and decent environment within which they are encouraged to take personal responsibility for themselves and their possessions. Prisoners are aware of the rules and routines of the prison which encourage responsible behaviour.**

- 2.1** *The prison was generally clean and well maintained. Access for prisoners to some outside areas was too limited. Most cells were in a good state of repair but too many prisoners shared cells designed for one. Not all in-cell toilets were adequately screened and some showers were in a poor condition. The new application system was efficient.*
- 2.2** Most communal areas were clean and well decorated. Facilities in the residential units were good, with a pool table on every wing and the addition of table tennis and darts equipment on the induction unit. Exercise yards were stark, with no equipment. The external grounds were pleasant, with grassed areas close to each of the residential units, but only the 21 prison gardeners were allowed access.
- 2.3** Most cells were clean and in good condition but some had graffiti and the offensive display policy was not applied consistently on all wings. Around 8% of prisoners were sharing cells designed for one. Prisoners had keys to their cells but those sharing did not always have a key each, and there were delays in obtaining replacements when keys were lost. The locks on some in-cell storage cupboards were broken.
- 2.4** The toilets on F and L wings were inadequately screened. In our survey, most prisoners said that they were able to shower every day, but the communal showers on F, L and M wings were in poor condition, with mould on the ceilings and inadequate drainage and ventilation. Washing machines and dryers were available on each wing for prisoners to wash their own clothes. These facilities were managed well by employed prisoner laundry orderlies. Access to telephones was satisfactory. Most prisoners said that it was quiet enough for them to relax or sleep at night in their cells, and during our night visit we observed quiet wings.
- 2.5** Fewer prisoners than at comparator establishments and than at the time of the previous inspection said that they were normally offered enough clean, suitable clothing each week, and prisoners and staff told us that stocks were sometimes low.
- 2.6** In our survey, of those prisoners who had submitted an application, fewer than at the time of the previous inspection said that they were dealt with fairly (60% versus 74%) or quickly (57% versus 73%). The newly implemented application system, introduced in March 2015, was efficient and quality assurance processes were in place. Responses to applications were respectful and trend analysis was carried out to identify patterns. It was too early to determine if the new system had improved outcomes for prisoners.

### Recommendations

- 2.7** **Prisoners should have access to the grounds on the basis of an appropriate risk assessment.**

- 2.8 Two prisoners should not share cells designed for one.** (Repeated recommendation 2.13)
- 2.9 In-cell toilets should be adequately screened and showers should be maintained in a decent state.**

### Housekeeping points

- 2.10** Prisoners sharing a cell should each have a lockable cabinet and a key to their cells. When required, replacement keys should be provided quickly.
- 2.11** The offensive display policy should be applied consistently on all wings.

### Staff-prisoner relationships

#### Expected outcomes:

**Prisoners are treated with respect by staff throughout the duration of their time in custody, and are encouraged to take responsibility for their own actions and decisions.**

**2.12** *Fewer prisoners than at comparator establishments and than at the time of the previous inspection said that staff treated them respectfully and that they had a member of staff they could turn to for help. Staff-prisoner relationships were variable. Consultation with prisoner representatives was reasonable.*

- 2.13** Relationships between prisoners and staff were variable and had deteriorated. In our survey, fewer prisoners than at comparator establishments and than at the time of the previous inspection said that staff treated them respectfully and that they had a member of staff they could turn to if they had a problem (64% compared with 73% at comparator prisons and 80% at the last inspection). Although we saw some positive staff engagement with prisoners, particularly in workshops, we also saw distant and dismissive behaviour from some uniformed staff. Many staff referred to and addressed prisoners directly by their surnames, and some spent too much time in the wing offices, where prisoners could not access them (see also section on bullying and violence reduction and main recommendation S39).
- 2.14** In our survey, fewer prisoners than at the time of the previous inspection (71% against 81%) said that they had a personal officer. Many prisoners told us that they did not speak to their personal officers regularly. However, named officers and other wing staff maintained chronological and positive entries in prisoners' personal files and updates were made routinely.
- 2.15** Regular consultation with prisoner representatives took place monthly and there was good attendance by staff and prisoners. An agenda was set, minutes were taken and action points were identified, but too many were repeated from month to month without being addressed.

### Recommendation

- 2.16 All prisoners should see their personal officer regularly.**

## Housekeeping points

- 2.17 Staff should not refer to or address prisoners by their surname.
- 2.18 Actions arising from consultation meetings should be dealt with promptly.

## Equality and diversity

### Expected outcomes:

**The prison demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no prisoner is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. The distinct needs of each protected characteristic<sup>5</sup> are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.**

**2.19** *The strategic oversight of equality and provision for protected groups had deteriorated. The number of discrimination incident report forms submitted had fallen dramatically and these forms were not readily available on all wings. There was a group of equality representatives but their role was ill defined. Consultation arrangements for all groups had lapsed. Equality monitoring data had been out of range for most areas for several months without adequate investigation. Muslim prisoners and those with disabilities reported particularly negatively across a range of indicators. Prisoners with disabilities waited too long for reasonable adaptations to be made.*

## Strategic management

- 2.20 The prison's strategic work on equality was not informed by consultation with prisoners at the establishment or a local needs assessment, and the policy did not reflect current practice at the prison. The prison no longer ran consultation groups for any protected characteristics, and the promotion of equality across the prison was weak (see section on protected characteristics and main recommendation S40). Each protected characteristic had been allocated a staff lead who was a member of the senior management team, as well as a prisoner representative, but in many cases the two had not met, and these roles had yet to affect provision for protected groups.
- 2.21 The diversity and equality action team (DEAT) met quarterly and was chaired by the governor. Meetings were well attended and prisoner representatives were invited, but the room used to hold them was inaccessible for representatives with limited mobility. These meetings considered quarterly equality monitoring data. Most of these data had been out of range for the previous nine months, showing consistent and clear over-representation of many groups of prisoners in adjudications, segregation, complaint submissions and those on the basic regime. The prison had not adequately investigated these disparities to identify and address the underlying reasons for inequitable treatment (see main recommendation S40).
- 2.22 There was no longer a dedicated full-time equality officer, and a part-time business administrator was the only dedicated resource for equality and diversity. There was a group of six prisoner representatives; although one representative attended the DEAT meetings,

<sup>5</sup> The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

they no longer met as a group or with staff. They had not received any training and those that we spoke to were unclear about their role.

- 2.23** The discrimination incident report form (DIRF) system was poor. Only 13 DIRFs had been submitted during the previous six months, compared with 107 in the seven months before the previous inspection. The large decrease was likely to have been caused by a lack of awareness of the system rather than a fall in discrimination; many staff and prisoners we spoke to were unaware of the system and DIRFs were no longer freely available on most wings. Responses to DIRFs were mostly of a reasonable standard but there was no external quality assurance.

## Recommendations

- 2.24** Prisoner representatives should have a defined role, appropriate training and meet regularly with each other and with staff.
- 2.25** All staff and prisoners should be aware of the discrimination incident report form (DIRF) system, and DIRFs should be available on all wings. External monitoring of DIRF responses should be established.

## Housekeeping point

- 2.26** Diversity and equality action team meetings should take place in an accessible location.

## Protected characteristics

- 2.27** At the time of the inspection, 28% of the prison population were from a black and minority ethnic background and 13.8% were Muslim. In our survey, Muslim prisoners reported more negatively than their non-Muslim counterparts across a range of safety and respect indicators. This was supported by the prison's data, which showed that Muslim prisoners were more likely than other groups to complain, be subject to adjudications and experience segregation; they were also under-represented on the enhanced regime (see main recommendation S40).
- 2.28** In our survey, 4% of respondents identified themselves as Gypsy, Romany or Traveller, which equated to 28 prisoners, although the prison had identified only five. There had been no consultation meetings for this group and the prison was not focused on their specific needs. Those we spoke to felt unsupported (see main recommendation S40).
- 2.29** There were only 16 foreign national prisoners at the time of the inspection and none were being held beyond the end of their sentences. Provision for this group was underdeveloped; there was no foreign national officer, and these prisoners did not have access to independent immigration advice or Home Office surgeries. At the time of the inspection, there was no need for professional telephone interpreting or translation services as all prisoners reported adequate English language skills.
- 2.30** In our survey, prisoners with disabilities were more negative than others across a range of questions. For example, they were more likely to say that they felt unsafe or had been victimised by other prisoners and by staff. The health services team identified prisoners with physical and mental disabilities on reception. There was no disability liaison officer and prisoners with disabilities experienced long delays for reasonable adaptations to be made. Prison staff encouraged prisoners with disabilities to work and in some cases created roles

for them. Those who were unable to work because of a disability were unlocked during the core day and received long-term sick payments. There were two adapted cells at the time of the inspection. Evacuation plans were not always accurate and some night staff were unaware of prisoners needing assistance.

- 2.31** In our survey, a small number of prisoners identified themselves as gay or bisexual, and there was no provision for this group. Gay and bisexual prisoners we spoke to felt unsupported by the prison (see main recommendation S40).
- 2.32** At the time of the inspection, 11% of prisoners were over 50 years of age. The prison had plans for an over-50s landing but this had not yet been established. Most prisoners who were over 50 worked. Those who were retired were unlocked during the core day and received pension payments.

## Recommendations

- 2.33** Reasonable adaptations to assist prisoners with disabilities should be implemented promptly.
- 2.34** Foreign national prisoners should have ready access to independent immigration advice and be kept informed of their immigration status by the Home Office.
- 2.35** Personal emergency evacuation plans should be accurate and all staff should be aware of which prisoners need assistance in the event of an evacuation.

## Faith and religious activity

### Expected outcomes:

**All prisoners are able to practise their religion fully and in safety. The chaplaincy plays a full part in prison life and contributes to prisoners' overall care, support and resettlement.**

**2.36** *Despite some negative perceptions, we found faith provision to be reasonably good, including a weekly programme of corporate worship, classes and groups. The chaplaincy provided valuable support to prisoners.*

- 2.37** Provision for religious activities was reasonably good. There was a large and active chaplaincy, which covered all faiths. The chaplaincy also maintained an annual programme of major festivals covering all faiths. Muslim prisoners told us that the arrangements for Ramadan, which was taking place at the time of the inspection, were good.
- 2.38** The chaplaincy saw all new arrivals, and prisoners could apply to attend services at this initial meeting. Worship facilities were good; the main chapel, Muslim prayer room and multi-faith room were bright and well equipped, with facilities and resources for all faiths.
- 2.39** The chaplaincy attended a range of meetings and provided support for those who had experienced bereavement. Chaplains did not attend assessment, care in custody and teamwork (ACCT) case management reviews, however, and there was no volunteer prison visitors group to provide support for those who did not receive visits.

## Complaints

### Expected outcomes:

**Effective complaints procedures are in place for prisoners, which are easy to access, easy to use and provide timely responses. Prisoners feel safe from repercussions when using these procedures and are aware of an appeal procedure.**

**2.40** *The number of complaints submitted was higher than at similar prisons. More than a third of complaints were upheld. The quality of replies was variable. There was adequate analysis of trends in complaints but quality assurance arrangements were underdeveloped.*

**2.41** Complaint boxes and relevant forms were freely available on the wings. In the previous six months, 1,118 complaints had been submitted. Of these, 59 had been referred to other establishments for investigation. About a third were upheld.

**2.42** The quality of replies was variable. Some were polite and constructive but too many were perfunctory, unclear, unhelpful and failed to deal adequately with the issues raised. Quality assurance by managers had not effectively addressed this problem and there was no external scrutiny of complaint responses. Many complaints could have been dealt with as applications or were complaints about unresolved applications. A new applications system had recently been introduced (see paragraph 2.6), and early indications suggested that this might have improved the situation.

**2.43** Trend analysis for complaints was adequate. A monthly report monitored complaints by location, ethnicity and reason for complaint. In the previous six months, the issues attracting the most complaints (other than miscellaneous issues) were property, cash, categorisation and regimes.

### Recommendation

**2.44 Responses to prisoners' complaints should be clear, helpful and deal with the issue raised, and they should be subject to effective quality assurance.**

## Legal rights

### Expected outcomes:

**Prisoners are fully aware of, and understand their sentence or remand, both on arrival and release. Prisoners are supported by the prison staff to freely exercise their legal rights.**

**2.45** *There was good access to legal visits but advice within the prison was limited.*

**2.46** In our survey, fewer prisoners than at the time of the previous inspection said that it was easy to communicate with their solicitors. Legal visits took place in the visits hall and, although staff made efforts to space visits out throughout the hall, prisoners we spoke to said that these visits were insufficiently private.

- 2.47** There was no legal services officer or a service to signpost prisoners to advice. In our survey, fewer prisoners than at comparator prisons and than at the time of the previous inspection said that it was easy to get bail information, and more said that legal letters were opened by staff without them being present. Those without legal representation could access a wide range of books in the library, where there were also computers available to enable them to work on their case.

## Recommendations

- 2.48** Legal visits should take place in private.
- 2.49** The negative findings in our survey in relation to legal rights should be investigated and acted on.

## Health services

### Expected outcomes:

**Prisoners are cared for by a health service that assesses and meets their health needs while in prison and which promotes continuity of health and social care on release. The standard of health service provided is equivalent to that which prisoners could expect to receive elsewhere in the community.**

**2.50** *Health services were good. Governance and joint working between providers were very good. Waiting times for GP, nurse and dental services were acceptable but prisoners waited too long for most other services. Identification of and support for prisoners with complex health needs was impressive. Prisoners had adequate access to emergency first aid but ambulances were not called immediately when an emergency code was called, which was dangerous. Health promotion activity was too limited, although the prisoner mentor-led smoking cessation service was a good initiative. Dental care was appropriate. Pharmacy services were reasonable. Mental health services were very good.*

**2.51** *The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)<sup>6</sup> and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies.*

## Governance arrangements

- 2.52** The CQC found there were no breaches of the relevant regulations.
- 2.53** Nottinghamshire Healthcare NHS Foundation Trust provided primary physical health services and Northamptonshire Healthcare NHS Foundation Trust provided mental health services. The integrated health contract was going out for procurement in late 2015. Joint working between the providers, prison and commissioners was effective. A current health needs assessment informed service delivery. Regular clinical governance meetings fed into the well-attended partnership board. Learning from incidents, complaints, service user feedback and audits was shared within the team and drove service improvement.

<sup>6</sup> CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

- 2.54** Experienced nurse managers and team leaders provided effective clinical leadership, supported by daily whole-team meetings. Chronic recruitment problems across the pharmacy, nursing and administration teams had been mitigated by the use of regular agency staff. Nurses were on site from 7.30am until 6.30pm from Monday to Friday, and 8.30am until 6.30pm at weekends. One lead GP, supported by some locum GPs, provided 12 clinics a week.
- 2.55** Health services staff were easily identifiable. The health interactions we observed were good and consultations were held in private. Health services staff, including agency staff, had good access to supervision, training and clinical guidance. Most clinical records we examined were of good quality.
- 2.56** The health care environment was satisfactory but cleaning did not meet NHS standards and a small number of fixtures and fittings did not meet infection control guidelines. A King's Fund refurbishment project had improved the waiting area considerably.
- 2.57** Appropriate emergency equipment was held in the health care department but the location, contents and checking processes were being revised to ensure that properly-checked equipment was available across the establishment. All custodial managers and night staff were trained in first aid, and automated defibrillators were easily accessible throughout the prison. Prison staff we spoke to understood the 'code' system to summon emergency assistance but ambulances were not requested immediately. Records showed a nine-minute delay before an ambulance had been called after a 'code red', which created a serious risk of poorer outcomes.
- 2.58** An older prisoner lead nurse provided over-50s screening clinics and annual reviews. There was good access to relevant community screening programmes, except for bowel screening, which was being addressed. Three prisoners had been referred to the local authority for assessments under the Social Care Act since April 2015 and the prison was waiting for the outcome of the completed assessment. There was good access to mobility and health aids.
- 2.59** Prisoners of concern were discussed at weekly meetings attended by substance misuse, primary health and mental health service senior staff. The identification of prisoners with complex needs was robust and an identified care coordinator ensured continuity of care. All health services staff knew who was being managed in this way. Case management meetings with other departments were held promptly, to ensure a whole-prison approach.
- 2.60** Prisoners did not know what health services were available. There was a pack containing comprehensive information about the health services available but this was not routinely offered to new arrivals and was not accessible anywhere else in the prison.
- 2.61** Prisoners could complain about health services through a confidential system, although information about the process and complaint forms were not easily available in most areas of the prison. Most complaints were about medication and access to services, and the responses we sampled were generally good.
- 2.62** Prisoners could not access health literature or displays in the health department, which meant that opportunities to improve their awareness and self-care were lost. There was no systematic health promotion activity across the prison. Access to immunisations and blood-borne virus testing was very good. Two well-trained prisoner peer mentors provided smoking cessation support and the GP prescribed nicotine replacement patches. Waiting times for smoking cessation support were short. Barrier protection was available from health services staff but was not advertised.

## Recommendations

- 2.63** All clinical areas should meet relevant cleaning and infection control standards.
- 2.64** An ambulance should be called immediately when an emergency code is called.
- 2.65** Prisoners should have access to regular systematic health promotion throughout the prison and on release, including easy, confidential access to barrier protection.

## Housekeeping points

- 2.66** Prisoners should have access to written information about all health services, in an appropriate range of languages and formats.
- 2.67** Prisoners should be able to complain about health services through a well-publicised system and have easy access to complaint forms.

## Good practice

- 2.68** *The identification of prisoners with complex needs was robust and supported positive health outcomes for these prisoners.*

## Delivery of care (physical health)

- 2.69** New arrivals received a primary health screen in reception, followed by a secondary health screen the next day. Appropriate community liaison and follow-up referrals were completed.
- 2.70** Prisoner applications for services were collected daily and processed quickly. Replies were sent to prisoners if they requested services that had a waiting list. The non-attendance rate for all services exceeded the 10% target but was monitored and managed effectively.
- 2.71** In our survey, fewer prisoners than at comparator prisons said that access to the doctor (24% versus 31%) and the nurse (48% versus 53%) was good. Feedback from prisoners we spoke to was mixed. Waiting times for nurse clinics were short but medication administration on the wings was mainly completed by pharmacy technicians, which may have contributed to prisoners' poorer perceptions of nurse access. New arrivals and prisoners with new health problems were seen quickly by the GP and those requiring review of ongoing issues were seen within community-equivalent waiting times. Prisoners waited too long for optician, podiatry, physiotherapy and sexual health services.
- 2.72** Out-of-hours GP support and access to urgent GP and nurse appointments was satisfactory. In our survey, just under half of respondents said that the quality of health services was good or very good. Nurses with specialist skills provided good support for prisoners with lifelong conditions.
- 2.73** External hospital appointments were managed well. Prisoners were referred appropriately and waiting times were equivalent to those in the community. Appointments were rarely cancelled owing to insufficient escort staff or on security grounds.

## Recommendation

- 2.74** **Waiting times for primary care services, including the optician, podiatry and physiotherapy, should not exceed clinically acceptable waiting times in the community.**

## Pharmacy

- 2.75** An external pharmacy provided all medication promptly, with appropriate patient information. Three full-time pharmacy technicians were based on site and recruitment for two vacant posts was under way. A pharmacist visited for four hours a week to complete governance checks, including audits of prescriptions and controlled drugs. Appropriate in-date policies were used. Refrigerator temperatures were managed correctly and medicines were stored appropriately. Medicines used from the out-of-hours cupboards were well audited. The pharmacy supplier and technician participated in the clinical governance and medicines management committees. Prisoners did not have access to a pharmacist for advice.
- 2.76** The in-possession policy had been reviewed since the previous inspection and was good but it was not followed. For example, it stated that 28 days in-possession should be the default position but most prisoners received seven days in-possession. Few prisoners had in-possession risk assessments on SystmOne (the electronic clinical record).
- 2.77** Medication was administered using computer-based prescriptions three times daily from the pharmacy for F, H and I wings, and from wing-based rooms on L and M wings. Weekend opening times had extended since the previous inspection. The wing-based rooms were poorly laid out; there was insufficient bench space, drug cupboards were in an adjoining room and the computer was located across the room. This slowed medication administration, and the hatch design hampered communication with prisoners. Prisoners who missed their medication were identified and followed up appropriately. There was consistent, good officer supervision of medication administration, which was better than we often see.
- 2.78** The list of medicines that pharmacy technicians and nurses could administer without a prescription was too limited and increased the demand for GP input for minor matters. Prisoners could buy a limited range of over-the-counter medicines from the pharmacy.

## Recommendations

- 2.79** **Prisoners should have access to a pharmacist for advice and medicine use reviews.**
- 2.80** **The in-possession policy should be followed and all prisoners should have recorded in-possession risk assessments that are regularly reviewed.**
- 2.81** **The wing-based dispensary rooms on the wings should support easy communication with prisoners, and safe and timely drug administration.**
- 2.82** **A full range of patient group directions should be in place to enable the supply of a greater range of more potent medications by nursing staff so that unnecessary consultations with the doctor can be avoided.** (Repeated recommendation 2.101)

## Dentistry

- 2.83** Four dentist and two dental nurse sessions weekly provided a full range of timely NHS-equivalent services. In our survey, more prisoners than at comparator establishments and than at the time of the previous inspection said that access to the dentist (18% versus 13% and 12%, respectively) and the quality of the service they provided (48% versus 43% and 35%, respectively) were good. Waiting times for assessment and treatment were short, at one to four weeks. Those in pain were prioritised for remedial treatment. Emergency provision was appropriate. The clinical records we examined were of good quality and oral health promotion was effective.
- 2.84** The dental suite was satisfactory but it was excessively cluttered and paper records were not consistently stored in locked cabinets. Equipment was maintained appropriately. Dental waste was managed correctly.

## Housekeeping point

- 2.85** There should be adequate storage for dental records and equipment, to ensure that surfaces are cleared of non-essential items.

## Delivery of care (mental health)

- 2.86** In our survey, 29% of prisoners said that they had emotional well-being or mental health problems, and more than at comparator establishments and than at the time of the previous inspection said that they were being helped (70% versus 51% for both).
- 2.87** Working relationships between the mental health team and other departments were good. The team provided excellent support to prisoners and staff in the segregation unit. No discipline staff had attended mental health awareness training since December 2013, which reduced their ability to identify and support prisoners with such needs effectively.
- 2.88** The integrated mental health team had a rich skill mix, including occupational therapists, learning disability nurses and mental health nurses. There was regular psychiatrist input and a specialist learning disability consultant attended when required. The clinical psychology post was vacant but recruitment was under way and cognitive behavioural therapy was available. Two group programmes (stress and emotional regulation) ran regularly. Guided self-help was available. Counselling was offered through the safer custody team and was well used; during the inspection, 34 prisoners were in counselling, 15 were waiting to start following assessment and 16 were waiting for an assessment.
- 2.89** The team received about 80 referrals monthly through an open referral system and these were reviewed daily to ensure that assessments were prioritised appropriately, based on clinical need. Allocation of new patients occurred daily, ensuring prompt access to treatment. Waiting times for assessment were short. During the inspection, the team was supporting around 60 prisoners with mild-to-moderate mental health needs and 12 prisoners with severe mental health problems. The clinical records we examined demonstrated effective patient involvement and were of good quality.
- 2.90** There had been no transfers under the Mental Health Act in the previous 12 months, but two prisoners who had returned from prolonged stays in hospital were being supported well.

## Recommendation

- 2.91** Discipline staff should have regular mental health awareness training, to enable them to identify and support prisoners with mental health problems.

## Catering

### Expected outcomes:

**Prisoners are offered varied meals to meet their individual requirements and food is prepared and served according to religious, cultural and prevailing food safety and hygiene regulations.**

**2.92** *The food provided was generally of good quality and portion sizes were adequate. Serveries were appropriately supervised, although occasionally were left uncleaned overnight. Only a few prisoners could dine in association, and there were no self-catering facilities. Consultation with prisoners about the food was adequate.*

- 2.93** In our survey, more prisoners than at comparator establishments and than at the time of the previous inspection said that the food provided was good or very good (38% versus 27% and 30%, respectively). The food we sampled was of reasonable quality and portion sizes were generally adequate. There were no self-catering facilities. Breakfast packs were distributed on the evening before they were to be eaten, and were of poor quality.
- 2.94** There was a four-week menu cycle, catering for all diets. Muslim prisoners told us that Ramadan catering arrangements were very good. The service of food was well supervised. Prisoners were not locked up at mealtimes. Some wings had opportunities for prisoners to dine together in association but there was insufficient furniture to allow this, so most prisoners ate in their cells. There were no cooking facilities on the wings.
- 2.95** The kitchen was large and clean. Although all serveries were cleaned daily and were clean at the time of food service, some were left uncleaned overnight and waste food was left out.
- 2.96** Food comment books were issued to all serveries but were often difficult to find, so they contained few entries. There was adequate consultation with prisoners about the food provided, and this had led to changes in the menu. There was also a six-monthly food survey but few responses were received.

## Recommendations

- 2.97** Breakfast packs should be more substantial and served on the day they are to be eaten.
- 2.98** All prisoners should have the opportunity to dine in association. (Repeated recommendation 2.121)

## Housekeeping points

- 2.99** Serveries should not be left uncleaned overnight.

- 2.100** Food comment books should be placed more prominently at serveries and steps should be taken to improve the response rate of catering surveys.

## Purchases

### Expected outcomes:

**Prisoners can purchase a suitable range of goods at reasonable prices to meet their diverse needs, and can do so safely.**

**2.101** *Some prisoners had to wait too long to receive their first full shop order after arrival. The range and prices of items on the prison shop list were adequate. Some consultation with prisoners about the shop took place but there was insufficient dialogue with black and minority prisoners to understand why their perception of shop goods was poor.*

**2.102** On arrival, prisoners were offered either a smokers pack or a reception pack (a grocery pack which usually contains basic food and drink items such as tea, milk, sugar and sweets). Shop orders were submitted weekly, which meant that some newly arrived prisoners could wait up to 10 days before receiving a full order, depending on the day they arrived, potentially increasing the likelihood of debt.

**2.103** The range and prices of items on the prison shop list were reasonable. Some consultation with prisoners about the shop took place during prisoner representative meetings. However, there was no specific consultation with black and minority ethnic prisoners, and in our survey fewer such prisoners than their white counterparts said that the shop sold a wide enough range of goods to meet their needs.

**2.104** Prisoners were able to order larger goods from catalogues, for which they were charged a small fee.

### Recommendations

**2.105** Prisoners should be able to make purchases from the shop within 24 hours of arrival.

**2.106** Managers should investigate why some minority groups are less positive about the canteen list and take remedial action as necessary. (Repeated recommendation 2.130)

**2.107** There should be no administration charge for catalogue orders.



## Section 3. Purposeful activity

### Time out of cell

#### Expected outcomes:

**All prisoners are actively encouraged to engage in activities available during unlock and the prison offers a timetable of regular and varied activities.<sup>7</sup>**

- 3.1** *The amount of time that prisoners spent out of their cells was reasonably good, with the exception of the induction wing. There were short periods of association in the early evening from Monday to Thursday, and domestic periods every day, and these were rarely cancelled.*
- 3.2** The amount of time that prisoners spent out of their cells was reasonably good. During our roll checks, few prisoners were locked up during the core day. The published activity schedule indicated that a fully employed prisoner could achieve just over 10 hours out of their cells from Monday to Friday, and about six hours at the weekend. The few prisoners who were temporarily not required for work or unemployed had an average of about six hours out of their cell per day. There were short periods of association in the early evening from Monday to Thursday and domestic periods every day, and these were rarely cancelled. During the week, prisoners were not locked up over lunch periods.
- 3.3** On H wing (the induction wing), prisoners had less time out of their cells, and we saw too many prisoners locked up when those on the other residential wings were unlocked. During our roll checks in the middle of the working day, between 30% and 50% of prisoners on H wing were locked up, compared with between 6% and 10% on the other wings.
- 3.4** The unlock times described in the core day were usually adhered to but at weekends the regime was sometimes curtailed as a result of staff shortages. On these occasions, prisoners still received at least four hours out of cell on Saturdays and Sundays.

### Recommendation

- 3.5 The amount of time that prisoners spend locked up on the induction wing should be brought in line with the rest of the establishment.**

<sup>7</sup> Time out of cell, in addition to formal 'purposeful activity', includes any time prisoners are out of their cells to associate or use communal facilities to take showers or make telephone calls.

## Learning and skills and work activities

### Expected outcomes:

**All prisoners can engage in activities that are purposeful, benefit them and increase their employability. Prisoners are encouraged and enabled to learn both during and after their sentence. The learning and skills and work provision is of a good standard and is effective in meeting the needs of all prisoners.**

**3.6** *The leadership and management of learning, skills and work had improved considerably and effective partnership working with Milton Keynes College had led to good outcomes. Labour market intelligence was used well to plan provision. Quality improvement arrangements were good, although the quality improvement group was poorly attended. Achievements were good in vocational training but not yet good enough in English and mathematics. There were sufficient activity spaces and they were of good quality. The quality of teaching and learning in classrooms and workshops was good but individual learning plans were weak. The library was well stocked but usage was low.*

**3.7** *Ofsted<sup>8</sup> made the following assessments about the learning and skills and work provision:*

<b>Overall effectiveness of learning and skills and work:</b>	Good
<i>Achievements of prisoners engaged in learning and skills and work:</i>	Good
<i>Quality of learning and skills and work provision:</i>	Good
<i>Leadership and management of learning and skills and work:</i>	Good

### Management of learning and skills and work

**3.8** The leadership and management of learning and skills had improved considerably, mainly because of the improved partnership working between prison and Milton Keynes College managers. This had resulted in a well-planned and coherent curriculum that appropriately focused on vocational training pathways and on the development of prisoners' functional skills. Managers were aware that the prison population was changing and that many men had already achieved level 1 in functional skills from other establishments when they first arrived at the prison. Most functional skills provision was therefore offered at level 2.

**3.9** College managers had made good use of labour market intelligence to devise a curriculum tailored to meet skills gaps and employer requirements. Although prisoners arrived from many different parts of the country, managers used market data carefully to reflect key priorities and gaps in those geographical areas where prisoners were most likely to resettle.

**3.10** Self-assessment was an inclusive and critical process and the report had been produced jointly by the prison and college managers. Managers made particularly good use of data on recruitment, retention, achievement and success to arrive at sound judgements, well supported by evidence. We agreed with the key findings in the self-assessment report, but gave higher grades for most aspects of provision.

<sup>8</sup> Ofsted is the Office for Standards in Education, Children's Services and Skills. It reports directly to the UK Parliament and is independent and impartial. It (inter alia) inspects and regulates services that provide education and skills for all ages, including those in custody. For information on Ofsted's inspection framework, please visit: <http://www.ofsted.gov.uk>.

- 3.11** The college's observation process was highly effective in identifying the quality of teaching and learning. Action plans produced after observations were generally sound but many lacked detailed and sufficiently challenging targets to help good teachers do even better.
- 3.12** The prison-run quality improvement group had become a valuable forum for a range of internal stakeholders interested in learning, skills and work to get together regularly to ensure that prisoners were engaged in purposeful activity. The meetings included colleagues from the college, PE department and the activities team. Recent meetings had been poorly attended, however, and there was a risk that improvements in the quality of provision could be undermined by the absence of key staff. The prison acknowledged this concern, and at the time of the inspection was about to re-launch the quality improvement group.

### Recommendation

- 3.13** **The college should ensure that post-observation action plans are sufficiently detailed and challenging to enable teachers to develop further.**

### Housekeeping point

- 3.14** All key staff should regularly attend the quality improvement group.

### Provision of activities

- 3.15** The prison provided sufficient full-time activity places for the population. Almost all men were fully employed in a wide range of purposeful activity. The unemployment level was very low. Pay rates were equitable and did not result in any adverse consequences for those who decided to study rather than work in prison industries. College courses were offered from pre-entry level up to level 3 and distance learning courses.
- 3.16** The allocations process was effective in ensuring that prisoners attended activities that matched their level of educational attainment, aptitude and preference. The activities team made good use of a well-devised electronic 'sequencing tool', an information database which helped them to consider a wide range of information on each prisoner before allocating them to activities. Working together with the college, the prison staff used this tool to ensure that prisoners had attained English and mathematics at least at level 1 before working in certain jobs or applying for certain vocational training courses. This helped to motivate prisoners to achieve functional skills qualifications if they wanted to attend a particular workshop or apply for a job in the prison's industries.
- 3.17** The range of accredited courses available was good and there was a wide choice of industrial workshops that matched commercial standards. Vocational subjects included motor vehicle engineering, bicycle repair and building trades. However, opportunities for accreditation for those working in the laundry and the gardens were not available.

### Recommendation

- 3.18** **The prison should provide opportunities for prisoners working in laundry and the gardens to study and achieve a relevant vocational qualification.**

## Quality of provision

- 3.19** The quality of education, training and work provided by Milton Keynes College was good. Prisoners enjoyed learning and behaved well. Employability courses were skilfully taught to improve prisoners' 'softer' skills, such as active listening and being respectful to others' points of view. This meant that prisoners participated well in discussions to resolve problems and recognised the advantages of teamwork in achieving goals. In a minority of taught sessions, however, more able prisoners were not sufficiently challenged by the work and therefore made slower progress.
- 3.20** In vocational and industry workshops, trainers coached prisoners well to develop their practical skills. In the bicycle service workshop, prisoners used the skills they had learned to service and refurbish old bicycles to a sufficiently high standard that they could then be sold commercially through charity shops. As a result of trainers' good demonstration techniques, prisoners developed skills quickly; for instance, in one workshop prisoners produced complex ceramic tile patterns on a wall, and in another they quickly became confident in changing automotive shock absorbers.
- 3.21** Prisoners were well supported in classes. Additional learning support workers and peer mentors provided good individual support and helped learners to progress. Specialist tutors provided good additional support for English and mathematics in vocational workshops, setting problems in a vocationally related context to help learning and consolidate understanding. They used visual aids well and reinforced teaching points effectively by using examples and language which prisoners could understand.
- 3.22** Classrooms were well resourced and prison workshops were of a good commercial standard. All classrooms contained high-quality interactive boards to enhance learning, although these were not always used to their full potential. Motivating and informative posters decorated the walls. Most workshops were well equipped, well organised and provided a realistic working environment. Prisoners developed good gardening skills in the well-equipped horticulture workshops (see also recommendation 3.18). The work offered in the commercial assembly workshops was mundane and offered prisoners few opportunities to develop any useful skills.
- 3.23** The quality of target setting in individual learning plans was often weak. Targets were often vague and failed to record the achievement or advancement of personal skills. Although good verbal feedback was given to learners on the quality of their work, written feedback was often superficial and failed to provide guidance on how prisoners could improve. In workshops, trainers set precise targets for prisoners' daily tasks and recorded their progress well. In the catering workshop, the trainer focused well on developing prisoners' generic work skills by setting targets related to conduct, appearance and professionalism. However, not all trainers set sufficiently challenging work or targets for more able prisoners.
- 3.24** The coordination of distance learning provision for the 13 men on these courses required improvement. Prisoners were not always clear about their entitlement to study at an advanced level and some complained about a lack of resources, such as computers or access to telephone contact with their tutor. The prison's promotion of distance learning courses was weak.

## Recommendations

- 3.25 All prisoners should benefit from work opportunities that are challenging, stimulating and that enhance their employability skills.**

- 3.26** Targets in individual learning plans should be clear, achievable and time bound, so that learners' progress and achievements are recorded and recognised.
- 3.27** Arrangements for supporting distance learning should be better coordinated.

### Housekeeping point

- 3.28** Interactive boards in classrooms should be used to their full potential.

### Education and vocational achievements

- 3.29** Prisoners' achievements, both in gaining qualifications and in developing a wide range of vocational skills, were good. Achievements in vocational qualifications delivered by the college were good, as were achievements in qualifications delivered directly by the prison.
- 3.30** The college had begun to provide appropriate level 2 courses in English and mathematics for the increasing number of prisoners who arrived at the prison having already achieved level 1 in functional skills. However, achievements in English and mathematics, although improved since the time of the previous inspection, required further improvement. Early indications during the inspection suggested that prisoners studying English and mathematics at level 2 were achieving better than previous cohorts.
- 3.31** Attendance was good in learning, skills and work, and particularly good in vocational skills workshops.

### Recommendation

- 3.32** The reasons for learners' poor performance in English and mathematics should be analysed and actions taken to ensure that recent improvements in outcomes continue.

### Library

- 3.33** The library was subcontracted to the Rutland County Council library service. It was well organised and managed by a full-time library manager and two part-time assistants, supported by a part-time reader/adviser. The seven prison orderlies working in the library all held recognised qualifications at level 2 in English and mathematics; one had qualified as a peer mentor and two were Shannon Trust mentors, helping other prisoners learn to read. However, none of them held additional qualifications – for example, in library work or customer service. Library services and additions to the book stock were well publicised in a monthly newsletter shared with all prison staff and posted on each wing.
- 3.34** The library was well furnished and welcoming. Most prisoners were scheduled for one 30-minute library visit each week, which took place on Friday afternoons or at weekends. Although open during the day on weekdays, few prisoners were able to visit at these times owing to clashes with other activities. Library staff had not collected sufficiently detailed data on library usage to determine whether all men were receiving their weekly entitlement or to identify which groups of prisoners were not accessing library services. Access to the library's three working computers was limited to Friday afternoons.

- 3.35** The stock of books was appropriate for the population and included a wide range of fiction and non-fiction items, foreign language texts, easy-read texts, books for those with dyslexia, resources relevant to work in prison industries and vocational training workshops, and audio books, as well as legal reference works and Prison Service Instructions. There was appropriate access to additional books and newspapers through the library service's inter-library loan arrangements. There were suitable arrangements to make a small range of books available to prisoners on the segregation unit.
- 3.36** The library promoted reading well through a number of schemes, such as the Six-Book Challenge (an initiative inviting individuals to select six books and record their reading in a diary) and Storybook Dads (in which prisoners record stories for their children). These schemes were proving increasingly popular. The library also hosted a book group for a small group of prisoners.

## Recommendation

- 3.37** The prison should provide increased access to the library's computers.

## Housekeeping point

- 3.38** The prison should ensure that it has accurate data on library usage so that it can better determine whether all groups of prisoners are making use of this facility.

## Physical education and healthy living

### Expected outcomes:

**All prisoners understand the importance of healthy living, and are encouraged and enabled to participate in physical education in safe and decent surroundings.**

**3.39** *PE facilities were good and well used by prisoners. Relationships between PE staff and prisoners were good. Prisoners had access to a wide range of sports and leisure equipment and several PE and healthy living courses. PE sessions were accessible and well promoted. Success rates on PE courses were high. The relationship between PE staff and the health services team was good but with the college's education team was less evident.*

- 3.40** PE facilities were good and comprised a large sports hall, a well-equipped cardiovascular suite, a weights area, a spin room and a classroom. An all-weather sports pitch was a well-used resource but the large outdoor football pitch had been out of operation for several months owing to security concerns. Facilities were clean and organised, and the equipment was maintained well. The cardiovascular suite contained a wide range of exercise machines such as treadmills, cross-trainers, steppers, static bicycles and resistance equipment. The shower facilities and changing areas were generally satisfactory but no privacy screens were provided.
- 3.41** There were good relationships between PE staff and prisoners. Staff were well qualified and experienced, and offered a varied range of courses and fitness programmes throughout the year. There was also a wide range of sports and leisure activities, including competitive team games. Prisoners' views were regularly sought and used in planning PE activities. Success rates on PE courses were consistently high. Gym wing representatives promoted the gym

well. Five gym orderlies helped to promote physical health and well-being, and facilitated gym sessions.

- 3.42** Prisoners on each wing were scheduled for gym activities three times a week during the day, afternoon, evenings and weekends. PE staff offered specific sessions for older prisoners and for those referred by health services staff. Most prisoners were able to attend PE sessions for more than the two and a half hours each week.
- 3.43** All prisoners received an appropriate induction before using the gym and exercise equipment. There was a good working relationship between the PE department and the health care unit. Health services staff referred prisoners for drug and alcohol awareness courses, weight management programmes, active and healthy living courses and first-aid training. The relationship between gym staff and education colleagues was not sufficiently well established.

### Recommendation

- 3.44 PE and college staff should work together to provide further opportunities for prisoners to attend health and fitness programmes and courses.**

### Housekeeping point

- 3.45** Privacy screens should be provided in the changing rooms and shower areas.



## Section 4. Resettlement

### Strategic management of resettlement

#### Expected outcomes:

**Planning for a prisoner's release or transfer starts on their arrival at the prison.**

**Resettlement underpins the work of the whole prison, supported by strategic partnerships in the community and informed by assessment of prisoner risk and need.**

**Good planning ensures a seamless transition into the community.**

**4.1** *Outcomes were currently good for prisoners' identified resettlement needs but the reducing reoffending strategy did not reflect the current position. There was no input from a community rehabilitation company for the small number of prisoners released directly from Stocken. Insufficient use was made of the needs analysis completed by new arrivals to inform future focus and provision.*

**4.2** The prison faced a difficult strategic challenge following reconfiguration of the estate under the 'transforming rehabilitation' model two months previously. As a category C training prison, most of the population at Stocken moved to a resettlement prison within the final 12 months of their sentence. A small proportion of men were unable to do so, for reasons such as gang issues, and were released directly from the establishment. They therefore required their resettlement needs to be identified and addressed before release. However, there was no input to the prison by a community rehabilitation company to undertake this work and, following its reconfiguration, the establishment no longer had dedicated resettlement staff.

**4.3** Strategically, the prison had not undertaken work to establish the likely demand that this new situation would have on resources and time, and how needs would continue to be met in the longer term. Operationally, however, outcomes were currently good for prisoners who fell into this category as the offender management unit (OMU) signposted them to services before release as the need arose. There was a reducing reoffending strategy, which was informed by segmentation data and had associated pathway action plans, but it did not adequately reflect these strategic challenges. Reducing reoffending meetings were well attended.

**4.4** At the end of their induction, new prisoners were asked to complete a comprehensive needs analysis – a detailed document with over 100 questions relating to the resettlement pathways. However, we were told that, following reconfiguration, many of the questions relating to finance and accommodation, for example, were no longer relevant and were to be removed. Although not relevant for most prisoners, these questions could have provided useful information about the men who were to be released directly from the prison, to determine the future focus and provision for them.

**4.5** In the previous six months, three prisoners had undertaken a total of 56 releases on temporary licence (ROTL). Prisoners recategorised to D transferred quickly to the open estate, leaving little opportunity for ROTL.

#### Recommendation

**4.6** **The reducing reoffending strategy should be updated to reflect the current strategic challenges following reconfiguration.**

## Offender management and planning

### Expected outcomes:

**All prisoners have a sentence plan based on an individual assessment of risk and need, which is regularly reviewed and implemented throughout and after their time in custody. Prisoners, together with all relevant staff, are involved in drawing up and reviewing plans.**

**4.7** *Offender supervisors were well motivated and did some useful work. Most prisoners had offender supervisors but contact with them was limited. There was a backlog of 120 offender assessment system (OASys) assessments, and some assessments and sentence plans were not of sufficiently good quality. There was a lack of clear direction, supervision and quality assurance by managers in the offender management unit and the department was not driving the work undertaken with prisoners. Public protection was generally well managed but attendance at monthly interdepartmental risk management team meetings was inconsistent. Recategorisation reviews were timely and generally well informed. Transfers usually took place quickly. There was no specific provision for life-sentenced prisoners, and many we spoke to were frustrated at their lack of contact with offender supervisors.*

**4.8** The offender supervisors and case administrators we met were well motivated. In our survey, 81% of respondents said that they had a named offender supervisor in the prison, compared with 73% at similar prisons and 61% at the time of the previous inspection. However, in all of our group meetings with prisoners, they reported negatively about contact with their offender supervisors. Our case file analysis of 12 cases, six in scope for the offender management model and six out of scope, also identified poor levels of contact, particularly for out-of-scope cases, which were the responsibility of the prison. Offender supervisors aimed to see these men no more than annually to carry out an offender assessment system (OASys) assessment, which was inadequate. Contact with all prisoners was mainly reactive and task focused (for example, for an upcoming parole hearing or a recategorisation review), rather than to motivate and support them throughout their sentence (see main recommendation S41). Offender supervisors also had other duties in the prison, and this dual role restricted the amount of time that officers were able to spend in the OMU to manage their caseloads of around 50 prisoners.

**4.9** There was a lack of clear direction, supervision and quality assurance by managers within the OMU. Prison offender supervisors received no formal supervision or guidance about the level and nature of contact with prisoners. There was no structured quality assurance, and no routine feedback was provided to offender supervisors on the quality of sentence plans and other OASys processes. As a group, offender supervisors were impressively self-supporting and readily helped each other; however, it was inappropriate that they sometimes checked and signed off each others' work, although we saw some evidence of oversight from a manager in a child protection case in our sample (see main recommendation S41).

**4.10** There was a backlog of 120 OASys assessments, around 50 of which were for prisoners with no assessment at all. All but 14 of the backlog were the responsibility of external offender managers. In our case sample, just five of the cases had an adequate and timely OASys assessment and not all had outcome-focused and time-bound sentence plan objectives. OASys reviews as a result of significant events such as completion of a key programme were not undertaken routinely. Risk of serious harm screening was not accurate in around a third of cases, and only three cases had an adequate risk management plan. One risk management plan simply stated that the prisoner was in custody.

- 4.11** In the previous six months, 10 applications for home detention curfew had been considered, one of which had been approved. Decisions were well informed, using a range of information, but not all were timely. For example, one man had had an eligibility date in February 2015 but his case had not been reviewed at a board until May 2015.
- 4.12** Prisoners were generally occupied purposefully (see section on learning and skills and work activities) but the OMU did not drive the work undertaken with prisoners; this was reflected by the lack of coordination between sentence planning and other departments. For example, in our case sample there was evidence of interventions being offered in an appropriately sequential way but this had been driven by the activities unit, using their sequencing tool (see paragraph 3.16). This was not informed by OASys assessments or by offender supervisor input. Although this tool was of potential value in prioritising the delivery of sentence plan interventions, we were concerned to discover that interventions that had been planned by offender supervisors had been delayed or replaced by the use of this tool, which meant that the activities unit had effectively overruled the decisions of offender supervisors (see main recommendation S41).

## Recommendation

- 4.13 Prisoners approved for home detention curfew should be released on the earliest eligible date.**

## Public protection

- 4.14** Public protection on arrival was generally well managed and public protection issues in our case sample had been dealt with appropriately. All prisoners flagged as a public protection concern were routinely put onto mail and telephone monitoring for a minimum of one month and then reviewed. Offender supervisors explained this to prisoners face to face. At the time of the inspection, there were six prisoners subject to mail and telephone monitoring.
- 4.15** A large number of prisoners at the establishment were flagged as a public protection concern by offence; 78 prisoners were identified as multi-agency public protection arrangements (MAPPA) level 1, 31 as MAPPA level 2 and two as MAPPA level 3 cases. There were also 299 whose MAPPA management level had yet to be determined. Thirty-two prisoners were subject to varying levels of child protection measures, 62 were subject to harassment restrictions and 24 had been identified as sex offenders.
- 4.16** There was a monthly interdepartmental risk management team (IRMT) meeting, which discussed relevant cases; however, attendance from some departments was inconsistent, including security. If the relevant offender supervisor could not attend, they did not always submit a report, which meant that some IRMT cases were not discussed at the meeting. It was often not clear from the minutes that they had been picked up at subsequent meetings. In the one MAPPA-relevant case in our sample, the MAPPA work done had been adequate. MAPPA reports were satisfactory, although one had not been countersigned by a manager.

## Recommendation

- 4.17 Representatives from all relevant departments should consistently attend the interdepartmental risk management team meeting, which should be sufficiently informed by offender supervisors to enable all relevant cases to be discussed.**

## Housekeeping point

- 4.18** Multi-agency public protection arrangements (MAPPA) reports should be countersigned by a manager.

## Categorisation

- 4.19** There were 36 category D prisoners at the establishment, 27 of whom were lifers subject to parole board directions who had been returned to closed conditions after failing in the open estate.
- 4.20** Recategorisation reviews were timely; the process was driven by case administrators, who notified offender supervisors of upcoming reviews a month in advance. Weekly boards took place, chaired by two OMU managers, and all decisions were appropriately signed off by the head of the OMU. Prisoners were invited to attend the board and provide any supporting information or documentation they felt was relevant but they were told of the outcome by letter, rather than face to face.
- 4.21** The categorisation reviews we looked at were well informed and had input from the offender supervisor, the chaplaincy (where applicable), and the prisoner's workplace and residential wing. Cases in scope of the offender management model also had input from the probation offender manager in the community. Transfers to the open estate usually took place quickly.
- 4.22** In two cases we looked at, neither of which had been approved for recategorisation to open conditions, there was no current OASys assessment and the decisions had been based on out-of-date information.

## Recommendation

- 4.23** **Recategorisation decisions should be informed by up-to-date offender assessment system (OASys) assessments.**

## Housekeeping point

- 4.24** The outcome of recategorisation reviews should be explained to prisoners by an offender supervisor in a face-to-face meeting.

## Indeterminate sentence prisoners

- 4.25** At the time of the inspection, the prison held 75 life-sentenced prisoners and 83 serving an indeterminate sentence for public protection (IPP). There was no specific provision for these prisoners, such as consultation forums or lifer days.
- 4.26** Many indeterminate-sentenced prisoners we spoke to were frustrated at their lack of contact with offender supervisors (see paragraph 4.8), and some felt that there were not enough 'lifer-trained' staff who understood the particular needs of an indeterminate sentence and the importance of progression.
- 4.27** Parole dossiers were generally timely; in the previous month, only one of seven dossiers submitted had been late, and this had been due to delays caused by external probation staff.

- 4.28** Given the number of life-sentenced prisoners who had failed in open conditions (see paragraph 4.19), little was being done to investigate why they had failed or to develop interventions and support better to prepare men before they were transferred to open conditions.

## Recommendation

- 4.29** The prison should develop services such as lifer days and consultation forums, to help indeterminate-sentenced prisoners to understand and engage with risk reduction and reintegration work. Lifers should be better prepared for open conditions.

## Reintegration planning

### Expected outcomes:

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

- 4.30** *Most prisoners had few pre-release needs as they were not released directly from the establishment. Offender supervisors were responsible for ensuring that their resettlement pathway-related needs were met, and they were doing this well. Settled accommodation was arranged for most of the prisoners requiring it. The quality of the National Careers Service required improvement. Prisoners saw a health practitioner in the week before release and were advised how to register with GP services if required. The drugs team had good links with local community support agencies. Visits provision and work to promote family ties were good. A range of offending behaviour programmes was available, and there was good access to them, but there was insufficient victim awareness work.*

- 4.31** As most of the population moved to a resettlement prison during the final 12 months of sentence, they had few pre-release needs and therefore there was little provision. For those released directly from the prison, offender supervisors were responsible for ensuring that their resettlement pathway-related needs were met. There had been 51 such cases in the previous six months, 23 of which had taken place after reconfiguration. Although this had been managed well, and outcomes had been good, not all managers were clear about whether offender supervisors should be tasked with this role, how it would be sustained or whether staff were sufficiently skilled to do this work (see main recommendation S41).

## Accommodation

- 4.32** Since the previous inspection, the specialist housing advisory posts had been removed. Offender supervisors signposted prisoners who required support with accommodation issues to relevant support and/or liaised with external offender managers to provide help. Offender supervisors were aware of the release addresses for all of those who had been released in the previous six months. The target of securing settled accommodation for 87.5% of prisoners released into the community had been exceeded in this period, and 93.3% of prisoners released in June 2015 had gone to settled accommodation.

## Education, training and employment

- 4.33** The quality of the National Careers Service provided by Prospects required improvement. The planning, delivery and support of prisoners to resettle successfully also required improvement. The prison did not offer a pre-release course for the relatively small number of prisoners who were released into the community.
- 4.34** Most prisoners attended interview sessions with an adviser from Prospects soon after their arrival at the prison and agreed an action plan. However, the prison did not have a clear policy on how soon prisoners should be interviewed after their arrival and when the action plans should be reviewed. As a result, many prisoners had not been interviewed and few had their action plans reviewed promptly. Advice and guidance provided by Prospects was insufficiently linked to all of the available information held by the prison, such as in prisoners' sentence plans, and the pre-release support they offered was often of poor quality.

## Recommendation

- 4.35** **Prospects should make good use of all of the information available on prisoners, such as in sentence plans, when providing careers advice and guidance for the few prisoners who are released from the establishment.**

## Health care

- 4.36** Prisoners saw a health practitioner in the week before release and were advised how to register with GP services if required. A medical notes summary was forwarded to community GPs, with prisoner consent. We saw examples of good community liaison and discharge planning for prisoners with severe mental health problems. Arrangements to ensure continuity of care for prisoners on transfer and release were effective.
- 4.37** Two prisoners who had required palliative care in the previous year had been supported to achieve compassionate release. The clinical records demonstrated a high standard of compassionate care in partnership with the patient, prison and community services.

## Drugs and alcohol

- 4.38** The drug and alcohol team had good links with local community support agencies and was developing connections with resettlement prisons in the region.
- 4.39** There was a family link worker, and plans were well advanced for the imminent introduction of a substance use-related family intervention programme.

## Finance, benefit and debt

- 4.40** Since the reconfiguration of the prison, specialist advice on finance, benefit and debt was no longer available. Offender supervisors signposted the few prisoners being released from the establishment to the appropriate services in the community, and made the external offender manager aware of any such issues, and this appeared to be working well.

## Children, families and contact with the outside world

- 4.41** In our survey, 56% of prisoners reported having children under the age of 18 and only 18% said that it was easy for their family and friends to attend visits. Many prisoners were held a long way from home and those we spoke to commented on the difficulties this created in maintaining relationships with their families, particularly because of the prison's remote location. Many prisoners wanted a transfer to be closer to their families.
- 4.42** Visits provision was reasonably good. The large, well-equipped visitors centre was open for all visit sessions. Children's Links provided a family support and signposting service, and prison staff also offered first time visitors advice and support. Visitors told us that visits started at the advertised time, and that most staff treated them with respect. During the inspection, we saw welcoming staff processing visitors swiftly to enable visits to start on time. The visits hall was large and comfortable. It contained a play area, which Children's Links opened for all sessions, and a snack bar. Facilities for closed visits were adequate (see section on security). The prison ran 12 family days a year, which was better than we usually see.
- 4.43** Those who did not receive visits because of the distance of the prison from their home could apply for accumulated visits at other establishments closer to home; however, requests to other establishments were not chased up by the OMU and no prisoner had been able to access these visits in 2015.
- 4.44** The library coordinated Storybook Dads (see paragraph 3.36), and access to this scheme was good, with 73 recordings completed in 2015. The library had recently initiated the 'Me and My Dad' scheme (in which fathers and children complete structured activities and send them to each other, creating a memory book). The education department no longer ran the Fathers Inside course and there was no relationship education.

## Recommendations

- 4.45 Prisoners who do not receive visits because of the distance they are held from home should have access to accumulated visits.**
- 4.46 Prisoners should have access to relationship education.**

## Attitudes, thinking and behaviour

- 4.47** In our survey, 88% of respondents said that they had been involved in an offending behaviour programme while in the prison, compared with 70% at similar prisons and 72% at the time of the previous inspection. A range of programmes had been commissioned, based on evidenced need. These included Resolve (for prisoners who had committed violent offences), the healthy relationships programme (one high-intensity and one moderate-intensity programme, addressing domestic abuse) and the thinking skills programme.
- 4.48** Access to programmes was good. Although some indeterminate-sentenced prisoners told us that they felt they were passed over for programmes in favour of those serving determinate sentences, we saw no evidence of this. Waiting lists were well managed and waiting times reasonable. In our case sample, sufficient offending behaviour work was being carried out in most cases; however, although it was positive that a victim awareness course was running, there was an evident need for more work in this area

## Recommendation

- 4.49** The provision of victim awareness work should be increased to meet the identified need.

## Section 5. Summary of recommendations and housekeeping points

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

### Main recommendations

#### To the governor

- 5.1 The prison should address the high levels of violence and negative prisoner perceptions relating to safety and victimisation revealed in our survey. The contribution of staff attitudes and behaviour to the lack of safety should be specifically addressed. (S39)
- 5.2 The management and promotion of equality should be robust and informed by routine consultation with groups with protected characteristics. The negative perceptions of minority groups and the disparities in treatment suggested by monitoring data should be rigorously investigated and addressed. (S40)
- 5.3 The offender management unit and the sentence planning process should drive all work undertaken with prisoners, and offender supervisors should have regular and meaningful contact with prisoners to motivate and support them throughout their sentence. This work should be subject to robust management oversight and quality assurance of offender supervisor work. (S41)

### Recommendations

#### To NOMS

#### Courts, escort and transfers

- 5.4 Unless there are overriding security reasons, prisoners should be given 24 hours' notice of planned transfers. (1.4)

### Recommendations

#### To the governor and Home Office

- 5.5 Foreign national prisoners should have ready access to independent immigration advice and be kept informed of their immigration status by the Home Office. (2.34)

### Recommendations

#### To the governor

#### Early days in custody

- 5.6 Prisoners should move through reception quickly and have a private first night interview that focuses on vulnerabilities. (1.11)

### **Bullying and violence reduction**

- 5.7** Victims of violence should be supported and perpetrators monitored as specified in their respective support and violence reduction plans. (1.17)

### **Self-harm and suicide**

- 5.8** All staff should be trained in safer custody procedures and ACCT documents should be completed to a high standard. (1.25, repeated recommendation 1.36)
- 5.9** Prisoners in crisis should not be held in the segregation unit for reasons of self harm risk alone. (1.26)

### **Safeguarding**

- 5.10** The prison should develop guidance and procedures to help to prevent the harm or abuse of at-risk adults. (1.29)

### **Security**

- 5.11** Staff should adequately supervise prisoners on residential units. (1.37)
- 5.12** Prisoners should not be strip-searched unless an individual risk assessment justifies this step being taken. (1.38)

### **Incentives and earned privileges**

- 5.13** All motivated prisoners should have opportunities to obtain enhanced status. (1.44)
- 5.14** Prisoners should be allowed to retain their enhanced status when they arrive at the establishment. (1.45)

### **Discipline**

- 5.15** Minor infringements of prison rules should be dealt with without resorting to the formal adjudications process. (1.49)
- 5.16** Managerial oversight of, and the monitoring and analysis of information about, use of force should be robust. (1.52)
- 5.17** The cage-like exercise yards should be replaced to allow segregated prisoners to exercise in decent conditions. (1.58)

### **Residential units**

- 5.18** Prisoners should have access to the grounds on the basis of an appropriate risk assessment. (2.7)
- 5.19** Two prisoners should not share cells designed for one. (2.8, repeated recommendation 2.13)
- 5.20** In-cell toilets should be adequately screened and showers should be maintained in a decent state. (2.9)

### Staff-prisoner relationships

- 5.21** All prisoners should see their personal officer regularly. (2.16)

### Equality and diversity

- 5.22** Prisoner representatives should have a defined role, appropriate training and meet regularly with each other and with staff. (2.24)
- 5.23** All staff and prisoners should be aware of the discrimination incident report form (DIRF) system, and DIRFs should be available on all wings. External monitoring of DIRF responses should be established. (2.25)
- 5.24** Reasonable adaptations to assist prisoners with disabilities should be implemented promptly. (2.33)
- 5.25** Personal emergency evacuation plans should be accurate and all staff should be aware of which prisoners need assistance in the event of an evacuation. (2.35)

### Complaints

- 5.26** Responses to prisoners' complaints should be clear, helpful and deal with the issue raised, and they should be subject to effective quality assurance. (2.44)

### Legal rights

- 5.27** Legal visits should take place in private. (2.48)
- 5.28** The negative findings in our survey in relation to legal rights should be investigated and acted on. (2.49)

### Health services

- 5.29** All clinical areas should meet relevant cleaning and infection control standards. (2.63)
- 5.30** An ambulance should be called immediately when an emergency code is called. (2.64)
- 5.31** Prisoners should have access to regular systematic health promotion throughout the prison and on release, including easy, confidential access to barrier protection. (2.65)
- 5.32** Waiting times for primary care services, including the optician, podiatry and physiotherapy, should not exceed clinically acceptable waiting times in the community. (2.74)
- 5.33** Prisoners should have access to a pharmacist for advice and medicine use reviews. (2.79)
- 5.34** The in-possession policy should be followed and all prisoners should have recorded in-possession risk assessments that are regularly reviewed. (2.80)
- 5.35** The wing-based dispensary rooms on the wings should support easy communication with prisoners, and safe and timely drug administration. (2.81)
- 5.36** A full range of patient group directions should be in place to enable the supply of a greater range of more potent medications by nursing staff so that unnecessary consultations with the doctor can be avoided. (2.82, repeated recommendation 2.101)

- 5.37** Discipline staff should have regular mental health awareness training, to enable them to identify and support prisoners with mental health problems. (2.91)

### Catering

- 5.38** Breakfast packs should be more substantial and served on the day they are to be eaten. (2.97)
- 5.39** All prisoners should have the opportunity to dine in association. (2.98, repeated recommendation 2.121)

### Purchases

- 5.40** Prisoners should be able to make purchases from the shop within 24 hours of arrival. (2.105)
- 5.41** Managers should investigate why some minority groups are less positive about the canteen list and take remedial action as necessary. (2.106, repeat recommendation 2.130)
- 5.42** There should be no administration charge for catalogue orders. (2.107)

### Time out of cell

- 5.43** The amount of time that prisoners spend locked up on the induction wing should be brought in line with the rest of the establishment. (3.5)

### Learning and skills and work activities

- 5.44** The college should ensure that post-observation action plans are sufficiently detailed and challenging to enable teachers to develop further. (3.13)
- 5.45** The prison should provide opportunities for prisoners working in laundry and the gardens to study and achieve a relevant vocational qualification. (3.18)
- 5.46** All prisoners should benefit from work opportunities that are challenging, stimulating and that enhance their employability skills. (3.25)
- 5.47** Targets in individual learning plans should be clear, achievable and time bound, so that learners' progress and achievements are recorded and recognised. (3.26)
- 5.48** Arrangements for supporting distance learning should be better coordinated. (3.27)
- 5.49** The reasons for learners' poor performance in English and mathematics should be analysed and actions taken to ensure that recent improvements in outcomes continue. (3.32)
- 5.50** The prison should provide increased access to the library's computers. (3.37)

### Physical education and healthy living

- 5.51** PE and college staff should work together to provide further opportunities for prisoners to attend health and fitness programmes and courses. (3.44)

## Strategic management of resettlement

- 5.52** The reducing reoffending strategy should be updated to reflect the current strategic challenges following reconfiguration. (4.6)

## Offender management and planning

- 5.53** Prisoners approved for home detention curfew should be released on the earliest eligible date. (4.13)
- 5.54** Representatives from all relevant departments should consistently attend the interdepartmental risk management team meeting, which should be sufficiently informed by offender supervisors to enable all relevant cases to be discussed. (4.17)
- 5.55** Recategorisation decisions should be informed by up-to-date offender assessment system (OASys) assessments. (4.23)
- 5.56** The prison should develop services such as lifer days and consultation forums, to help indeterminate-sentenced prisoners to understand and engage with risk reduction and reintegration work. Lifers should be better prepared for open conditions. (4.29)

## Reintegration planning

- 5.57** Prospects should make good use of all of the information available on prisoners, such as in sentence plans, when providing careers advice and guidance for the few prisoners who are released from the establishment. (4.35)
- 5.58** Prisoners who do not receive visits because of the distance they are held from home should have access to accumulated visits. (4.45)
- 5.59** Prisoners should have access to relationship education. (4.46)
- 5.60** The provision of victim awareness work should be increased to meet the identified need. (4.49)

# Housekeeping points

## Bullying and violence reduction

- 5.61** The violence reduction action plan should be specific, detailed and robust. (1.18)

## Security

- 5.62** Closed visits should only be authorised for issues directly related to visits. (1.39)

## Discipline

- 5.63** Showers in the segregation unit should be cleaned. (1.59)

### **Residential units**

- 5.64** Prisoners sharing a cell should each have a lockable cabinet and a key to their cells. When required, replacement keys should be provided quickly. (2.10)
- 5.65** The offensive display policy should be applied consistently on all wings. (2.11)

### **Staff-prisoner relationships**

- 5.66** Staff should not refer to or address prisoners by their surname. (2.17)
- 5.67** Actions arising from consultation meetings should be dealt with promptly. (2.18)

### **Equality and diversity**

- 5.68** Diversity and equality action team meetings should take place in an accessible location. (2.26)

### **Health services**

- 5.69** Prisoners should have access to written information about all health services, in an appropriate range of languages and formats. (2.66)
- 5.70** Prisoners should be able to complain about health services through a well-publicised system and have easy access to complaint forms. (2.67)
- 5.71** There should be adequate storage for dental records and equipment, to ensure that surfaces are cleared of non-essential items. (2.85)

### **Catering**

- 5.72** Serveries should not be left uncleaned overnight. (2.99)
- 5.73** Food comment books should be placed more prominently at serveries and steps should be taken to improve the response rate of catering surveys. (2.100)

### **Learning and skills and work activities**

- 5.74** All key staff should regularly attend the quality improvement group. (3.14)
- 5.75** Interactive boards in classrooms should be used to their full potential. (3.28)
- 5.76** The prison should ensure that it has accurate data on library usage so that it can better determine whether all groups of prisoners are making use of this facility. (3.38)

### **Physical education and healthy living**

- 5.77** Privacy screens should be provided in the changing rooms and shower areas. (3.45)

### **Offender management and planning**

- 5.78** Multi-agency public protection arrangements (MAPPA) reports should be countersigned by a manager. (4.18)

- 5.79** The outcome of recategorisation reviews should be explained to prisoners by an offender supervisor in a face-to-face meeting. (4.24)

## Examples of good practice

### Health services

- 5.80** The identification of prisoners with complex needs was robust and supported positive health outcomes for these prisoners. (2.68)



## Section 6. Appendices

### Appendix I: Inspection team

Nick Hardwick	Chief Inspector
Hindpal Singh Bhui	Team leader
Bev Alden	Inspector
Colin Carroll	Inspector
Fionn Gordon	Inspector
Gary Boughen	Inspector
Gordon Riach	Inspector
Angus Mulready-Jones	Inspector
Alissa Redmond	Researcher
Colette Daoud	Researcher
Michelle Bellham	Researcher

#### **Specialist inspectors**

Paul Roberts	Substance misuse inspector
Majella Pearce	Health services inspector
Sue Melvin	Pharmacist
Jai Sharda	Ofsted inspector
Bob Busby	Ofsted inspector
Shrahram Safavi	Ofsted inspector
Martyn Griffiths	Offender management inspector
Joy Neary	Offender management inspector
Kathleen Byrne	Care Quality Commission inspector



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

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

### Safety

#### **Prisoners, particularly the most vulnerable, are held safely.**

*At the last inspection in 2012, reception was welcoming but first night risk assessment interviews did not take place. Peer support was good but induction arrangements were inadequate. A robust approach to violent and antisocial behaviour was having an impact and most prisoners felt safe, but some vulnerable prisoners needed more support and others reported feeling victimised. Arrangements for managing prisoners on assessment, care in custody and teamwork (ACCT) documents were reasonable but levels of care were inconsistent. Security was good, but some arrangements remained disproportionate. Mandatory drug testing (MDT) rates were low but masked issues relating to diverted prescribed medications. The strategic use of the incentives and earned privileges (IEP) scheme encouraged positive behaviour, and the units for prisoners on the enhanced regime were excellent. Use of force was generally proportionate. Relationships in segregation needed improvement. Substance misuse services were in transition; alcohol services had improved but were still not meeting all needs. Outcomes for prisoners were reasonably good against this healthy prison test.*

#### **Main recommendations**

The prison should explore the negative perceptions relating to staff and prisoner victimisation revealed in local survey results and where necessary take action to address problems and concerns. (HP51)

**Not achieved**

#### **Recommendations**

Prisoners on journeys should be offered comfort breaks at least every two and a half hours. (1.6)

**Achieved**

Prisoners should be held in cellular vehicles for the minimum period possible and should be disembarked immediately on arrival. (1.7)

**Achieved**

Prisoners should only be handcuffed when leaving escort if an individual risk assessment finds this necessary. (1.8)

**Achieved**

Prisoners should have a structured reception or first night interview, incorporating appropriate risk assessments. This information should be made available to first night staff. (1.15)

**Partially achieved**

The induction programme should cover all aspects of life at the prison and staff should actively oversee the process. (1.16)

**Achieved**

The identification of vulnerable prisoners should be improved and all prisoners should be kept safe from abuse and intimidation through individual support plans where necessary. (I.26)

**Partially achieved**

All staff should be trained in ACCT and safer custody procedures and the care offered to prisoners in crisis and the quality of ACCT documents should be improved. (I.36)

**Not achieved**

Prisoners on ACCT documents should only be located in the segregation unit or have their clothing removed as a last resort and in exceptional circumstances, and when this happens it should be properly logged and authorised. (I.37)

**Achieved**

The governor should initiate contact with the local director of adult social services (DASS) and the local safeguarding adults board (LSAB) to develop local safeguarding processes. (I.41)

**Achieved**

Prisoners should not be routinely strip-searched unless an individual risk assessment deems it necessary. (I.54)

**Not achieved**

The IEP scheme should be operated fairly and demotion to the basic level should not be as a result of petty infringements of rules. (I.64)

**Partially achieved**

All prisoners should be given the opportunity to explain fully their version of events relating to a charge. (I.68)

**Achieved**

Multidisciplinary care planning should be developed for longer stay prisoners. (I.80)

**Partially achieved**

The regime in the segregation unit should be improved and include more purposeful activity. (I.81)

**Partially achieved**

Relationships between segregation unit officers and prisoners should be improved. (I.82)

**Achieved**

The integration of clinical and psychosocial drug and alcohol services should be implemented without delay. (I.90)

**Achieved**

Drug and alcohol group work programmes should be re-introduced without delay. (I.91)

**Achieved**

Additional specialist alcohol workers should be deployed to address the high level of need for such services. (I.92)

**No longer relevant**

## Respect

### Prisoners are treated with respect for their human dignity.

*At the last inspection in 2012, the environment was reasonable, but some single cells were being used to hold two prisoners. Staff-prisoner relationships had improved and were good, and the personal officer scheme was reasonable. Consultation with prisoners had improved. Diversity provision was reasonable but disabled prisoners needed more support. Faith provision was good despite our survey results being somewhat negative. The management of complaints was reasonable but those made against staff needed greater scrutiny. Legal services were limited. Health care had improved but more still needed to be done. Decision making relating to the use of in-possession medications needed improvement. Prisoners were generally dissatisfied with the food and considered items in the shop to be too expensive. Outcomes for prisoners were reasonably good against this healthy prison test.*

### Recommendations

Two prisoners should not share cells meant for one. (2.13)

**Not achieved** (repeated recommendation 2.8)

Showers and in-cell toilets should be adequately screened to provide privacy and separation from the living area. (2.14)

**Partially achieved**

Prisoners on the standard and enhanced levels of the incentives and earned privileges scheme should be allowed to wear their own clothes around the establishment. (2.15)

**Achieved**

The single equality policy should be based on a needs analysis of the population and these and the diversity and equality action team (DEAT) meetings should reflect an equal focus on all aspects of diversity. (2.29)

**Not achieved**

Representatives from an external agency specialising in diversity and equality issues should be invited to attend DEAT meetings and quality assure DIRFs. (2.30)

**Not achieved**

Mutual support groups should be established for all protected groups, including Gypsy, Roma and Traveller groups and prisoners with disabilities. The reasons behind disabled prisoners' negative perceptions should also be explored with prisoners and any issues addressed. (2.44)

**Not achieved**

Services for foreign national prisoners should be developed to include independent immigration service advice and the prison should re-establish links with the UK Border Agency to assist foreign national prisoners with immigration matters. (2.45)

**Not achieved**

Foreign national prisoners should be able to make a free overseas telephone call, irrespective of whether or not they receive visits. (2.46)

**Not achieved**

Prisoners should have access to accredited translation and interpreting services wherever accuracy or confidentiality is important. (2.47)

**Not achieved**

Complaints against staff should be fully investigated by staff at an appropriate level. (2.64)

**Achieved**

There should be a full range of first aid equipment that is regularly checked and documented. There should be sufficient officers trained to use emergency equipment. (2.79)

**Partially achieved**

Action should be taken to identify and address prisoner concerns about health care provision through the employing NHS organisation. (2.80)

**Achieved**

Record keeping audits should be undertaken to ensure clinical decisions and plans for treatment and care are clearly explained. (2.87)

**Achieved**

Action should be taken to improve health promotion activities across the prison. (2.88)

**Not achieved**

Prisoners should be informed when their application for health services has been received. (2.89)

**Achieved**

There should be pharmacy-led clinics and medicine use reviews for the prison population. (2.98)

**Not achieved**

The in-possession policy should be updated to reflect the needs of prisoners. All in-possession risk assessments should be regularly reviewed and documented. (2.99)

**Partially achieved**

The use of single tablets in possession over weekends needs to be risk assessed and documented. (2.100)

**No longer relevant**

A full range of PGDs should be in place to enable the supply of a greater range of more potent medications by nursing staff so that unnecessary consultations with the doctor can be avoided. (2.101)

(2.101)

**Not achieved** (repeated recommendation 2.82)

The prison should explore and address the reasons for prisoners' dissatisfaction with the food. (2.120)

(2.120)

**Achieved**

Opportunities for prisoners to dine in association and cook for themselves should be improved. (2.121)

(2.121)

**Not achieved** (repeated recommendation 2.98)

Products on the shop list should reflect prices on the high street. (2.129)

**Not achieved**

Managers should investigate why some minority prisoner groups are less positive about the canteen list and take remedial action as necessary. (2.130)

**Not achieved** (repeated recommendation 2.106)

## Purposeful activity

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

*At the last inspection in 2012, the number of prisoners unlocked had improved but time out of cell for too many was still not sufficient. Quality improvement processes were ineffective in raising standards in learning and skills provision and needed to be improved. Activity places had increased but had not kept pace with the growth of the population. Vocational training opportunities had improved and were good. The quality of teaching varied and in numeracy and literacy needed significant improvement. Good use was made of peer mentors. The library and gym were both well organised and provided positive opportunities. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

### Main recommendations

The amount of purposeful activity should be increased to meet the population's needs. (HP52)

**Achieved**

### Recommendations

All prisoners should receive adequate time out of their cells. (3.5)

**Achieved**

Quality assurance procedures, including the collection and analysis of data, should accurately evaluate provision and set clear, precise and measurable targets in development plans to drive improvement in provision. (3.14)

**Achieved**

Arrangements to cover classes when staff were absent should be put in place to minimise disruption to prisoners' learning. (3.15)

**Achieved**

The level 2 certificate in practical skills and techniques to accredit prisoners' employability skills at work should be reinstated to help them develop a positive work ethic, particularly in the more mundane work areas. (3.21)

**No longer relevant**

Teachers should be supported to develop their teaching and planning skills to improve the delivery of literacy and numeracy classes and ensure that prisoners are motivated. The use of peer mentors should be included in lesson planning. (3.29)

**Achieved**

The setting of individual learning targets for prisoners should be improved in education, work and vocational training. (3.30)

**Partially achieved**

The class numbers in entry level classes should be reduced to allow teachers to provide appropriate time to each individual to help them improve their skills. (3.31)

**No longer relevant**

The number of learners achieving qualifications in literacy and numeracy should be improved. (3.35)

**Partially achieved**

Library orderlies should have the opportunity to accredit the skills they develop at work. (3.39)  
**Not achieved**

Prisoners should have the opportunity to join individual PE courses at various times throughout the year so that more prisoners have the opportunity to undertake accredited PE qualifications. (3.45)  
**Achieved**

There should be sufficient toilets and showers for men using the gym facilities. (3.46)  
**Achieved**

## Resettlement

**Prisoners are prepared for their release back into the community and effectively helped to reduce the likelihood of reoffending.**

*At the last inspection in 2012, strategic management of resettlement was reasonable but needs assessment data had not been adequately considered. Offender management arrangements prioritised the allocation of cases appropriately. OASys work was now largely up to date but the quality was mixed. Public protection and categorisation work was reasonable. The number of prisoners on indeterminate sentences had increased and support for them was adequate although there were sometimes delays in moving them to open conditions. Use of release on temporary licence (ROTL) was limited. Provision in the resettlement pathways was generally reasonable although monitoring of outcomes was limited. Children and families provision, including visits, had improved. A good range of offending behaviour programmes (OBPs) was offered but some waiting lists were long. Outcomes for prisoners were reasonably good against this healthy prison test.*

### Main recommendations

Caseloads should be reduced to permit regular and proactive contact with offenders, and all prisoner contact should be recorded on P-Nomis, promoting the greater effectiveness of offender management and sentence planning. (HP53)  
**Partially achieved**

### Recommendations

A needs-based reducing reoffending strategy that includes action planning and monitoring of service effectiveness should be developed. (4.7)  
**Achieved**

Records on contact logs should indicate the active oversight of a manager in cases where there is a high risk of serious harm or where there are child safeguarding concerns. (4.8)  
**Partially achieved**

The use of ROTL to support resettlement should be extended to include category C prisoners. (4.9)  
**Not achieved**

Quality assessment processes for OASys should be developed so that they promote learning and drive up the quality of assessments. (4.20)  
**Not achieved**

In order to provide sufficient reassurance around the robustness of public protection arrangements, the IRMT meeting should be chaired by a more senior manager. (4.24)

**Achieved**

The National Offender Management Service should ensure that all indeterminate sentence prisoners who have been judged suitable for category D conditions are transferred swiftly to an open prison, and there should be a process to prepare them for the transition to open conditions. (4.29)

**Partially achieved**

Records should be kept of the outcomes of referrals and they should be regularly analysed to provide information for the improvement of services. (4.37)

**Partially achieved**

The role of the National Careers Service should be clearly defined and prisoners should have more access to pre-release guidance and support provided by National Careers Service advisers. (4.41)

**Not achieved**

Pre-release activities, including job search facilities and the use of the virtual campus should be improved. (4.42)

**Not achieved**

A specialist financial advice service should be provided, and all prisoners should have the opportunity to open a bank account in time for their release. (4.49)

**Not achieved**

A strategic plan should be developed for this pathway; it should be managed by a nominated pathway lead to ensure better coordination of activities and to maintain progress in the provision available. (4.56)

**Partially achieved**

All visitors should be able to access the visiting room in time for the start of the visits session. (4.57)

**Achieved**

Waiting times for treatment on the HRP should be reduced. (4.60)

**Achieved**



## Appendix III: Prison population profile

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

Status	18–20-year-olds	21 and over	%
Sentenced		616	90.5
Recall		65	9.5
Convicted unsentenced			
Remand			
Civil prisoners			
Detainees			
<b>Total</b>		<b>681</b>	<b>100</b>

Sentence	18–20-year-olds	21 and over	%
Unsentenced		0	
Less than six months		0	
six months to less than 12 months		0	
12 months to less than 2 years		0	
2 years to less than 4 years		48	7
4 years to less than 10 years		429	63
10 years and over (not life)		46	6.8
ISPP (indeterminate sentence for public protection)		83	12.2
Life		75	23.2
<b>Total</b>		<b>681</b>	<b>100</b>

Age	Number of prisoners	%
Please state minimum age here:		
Under 21 years	0	
21 years to 29 years	291	42.7
30 years to 39 years	204	30
40 years to 49 years	113	16.6
50 years to 59 years	58	8.5
60 years to 69 years	15	2.2
70 plus years	0	0
Please state maximum age here:		
<b>Total</b>	<b>681</b>	<b>100</b>

Nationality	18–20-year-olds	21 and over	%
British		665	97.7
Foreign nationals		16	2.3
<b>Total</b>		<b>681</b>	<b>100</b>

Security category	18–20-year-olds	21 and over	%
Uncategorised unsentenced		0	0
Uncategorised sentenced		0	0
Category A		0	0
Category B		0	0
Category C		644	94.6
Category D		36	5.3
Other		1	0.1
<b>Total</b>		<b>681</b>	<b>100</b>

Ethnicity	18–20-year-olds	21 and over	%
White			
British		473	69.5
Irish		10	1.5
Gypsy/Irish Traveller		5	0.7
Other white		10	1.5
Mixed			
White and black Caribbean		34	5
White and black African		0	0
White and Asian		3	0.4
Other mixed		9	1.3
Asian or Asian British			
Indian		19	2.8
Pakistani		19	2.8
Bangladeshi		7	1.0
Chinese		1	0.1
Other Asian		8	1.2
Black or black British			
Caribbean		58	5.8
African		8	1.2
Other black		11	1.6
Other ethnic group			
Arab		1	0.1
Other ethnic group		3	0.4
Not stated		2	0.2
<b>Total</b>		<b>681</b>	<b>100</b>

Religion	18–20-year-olds	21 and over	%
Baptist		0	0%
Church of England		124	18.2
Roman Catholic		105	15.4
Other Christian denominations		77	11.3
Muslim		94	13.8
Sikh		5	0.7
Hindu		5	0.7
Buddhist		12	1.8
Jewish		2	0.3
Other		13	1.9
No religion		244	35.8
<b>Total</b>		<b>681</b>	<b>100</b>

Other demographics	18–20-year-olds	21 and over	%
Veteran (ex-armed services)			
<b>Total</b>			

#### Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month			44	6.5
1 month to 3 months			123	18.1
3 months to six months			142	20.9
six months to 1 year			209	30.7
1 year to 2 years			91	13.4
2 years to 4 years			53	7.8
4 years or more			19	2.8
<b>Total</b>			<b>681</b>	<b>100</b>

#### Sentenced prisoners only

	18–20-year-olds	21 and over	%
Foreign nationals detained post sentence expiry			
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).		405	59.5
<b>Total</b>		<b>405</b>	<b>59.5</b>

#### Unsentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month				
1 month to 3 months				
3 months to six months				
six months to 1 year				
1 year to 2 years				
2 years to 4 years				
4 years or more				
<b>Total</b>				

<b>Main offence</b>	<b>18–20-year-olds</b>	<b>21 and over</b>	<b>%</b>
Violence against the person			
Sexual offences			
Burglary			
Robbery			
Theft and handling			
Fraud and forgery			
Drugs offences			
Other offences			
Civil offences			
Offence not recorded /holding warrant			
<b>Total</b>			

## Appendix IV: Summary of prisoner questionnaires and interviews

### Prisoner survey methodology

A voluntary, confidential and anonymous survey of a representative proportion of the prisoner population was carried out for this inspection. The results of this survey formed part of the evidence base for the inspection.

### Sampling

The prisoner survey was conducted on a representative sample of the prison population. Using a robust statistical formula provided by a government department statistician we calculated the sample size required to ensure that our survey findings reflected the experiences of the entire population of the establishment.<sup>9</sup> Respondents were then randomly selected from a P-Nomis prisoner population printout using a stratified systematic sampling method. We also ensured that the proportion of black and minority ethnic prisoners in the sample reflected the proportion in the prison as a whole.

### Distributing and collecting questionnaires

Every attempt was made to distribute the questionnaires to respondents individually. This gave researchers an opportunity to explain the purpose of the survey and to answer respondents' questions. We also stressed the voluntary nature of the survey and provided assurances about confidentiality and the independence of the Inspectorate. This information is also provided in writing on the front cover of the questionnaire.

Our questionnaire is available in a number of different languages and via a telephone translation service for respondents who do not read English. Respondents with literacy difficulties were offered the option of an interview.

Respondents were not asked to put their names on their questionnaire. In order to ensure confidentiality, respondents were asked to seal their completed questionnaire in the envelope provided and either hand it back to a member of the research team at a specified time or leave it in their room for collection.

Refusals were noted and no attempts were made to replace them.

### Survey response

At the time of the survey on 29 June 2015 the prisoner population at HMP Stocken was 675. Using the method described above, questionnaires were distributed to a sample of 213 prisoners.

We received a total of 194 completed questionnaires, a response rate of 91%. This included one questionnaire completed via interview. Five respondents refused to complete a questionnaire, three questionnaires were not returned and 11 were returned blank.

### Presentation of survey results and analyses

Over the following pages we present the survey results for HMP Stocken.

First a full breakdown of responses is provided for each question. In this full breakdown all percentages, including those for filtered questions, refer to the full sample. Percentages have been rounded and therefore may not add up to 100%.

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<sup>9</sup> 95% confidence interval with a sampling error of 3%. The formula assumes a 75% response rate (65% in open establishments) and we routinely 'oversample' to ensure we achieve the minimum number of responses required.

<b>Wing/Unit</b>	<b>Number of completed survey returns</b>
F	28
H	30
I	22
L	53
M	58
Segregation unit	3

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant differences<sup>10</sup> are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in prisoners' background details.

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

Percentages shown in the full breakdown may differ slightly from those shown in the comparative analyses. This is because the data have been weighted to enable valid statistical comparison between establishments.

The following comparative analyses are presented:

- The current survey responses from HMP Stocken in 2015 compared with responses from prisoners surveyed in all other category C training prisons. This comparator is based on all responses from prisoner surveys carried out in 35 category C training prisons since April 2008.
- The current survey responses from HMP Stocken in 2015 compared with the responses of prisoners surveyed at HMP Stocken in 2012.
- A comparison within the 2015 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2015 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- A comparison within the 2015 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2015 survey between those who are aged 50 and over and those under 50.
- A comparison within the 2015 survey between the induction wing (H) and the rest of the establishment (F, I, L and M wings).

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<sup>10</sup> A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. Our significance level is set at 0.05 which means that there is only a 5% likelihood that the difference is due to chance.

## Survey summary

### Section I: About You

In order for us to ensure that everyone is treated equally within this prison, we ask that you fill in the following information about yourself. This will allow us to look at the answers provided by different groups of people in order to detect discrimination and to investigate whether there are equal opportunities for everyone across all areas of prison life. Your responses to these questions will remain both anonymous and confidential.

<b>Q1.1</b>	<b>What wing or houseblock are you currently living on?</b> See shortened methodology	
<b>Q1.2</b>	<b>How old are you?</b>	
	<i>Under 21</i>	1 (1%)
	<i>21 - 29</i>	86 (45%)
	<i>30 - 39</i>	57 (30%)
	<i>40 - 49</i>	26 (13%)
	<i>50 - 59</i>	20 (10%)
	<i>60 - 69</i>	3 (2%)
	<i>70 and over</i>	0 (0%)
<b>Q1.3</b>	<b>Are you sentenced?</b>	
	<i>Yes</i>	173 (90%)
	<i>Yes - on recall</i>	19 (10%)
	<i>No - awaiting trial</i>	0 (0%)
	<i>No - awaiting sentence</i>	0 (0%)
	<i>No - awaiting deportation</i>	0 (0%)
<b>Q1.4</b>	<b>How long is your sentence?</b>	
	<i>Not sentenced</i>	0 (0%)
	<i>Less than 6 months</i>	0 (0%)
	<i>6 months to less than 1 year</i>	1 (1%)
	<i>1 year to less than 2 years</i>	9 (5%)
	<i>2 years to less than 4 years</i>	19 (10%)
	<i>4 years to less than 10 years</i>	110 (57%)
	<i>10 years or more</i>	14 (7%)
	<i>IPP (indeterminate sentence for public protection)</i>	21 (11%)
	<i>Life</i>	19 (10%)
<b>Q1.5</b>	<b>Are you a foreign national? (i.e. do not have UK citizenship)</b>	
	<i>Yes</i>	6 (3%)
	<i>No</i>	188 (97%)
<b>Q1.6</b>	<b>Do you understand spoken English?</b>	
	<i>Yes</i>	193 (100%)
	<i>No</i>	0 (0%)
<b>Q1.7</b>	<b>Do you understand written English?</b>	
	<i>Yes</i>	193 (100%)
	<i>No</i>	0 (0%)

<b>Q1.8</b>	<b>What is your ethnic origin?</b>			
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	126 (65%)	<i>Asian or Asian British - Chinese</i>	0 (0%)
	<i>White - Irish</i>	4 (2%)	<i>Asian or Asian British - other</i>	1 (1%)
	<i>White - other</i>	8 (4%)	<i>Mixed race - white and black Caribbean</i>	10 (5%)
	<i>Black or black British - Caribbean</i>	21 (11%)	<i>Mixed race - white and black African</i>	0 (0%)
	<i>Black or black British - African</i>	3 (2%)	<i>Mixed race - white and Asian</i>	0 (0%)
	<i>Black or black British - other</i>	5 (3%)	<i>Mixed race - other</i>	3 (2%)
	<i>Asian or Asian British - Indian</i>	2 (1%)	<i>Arab</i>	0 (0%)
	<i>Asian or Asian British - Pakistani</i>	7 (4%)	<i>Other ethnic group</i>	2 (1%)
	<i>Asian or Asian British - Bangladeshi</i>	2 (1%)		
<b>Q1.9</b>	<b>Do you consider yourself to be Gypsy/ Romany/ Traveller?</b>			
	<i>Yes</i>			8 (4%)
	<i>No</i>			180 (96%)
<b>Q1.10</b>	<b>What is your religion?</b>			
	<i>None</i>	72 (38%)	<i>Hindu</i>	0 (0%)
	<i>Church of England</i>	47 (25%)	<i>Jewish</i>	1 (1%)
	<i>Catholic</i>	24 (13%)	<i>Muslim</i>	24 (13%)
	<i>Protestant</i>	3 (2%)	<i>Sikh</i>	1 (1%)
	<i>Other Christian denomination</i>	7 (4%)	<i>Other</i>	4 (2%)
	<i>Buddhist</i>	5 (3%)		
<b>Q1.11</b>	<b>How would you describe your sexual orientation?</b>			
	<i>Heterosexual/ Straight</i>			189 (98%)
	<i>Homosexual/ Gay</i>			2 (1%)
	<i>Bisexual</i>			2 (1%)
<b>Q1.12</b>	<b>Do you consider yourself to have a disability? (i.e. do you need help with any long term physical, mental or learning needs)</b>			
	<i>Yes</i>			35 (18%)
	<i>No</i>			157 (82%)
<b>Q1.13</b>	<b>Are you a veteran (ex-armed services)?</b>			
	<i>Yes</i>			10 (5%)
	<i>No</i>			183 (95%)
<b>Q1.14</b>	<b>Is this your first time in prison?</b>			
	<i>Yes</i>			61 (31%)
	<i>No</i>			133 (69%)
<b>Q1.15</b>	<b>Do you have children under the age of 18?</b>			
	<i>Yes</i>			108 (56%)
	<i>No</i>			85 (44%)

**Section 2: Courts, transfers and escorts**

<b>Q2.1</b>	<b>On your most recent journey here, how long did you spend in the van?</b>	
	<i>Less than 2 hours</i>	104 (54%)
	<i>2 hours or longer</i>	73 (38%)
	<i>Don't remember</i>	15 (8%)
<b>Q2.2</b>	<b>On your most recent journey here, were you offered anything to eat or drink?</b>	
	<i>My journey was less than two hours</i>	104 (55%)
	<i>Yes</i>	63 (33%)
	<i>No</i>	17 (9%)
	<i>Don't remember</i>	5 (3%)
<b>Q2.3</b>	<b>On your most recent journey here, were you offered a toilet break?</b>	
	<i>My journey was less than two hours</i>	104 (54%)
	<i>Yes</i>	10 (5%)
	<i>No</i>	72 (38%)
	<i>Don't remember</i>	5 (3%)
<b>Q2.4</b>	<b>On your most recent journey here, was the van clean?</b>	
	<i>Yes</i>	116 (61%)
	<i>No</i>	57 (30%)
	<i>Don't remember</i>	18 (9%)
<b>Q2.5</b>	<b>On your most recent journey here, did you feel safe?</b>	
	<i>Yes</i>	161 (84%)
	<i>No</i>	25 (13%)
	<i>Don't remember</i>	5 (3%)
<b>Q2.6</b>	<b>On your most recent journey here, how were you treated by the escort staff?</b>	
	<i>Very well</i>	45 (23%)
	<i>Well</i>	95 (49%)
	<i>Neither</i>	36 (19%)
	<i>Badly</i>	11 (6%)
	<i>Very badly</i>	3 (2%)
	<i>Don't remember</i>	3 (2%)
<b>Q2.7</b>	<b>Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)</b>	
	<i>Yes, someone told me</i>	116 (60%)
	<i>Yes, I received written information</i>	13 (7%)
	<i>No, I was not told anything</i>	63 (33%)
	<i>Don't remember</i>	3 (2%)
<b>Q2.8</b>	<b>When you first arrived here did your property arrive at the same time as you?</b>	
	<i>Yes</i>	158 (81%)
	<i>No</i>	33 (17%)
	<i>Don't remember</i>	3 (2%)

**Section 3: Reception, first night and induction**

<b>Q3.1</b>	<b>How long were you in reception?</b>	
	<i>Less than 2 hours</i>	82 (42%)
	<i>2 hours or longer</i>	97 (50%)
	<i>Don't remember</i>	14 (7%)

<b>Q3.2</b>	<b>When you were searched, was this carried out in a respectful way?</b>			
	Yes		156 (81%)	
	No		30 (16%)	
	Don't remember		7 (4%)	
<b>Q3.3</b>	<b>Overall, how were you treated in reception?</b>			
	Very well		38 (20%)	
	Well		98 (51%)	
	Neither		28 (15%)	
	Badly		17 (9%)	
	Very badly		9 (5%)	
	Don't remember		1 (1%)	
<b>Q3.4</b>	<b>Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)</b>			
	Loss of property	48 (25%)	Physical health	25 (13%)
	Housing problems	11 (6%)	Mental health	35 (18%)
	Contacting employers	3 (2%)	Needing protection from other prisoners	6 (3%)
	Contacting family	39 (21%)	Getting phone numbers	35 (18%)
	Childcare	0 (0%)	Other	12 (6%)
	Money worries	24 (13%)	Did not have any problems	71 (37%)
	Feeling depressed or suicidal	30 (16%)		
<b>Q3.5</b>	<b>Did you receive any help/support from staff in dealing with these problems when you first arrived here?</b>			
	Yes		29 (16%)	
	No		86 (46%)	
	Did not have any problems		71 (38%)	
<b>Q3.6</b>	<b>When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)</b>			
	Tobacco		139 (72%)	
	A shower		77 (40%)	
	A free telephone call		70 (36%)	
	Something to eat		95 (49%)	
	PIN phone credit		98 (51%)	
	Toiletries/ basic items		117 (61%)	
	Did not receive anything		21 (11%)	
<b>Q3.7</b>	<b>When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)</b>			
	Chaplain		96 (53%)	
	Someone from health services		124 (69%)	
	A Listener/Samaritans		68 (38%)	
	Prison shop/ canteen		52 (29%)	
	Did not have access to any of these		30 (17%)	

<b>Q3.8</b>	<b>When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)</b>	
	<i>What was going to happen to you</i>	109 (59%)
	<i>What support was available for people feeling depressed or suicidal</i>	81 (44%)
	<i>How to make routine requests (applications)</i>	91 (49%)
	<i>Your entitlement to visits</i>	85 (46%)
	<i>Health services</i>	93 (51%)
	<i>Chaplaincy</i>	93 (51%)
	<i>Not offered any information</i>	40 (22%)
<b>Q3.9</b>	<b>Did you feel safe on your first night here?</b>	
	Yes	157 (82%)
	No	27 (14%)
	Don't remember	8 (4%)
<b>Q3.10</b>	<b>How soon after you arrived here did you go on an induction course?</b>	
	<i>Have not been on an induction course</i>	14 (7%)
	<i>Within the first week</i>	153 (80%)
	<i>More than a week</i>	22 (12%)
	<i>Don't remember</i>	2 (1%)
<b>Q3.11</b>	<b>Did the induction course cover everything you needed to know about the prison?</b>	
	<i>Have not been on an induction course</i>	14 (7%)
	Yes	112 (60%)
	No	47 (25%)
	Don't remember	15 (8%)
<b>Q3.12</b>	<b>How soon after you arrived here did you receive an education ('skills for life') assessment?</b>	
	<i>Did not receive an assessment</i>	21 (11%)
	<i>Within the first week</i>	94 (49%)
	<i>More than a week</i>	48 (25%)
	<i>Don't remember</i>	29 (15%)

#### Section 4: Legal rights and respectful custody

<b>Q4.1</b>	<b>How easy is it to...</b>						
		Very easy	Easy	Neither	Difficult	Very difficult	N/A
	<i>Communicate with your solicitor or legal representative?</i>	21 (12%)	61 (34%)	26 (14%)	23 (13%)	23 (13%)	28 (15%)
	<i>Attend legal visits?</i>	22 (13%)	59 (36%)	21 (13%)	8 (5%)	7 (4%)	49 (30%)
	<i>Get bail information?</i>	3 (2%)	12 (8%)	25 (16%)	12 (8%)	14 (9%)	88 (57%)
<b>Q4.2</b>	<b>Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?</b>						
	<i>Not had any letters</i>						30 (16%)
	Yes						88 (47%)
	No						70 (37%)
<b>Q4.3</b>	<b>Can you get legal books in the library?</b>						
	Yes						87 (47%)
	No						8 (4%)
	Don't know						92 (49%)

<b>Q4.4</b>	<b>Please answer the following questions about the wing/unit you are currently living on:</b>	Yes	No	Don't know
	<i>Do you normally have enough clean, suitable clothes for the week?</i>	116 (62%)	68 (37%)	2 (1%)
	<i>Are you normally able to have a shower every day?</i>	176 (93%)	13 (7%)	0 (0%)
	<i>Do you normally receive clean sheets every week?</i>	140 (75%)	43 (23%)	4 (2%)
	<i>Do you normally get cell cleaning materials every week?</i>	101 (54%)	85 (45%)	2 (1%)
	<i>Is your cell call bell normally answered within five minutes?</i>	66 (35%)	96 (51%)	25 (13%)
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	127 (68%)	58 (31%)	2 (1%)
	<i>If you need to, can you normally get your stored property?</i>	21 (11%)	117 (62%)	51 (27%)
<b>Q4.5</b>	<b>What is the food like here?</b>			
	<i>Very good</i>			8 (4%)
	<i>Good</i>			64 (34%)
	<i>Neither</i>			56 (29%)
	<i>Bad</i>			51 (27%)
	<i>Very bad</i>			12 (6%)
<b>Q4.6</b>	<b>Does the shop/canteen sell a wide enough range of goods to meet your needs?</b>			
	<i>Have not bought anything yet/ don't know</i>			0 (0%)
	<i>Yes</i>			74 (39%)
	<i>No</i>			116 (61%)
<b>Q4.7</b>	<b>Can you speak to a Listener at any time, if you want to?</b>			
	<i>Yes</i>			107 (56%)
	<i>No</i>			11 (6%)
	<i>Don't know</i>			72 (38%)
<b>Q4.8</b>	<b>Are your religious beliefs respected?</b>			
	<i>Yes</i>			71 (38%)
	<i>No</i>			31 (16%)
	<i>Don't know/ N/A</i>			86 (46%)
<b>Q4.9</b>	<b>Are you able to speak to a chaplain of your faith in private if you want to?</b>			
	<i>Yes</i>			100 (53%)
	<i>No</i>			9 (5%)
	<i>Don't know/ N/A</i>			80 (42%)
<b>Q4.10</b>	<b>How easy or difficult is it for you to attend religious services?</b>			
	<i>I don't want to attend</i>			42 (22%)
	<i>Very easy</i>			40 (21%)
	<i>Easy</i>			43 (23%)
	<i>Neither</i>			17 (9%)
	<i>Difficult</i>			6 (3%)
	<i>Very difficult</i>			2 (1%)
	<i>Don't know</i>			37 (20%)

## Section 5: Applications and complaints

<b>Q5.1</b>	<b>Is it easy to make an application?</b>		
	<i>Yes</i>		167 (89%)
	<i>No</i>		16 (9%)
	<i>Don't know</i>		5 (3%)

<b>Q5.2</b>	<b>Please answer the following questions about applications. (If you have not made an application please tick the 'not made one' option.)</b>			
		<i>Not made one</i>	<i>Yes</i>	<i>No</i>
	Are applications dealt with fairly?	10 (5%)	103 (57%)	69 (38%)
	Are applications dealt with quickly (within seven days)?	10 (6%)	89 (53%)	68 (41%)
<b>Q5.3</b>	<b>Is it easy to make a complaint?</b>			
	Yes			127 (71%)
	No			25 (14%)
	Don't know			27 (15%)
<b>Q5.4</b>	<b>Please answer the following questions about complaints. (If you have not made a complaint please tick the 'not made one' option.)</b>			
		<i>Not made one</i>	<i>Yes</i>	<i>No</i>
	Are complaints dealt with fairly?	51 (28%)	46 (26%)	83 (46%)
	Are complaints dealt with quickly (within seven days)?	51 (31%)	45 (27%)	70 (42%)
<b>Q5.5</b>	<b>Have you ever been prevented from making a complaint when you wanted to?</b>			
	Yes			47 (26%)
	No			135 (74%)
<b>Q5.6</b>	<b>How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?</b>			
	Don't know who they are			39 (22%)
	Very easy			20 (11%)
	Easy			43 (25%)
	Neither			36 (21%)
	Difficult			19 (11%)
	Very difficult			18 (10%)

## Section 6: Incentive and earned privileges scheme

<b>Q6.1</b>	<b>Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme? (This refers to enhanced, standard and basic levels.)</b>			
	Don't know what the IEP scheme is			8 (4%)
	Yes			63 (34%)
	No			98 (53%)
	Don't know			16 (9%)
<b>Q6.2</b>	<b>Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.)</b>			
	Don't know what the IEP scheme is			8 (4%)
	Yes			64 (35%)
	No			99 (54%)
	Don't know			12 (7%)
<b>Q6.3</b>	<b>In the last six months have any members of staff physically restrained you (C&amp;R)?</b>			
	Yes			14 (7%)
	No			174 (93%)

<b>Q6.4</b>	<b>If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?</b>	
	<i>I have not been to segregation in the last 6 months</i>	135 (76%)
	<i>Very well</i>	4 (2%)
	<i>Well</i>	8 (5%)
	<i>Neither</i>	15 (8%)
	<i>Badly</i>	9 (5%)
	<i>Very badly</i>	6 (3%)

### Section 7: Relationships with staff

<b>Q7.1</b>	<b>Do most staff treat you with respect?</b>	
	<i>Yes</i>	124 (68%)
	<i>No</i>	59 (32%)
<b>Q7.2</b>	<b>Is there a member of staff you can turn to for help if you have a problem?</b>	
	<i>Yes</i>	119 (64%)
	<i>No</i>	67 (36%)
<b>Q7.3</b>	<b>Has a member of staff checked on you personally in the last week to see how you are getting on?</b>	
	<i>Yes</i>	48 (25%)
	<i>No</i>	141 (75%)
<b>Q7.4</b>	<b>How often do staff normally speak to you during association?</b>	
	<i>Do not go on association</i>	9 (5%)
	<i>Never</i>	48 (25%)
	<i>Rarely</i>	53 (28%)
	<i>Some of the time</i>	50 (26%)
	<i>Most of the time</i>	23 (12%)
	<i>All of the time</i>	6 (3%)
<b>Q7.5</b>	<b>When did you first meet your personal (named) officer?</b>	
	<i>I have not met him/her</i>	55 (29%)
	<i>In the first week</i>	46 (24%)
	<i>More than a week</i>	69 (36%)
	<i>Don't remember</i>	20 (11%)
<b>Q7.6</b>	<b>How helpful is your personal (named) officer?</b>	
	<i>Do not have a personal officer/ I have not met him/her</i>	55 (30%)
	<i>Very helpful</i>	39 (21%)
	<i>Helpful</i>	45 (24%)
	<i>Neither</i>	17 (9%)
	<i>Not very helpful</i>	13 (7%)
	<i>Not at all helpful</i>	17 (9%)

### Section 8: Safety

<b>Q8.1</b>	<b>Have you ever felt unsafe here?</b>	
	<i>Yes</i>	87 (46%)
	<i>No</i>	104 (54%)

<b>Q8.2</b>	<b>Do you feel unsafe now?</b>		
	Yes		35 (19%)
	No		147 (81%)
<b>Q8.3</b>	<b>In which areas have you felt unsafe? (Please tick all that apply to you.)</b>		
	Never felt unsafe	104 (55%)	At meal times 15 (8%)
	Everywhere	28 (15%)	At health services 9 (5%)
	Segregation unit	7 (4%)	Visits area 6 (3%)
	Association areas	26 (14%)	In wing showers 17 (9%)
	Reception area	4 (2%)	In gym showers 14 (7%)
	At the gym	22 (12%)	In corridors/stairwells 31 (16%)
	In an exercise yard	19 (10%)	On your landing/wing 28 (15%)
	At work	22 (12%)	In your cell 11 (6%)
	During movement	37 (20%)	At religious services 8 (4%)
	At education	13 (7%)	
<b>Q8.4</b>	<b>Have you been victimised by other prisoners here?</b>		
	Yes		71 (37%)
	No		120 (63%)
<b>Q8.5</b>	<b>If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)</b>		
	Insulting remarks (about you or your family or friends)		37 (19%)
	Physical abuse (being hit, kicked or assaulted)		18 (9%)
	Sexual abuse		6 (3%)
	Feeling threatened or intimidated		45 (24%)
	Having your canteen/property taken		21 (11%)
	Medication		8 (4%)
	Debt		12 (6%)
	Drugs		8 (4%)
	Your race or ethnic origin		16 (8%)
	Your religion/religious beliefs		14 (7%)
	Your nationality		12 (6%)
	You are from a different part of the country than others		21 (11%)
	You are from a traveller community		3 (2%)
	Your sexual orientation		4 (2%)
	Your age		9 (5%)
	You have a disability		10 (5%)
	You were new here		10 (5%)
	Your offence/ crime		11 (6%)
	Gang related issues		21 (11%)
<b>Q8.6</b>	<b>Have you been victimised by staff here?</b>		
	Yes		75 (40%)
	No		112 (60%)

<b>Q8.7</b>	<b>If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)</b>	
	<i>Insulting remarks (about you or your family or friends)</i>	34 (18%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	17 (9%)
	<i>Sexual abuse</i>	5 (3%)
	<i>Feeling threatened or intimidated</i>	36 (19%)
	<i>Medication</i>	8 (4%)
	<i>Debt</i>	7 (4%)
	<i>Drugs</i>	9 (5%)
	<i>Your race or ethnic origin</i>	12 (6%)
	<i>Your religion/religious beliefs</i>	13 (7%)
	<i>Your nationality</i>	8 (4%)
	<i>You are from a different part of the country than others</i>	12 (6%)
	<i>You are from a traveller community</i>	3 (2%)
	<i>Your sexual orientation</i>	3 (2%)
	<i>Your age</i>	9 (5%)
	<i>You have a disability</i>	9 (5%)
	<i>You were new here</i>	14 (7%)
	<i>Your offence/ crime</i>	11 (6%)
	<i>Gang related issues</i>	12 (6%)
<b>Q8.8</b>	<b>If you have been victimised by prisoners or staff, did you report it?</b>	
	<i>Not been victimised</i>	95 (56%)
	<i>Yes</i>	27 (16%)
	<i>No</i>	49 (29%)

### Section 9: Health services

<b>Q9.1</b>	<b>How easy or difficult is it to see the following people?</b>						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	The doctor	15 (8%)	5 (3%)	41 (22%)	26 (14%)	69 (37%)	33 (17%)
	The nurse	14 (8%)	14 (8%)	74 (40%)	31 (17%)	40 (22%)	11 (6%)
	The dentist	26 (14%)	3 (2%)	29 (16%)	19 (10%)	63 (34%)	43 (23%)
<b>Q9.2</b>	<b>What do you think of the quality of the health service from the following people?</b>						
		<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
	The doctor	16 (9%)	23 (12%)	59 (32%)	38 (20%)	25 (13%)	26 (14%)
	The nurse	10 (5%)	26 (14%)	71 (39%)	35 (19%)	23 (13%)	19 (10%)
	The dentist	38 (21%)	19 (10%)	50 (27%)	32 (18%)	20 (11%)	23 (13%)
<b>Q9.3</b>	<b>What do you think of the overall quality of the health services here?</b>						
	<i>Not been</i>					6 (3%)	
	<i>Very good</i>					17 (9%)	
	<i>Good</i>					58 (32%)	
	<i>Neither</i>					38 (21%)	
	<i>Bad</i>					37 (20%)	
	<i>Very bad</i>					28 (15%)	
<b>Q9.4</b>	<b>Are you currently taking medication?</b>						
	<i>Yes</i>					71 (38%)	
	<i>No</i>					118 (62%)	

<b>Q9.5</b>	<b>If you are taking medication, are you allowed to keep some/ all of it in your own cell?</b>	
	<i>Not taking medication</i>	118 (63%)
	<i>Yes, all my medication</i>	47 (25%)
	<i>Yes, some of my medication</i>	9 (5%)
	<i>No</i>	14 (7%)
<b>Q9.6</b>	<b>Do you have any emotional or mental health problems?</b>	
	<i>Yes</i>	52 (29%)
	<i>No</i>	130 (71%)
<b>Q9.7</b>	<b>Are you being helped/ supported by anyone in this prison? (e.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)</b>	
	<i>Do not have any emotional or mental health problems</i>	130 (71%)
	<i>Yes</i>	37 (20%)
	<i>No</i>	16 (9%)

### Section 10: Drugs and alcohol

<b>Q10.1</b>	<b>Did you have a problem with drugs when you came into this prison?</b>	
	<i>Yes</i>	42 (22%)
	<i>No</i>	147 (78%)
<b>Q10.2</b>	<b>Did you have a problem with alcohol when you came into this prison?</b>	
	<i>Yes</i>	34 (18%)
	<i>No</i>	153 (82%)
<b>Q10.3</b>	<b>Is it easy or difficult to get illegal drugs in this prison?</b>	
	<i>Very easy</i>	68 (36%)
	<i>Easy</i>	27 (14%)
	<i>Neither</i>	10 (5%)
	<i>Difficult</i>	8 (4%)
	<i>Very difficult</i>	4 (2%)
	<i>Don't know</i>	71 (38%)
<b>Q10.4</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	<i>Very easy</i>	21 (11%)
	<i>Easy</i>	25 (13%)
	<i>Neither</i>	19 (10%)
	<i>Difficult</i>	18 (10%)
	<i>Very difficult</i>	7 (4%)
	<i>Don't know</i>	98 (52%)
<b>Q10.5</b>	<b>Have you developed a problem with illegal drugs since you have been in this prison?</b>	
	<i>Yes</i>	16 (8%)
	<i>No</i>	173 (92%)

<b>Q10.6</b>	<b>Have you developed a problem with diverted medication since you have been in this prison?</b>		
	Yes	8	(4%)
	No	180	(96%)
<b>Q10.7</b>	<b>Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?</b>		
	<i>Did not / do not have a drug problem</i>	139	(75%)
	Yes	23	(12%)
	No	23	(12%)
<b>Q10.8</b>	<b>Have you received any support or help (for example substance misuse teams) for your alcohol problem, while in this prison?</b>		
	<i>Did not / do not have an alcohol problem</i>	153	(83%)
	Yes	19	(10%)
	No	13	(7%)
<b>Q10.9</b>	<b>Was the support or help you received, while in this prison, helpful?</b>		
	<i>Did not have a problem/ did not receive help</i>	151	(83%)
	Yes	27	(15%)
	No	4	(2%)

## Section II: Activities

<b>Q11.1</b>	<b>How easy or difficult is it to get into the following activities, in this prison?</b>					
		<i>Don't know</i>	<i>Very Easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>
						<i>Very difficult</i>
	Prison job	8 (4%)	30 (16%)	73 (40%)	29 (16%)	33 (18%)
	Vocational or skills training	18 (10%)	20 (11%)	65 (37%)	30 (17%)	32 (18%)
	Education (including basic skills)	14 (8%)	34 (19%)	73 (41%)	28 (16%)	19 (11%)
	Offending behaviour programmes	24 (14%)	8 (5%)	37 (21%)	26 (15%)	49 (28%)
		33 (19%)				
<b>Q11.2</b>	<b>Are you currently involved in the following? (Please tick all that apply to you.)</b>					
	<i>Not involved in any of these</i>	15	(8%)			
	Prison job	115	(62%)			
	Vocational or skills training	34	(18%)			
	Education (including basic skills)	39	(21%)			
	Offending behaviour programmes	30	(16%)			
<b>Q11.3</b>	<b>If you have been involved in any of the following, while in this prison, do you think they will help you on release?</b>					
		<i>Not been involved</i>	<i>Yes</i>	<i>No</i>	<i>Don't know</i>	
	Prison job	11 (7%)	62 (38%)	77 (47%)	14 (9%)	
	Vocational or skills training	13 (9%)	79 (56%)	38 (27%)	12 (8%)	
	Education (including basic skills)	8 (5%)	81 (55%)	45 (31%)	13 (9%)	
	Offending behaviour programmes	17 (12%)	72 (50%)	43 (30%)	12 (8%)	

<b>Q11.4</b>	<b>How often do you usually go to the library?</b>	
	<i>Don't want to go</i>	16 (9%)
	<i>Never</i>	27 (15%)
	<i>Less than once a week</i>	57 (31%)
	<i>About once a week</i>	64 (34%)
	<i>More than once a week</i>	22 (12%)
<b>Q11.5</b>	<b>Does the library have a wide enough range of materials to meet your needs?</b>	
	<i>Don't use it</i>	36 (19%)
	<i>Yes</i>	115 (62%)
	<i>No</i>	35 (19%)
<b>Q11.6</b>	<b>How many times do you usually go to the gym each week?</b>	
	<i>Don't want to go</i>	26 (14%)
	<i>0</i>	27 (15%)
	<i>1 to 2</i>	33 (18%)
	<i>3 to 5</i>	59 (32%)
	<i>More than 5</i>	41 (22%)
<b>Q11.7</b>	<b>How many times do you usually go outside for exercise each week?</b>	
	<i>Don't want to go</i>	9 (5%)
	<i>0</i>	16 (9%)
	<i>1 to 2</i>	50 (27%)
	<i>3 to 5</i>	59 (31%)
	<i>More than 5</i>	54 (29%)
<b>Q11.8</b>	<b>How many times do you usually have association each week?</b>	
	<i>Don't want to go</i>	12 (6%)
	<i>0</i>	4 (2%)
	<i>1 to 2</i>	46 (25%)
	<i>3 to 5</i>	43 (23%)
	<i>More than 5</i>	81 (44%)
<b>Q11.9</b>	<b>How many hours do you usually spend out of your cell on a weekday? (Please include hours at education, at work etc.)</b>	
	<i>Less than 2 hours</i>	15 (8%)
	<i>2 to less than 4 hours</i>	13 (7%)
	<i>4 to less than 6 hours</i>	16 (9%)
	<i>6 to less than 8 hours</i>	35 (19%)
	<i>8 to less than 10 hours</i>	47 (25%)
	<i>10 hours or more</i>	48 (26%)
	<i>Don't know</i>	13 (7%)

## Section 12: Contact with family and friends

<b>Q12.1</b>	<b>Have staff supported you and helped you to maintain contact with your family/friends while in this prison?</b>	
	<i>Yes</i>	56 (30%)
	<i>No</i>	128 (70%)

<b>Q12.2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>	
	Yes	83 (44%)
	No	105 (56%)
<b>Q12.3</b>	<b>Have you had any problems getting access to the telephones?</b>	
	Yes	34 (18%)
	No	154 (82%)
<b>Q12.4</b>	<b>How easy or difficult is it for your family and friends to get here?</b>	
	<i>I don't get visits</i>	32 (17%)
	<i>Very easy</i>	10 (5%)
	<i>Easy</i>	23 (12%)
	<i>Neither</i>	19 (10%)
	<i>Difficult</i>	44 (23%)
	<i>Very difficult</i>	59 (31%)
	<i>Don't know</i>	1 (1%)

### Section 13: Preparation for release

<b>Q13.1</b>	<b>Do you have a named offender manager (home probation officer) in the probation service?</b>	
	<i>Not sentenced</i>	0 (0%)
	Yes	156 (83%)
	No	32 (17%)
<b>Q13.2</b>	<b>What type of contact have you had with your offender manager since being in prison? (Please tick all that apply to you.)</b>	
	<i>Not sentenced/ NA</i>	32 (17%)
	<i>No contact</i>	54 (29%)
	<i>Letter</i>	62 (33%)
	<i>Phone</i>	50 (27%)
	<i>Visit</i>	48 (26%)
<b>Q13.3</b>	<b>Do you have a named offender supervisor in this prison?</b>	
	Yes	150 (81%)
	No	36 (19%)
<b>Q13.4</b>	<b>Do you have a sentence plan?</b>	
	<i>Not sentenced</i>	0 (0%)
	Yes	135 (71%)
	No	54 (29%)
<b>Q13.5</b>	<b>How involved were you in the development of your sentence plan?</b>	
	<i>Do not have a sentence plan/ not sentenced</i>	54 (29%)
	<i>Very involved</i>	37 (20%)
	<i>Involved</i>	40 (21%)
	<i>Neither</i>	15 (8%)
	<i>Not very involved</i>	19 (10%)
	<i>Not at all involved</i>	24 (13%)

<b>Q13.6</b>	<b>Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)</b>			
	<i>Do not have a sentence plan/ not sentenced</i>	54	(30%)	
	Nobody	55	(30%)	
	Offender supervisor	53	(29%)	
	Offender manager	36	(20%)	
	Named/ personal officer	13	(7%)	
	Staff from other departments	16	(9%)	
<b>Q13.7</b>	<b>Can you achieve any of your sentence plan targets in this prison?</b>			
	<i>Do not have a sentence plan/ not sentenced</i>	54	(29%)	
	Yes	90	(48%)	
	No	30	(16%)	
	Don't know	12	(6%)	
<b>Q13.8</b>	<b>Are there plans for you to achieve any of your sentence plan targets in another prison?</b>			
	<i>Do not have a sentence plan/ not sentenced</i>	54	(29%)	
	Yes	29	(15%)	
	No	79	(42%)	
	Don't know	27	(14%)	
<b>Q13.9</b>	<b>Are there plans for you to achieve any of your sentence plan targets in the community?</b>			
	<i>Do not have a sentence plan/ not sentenced</i>	54	(29%)	
	Yes	28	(15%)	
	No	68	(36%)	
	Don't know	38	(20%)	
<b>Q13.10</b>	<b>Do you have a needs-based custody plan?</b>			
	Yes	14	(8%)	
	No	83	(45%)	
	Don't know	86	(47%)	
<b>Q13.11</b>	<b>Do you feel that any member of staff has helped you to prepare for your release?</b>			
	Yes	29	(16%)	
	No	157	(84%)	
<b>Q13.12</b>	<b>Do you know of anyone in this prison who can help you with the following on release? (Please tick all that apply to you.)</b>			
		<i>Do not need help</i>	Yes	No
	Employment	36 (20%)	43 (24%)	100 (56%)
	Accommodation	44 (25%)	26 (15%)	105 (60%)
	Benefits	40 (24%)	27 (16%)	102 (60%)
	Finances	40 (24%)	20 (12%)	106 (64%)
	Education	42 (25%)	41 (24%)	86 (51%)
	Drugs and alcohol	48 (29%)	43 (26%)	73 (45%)
<b>Q13.13</b>	<b>Have you done anything, or has anything happened to you here, that you think will make you less likely to offend in the future?</b>			
	<i>Not sentenced</i>	0	(0%)	
	Yes	95	(53%)	
	No	83	(47%)	

Main comparator and comparator to last time



Prisoner survey responses HMP Stocken 2015

Prisoner survey responses (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

Key to tables

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HMP Stocken 2015	HMP Stocken 2012
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<b>Number of completed questionnaires returned</b>	194	6038
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194	198
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**SECTION 1: General information**

1.2	Are you under 21 years of age?	0%	3%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	10%	9%
1.4	Is your sentence less than 12 months?	0%	6%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	11%	9%
1.5	Are you a foreign national?	3%	8%
1.6	Do you understand spoken English?	100%	99%
1.7	Do you understand written English?	100%	98%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	29%	26%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	4%	4%
1.1	Are you Muslim?	13%	13%
1.11	Are you homosexual/gay or bisexual?	2%	3%
1.12	Do you consider yourself to have a disability?	18%	20%
1.13	Are you a veteran (ex-armed services)?	5%	6%
1.14	Is this your first time in prison?	31%	37%
1.15	Do you have any children under the age of 18?	56%	51%

0%	1%
100%	100%
10%	12%
0%	5%
11%	14%
3%	5%
100%	100%
100%	100%
29%	23%
4%	4%
13%	7%
2%	0%
18%	14%
5%	4%
31%	23%
56%	48%

**SECTION 2: Transfers and escorts**

On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	38%	45%
For those who spent two or more hours in the escort van:			
2.2	Were you offered anything to eat or drink?	74%	72%
2.3	Were you offered a toilet break?	12%	8%
2.4	Was the van clean?	61%	63%
2.5	Did you feel safe?	84%	80%
2.6	Were you treated well/very well by the escort staff?	73%	71%
2.7	Before you arrived here were you told that you were coming here?	60%	62%
2.7	Before you arrived here did you receive any written information about coming here?	7%	15%
2.8	When you first arrived here did your property arrive at the same time as you?	82%	87%

38%	42%
74%	76%
12%	7%
61%	72%
84%	87%
73%	78%
60%	67%
7%	13%
82%	93%

## Main comparator and comparator to last time

### Key to tables

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<b>SECTION 3: Reception, first night and induction</b>					
3.1	Were you in reception for less than 2 hours?	43%	53%	43%	61%
3.2	When you were searched in reception, was this carried out in a respectful way?	81%	85%	81%	82%
3.3	Were you treated well/very well in reception?	71%	75%	71%	69%
When you first arrived:					
3.4	Did you have any problems?	63%	60%	63%	60%
3.4	Did you have any problems with loss of property?	25%	17%	25%	17%
3.4	Did you have any housing problems?	6%	14%	6%	12%
3.4	Did you have any problems contacting employers?	2%	2%	2%	2%
3.4	Did you have any problems contacting family?	21%	18%	21%	23%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	2%	0%	0%
3.4	Did you have any money worries?	13%	14%	13%	11%
3.4	Did you have any problems with feeling depressed or suicidal?	16%	14%	16%	8%
3.4	Did you have any physical health problems?	13%	12%	13%	13%
3.4	Did you have any mental health problems?	19%	14%	19%	12%
3.4	Did you have any problems with needing protection from other prisoners?	3%	5%	3%	2%
3.4	Did you have problems accessing phone numbers?	19%	17%	19%	15%
For those with problems:					
3.5	Did you receive any help/ support from staff in dealing with these problems?	25%	37%	25%	35%
When you first arrived here, were you offered any of the following:					
3.6	Tobacco?	73%	76%	73%	71%
3.6	A shower?	40%	26%	40%	34%
3.6	A free telephone call?	37%	42%	37%	23%
3.6	Something to eat?	50%	58%	50%	52%
3.6	PIN phone credit?	51%	52%	51%	46%
3.6	Toiletries/ basic items?	61%	44%	61%	48%
When you first arrived here did you have access to the following people:					
3.7	The chaplain or a religious leader?	53%	52%	53%	44%
3.7	Someone from health services?	69%	69%	69%	67%
3.7	A Listener/Samaritans?	38%	33%	38%	25%
3.7	Prison shop/ canteen?	29%	21%	29%	25%
When you first arrived here were you offered information about any of the following:					
3.8	What was going to happen to you?	59%	51%	59%	51%
3.8	Support was available for people feeling depressed or suicidal?	44%	41%	44%	36%
3.8	How to make routine requests?	50%	44%	50%	43%
3.8	Your entitlement to visits?	46%	42%	46%	38%
3.8	Health services?	51%	54%	51%	49%

## Main comparator and comparator to last time

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3.8	The chaplaincy?	51%	49%	51%	42%
3.9	Did you feel safe on your first night here?	82%	82%	82%	88%
3.10	Have you been on an induction course?	93%	91%	93%	92%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	64%	59%	64%	57%
3.12	Did you receive an education (skills for life) assessment?	89%	83%	89%	75%
<b>SECTION 4: Legal rights and respectful custody</b>					
	In terms of your legal rights, is it easy/very easy to:				
4.1	Communicate with your solicitor or legal representative?	45%	47%	45%	51%
4.1	Attend legal visits?	49%	50%	49%	48%
4.1	Get bail information?	10%	15%	10%	15%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	47%	41%	47%	36%
4.3	Can you get legal books in the library?	47%	42%	47%	57%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	62%	67%	62%	68%
4.4	Are you normally able to have a shower every day?	93%	92%	93%	98%
4.4	Do you normally receive clean sheets every week?	75%	76%	75%	80%
4.4	Do you normally get cell cleaning materials every week?	54%	66%	54%	75%
4.4	Is your cell call bell normally answered within five minutes?	35%	36%	35%	45%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	68%	68%	68%	70%
4.4	Can you normally get your stored property, if you need to?	11%	24%	11%	17%
4.5	Is the food in this prison good/very good?	38%	27%	38%	30%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	39%	46%	39%	48%
4.7	Are you able to speak to a Listener at any time, if you want to?	56%	57%	56%	54%
4.8	Are your religious beliefs are respected?	38%	53%	38%	47%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	53%	58%	53%	50%
4.10	Is it easy/very easy to attend religious services?	44%	50%	44%	44%
<b>SECTION 5: Applications and complaints</b>					
5.1	Is it easy to make an application?	89%	82%	89%	94%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	60%	58%	60%	74%
5.2	Do you feel applications are dealt with quickly (within seven days)?	57%	42%	57%	73%
5.3	Is it easy to make a complaint?	71%	59%	71%	73%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	36%	32%	36%	40%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	39%	29%	39%	54%
5.5	Have you ever been prevented from making a complaint when you wanted to?	26%	19%	26%	20%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	36%	29%	36%	29%

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<b>SECTION 6: Incentives and earned privileges scheme</b>					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	34%	51%	34%	52%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	35%	46%	35%	51%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	8%	6%	8%	9%
6.4	In the last six months, if you have spent a night in the segregation/ care and separation unit, were you treated very well/ well by staff?	29%	38%	29%	32%
<b>SECTION 7: Relationships with staff</b>					
7.1	Do most staff, in this prison, treat you with respect?	68%	78%	68%	77%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	64%	73%	64%	80%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	25%	29%	25%	26%
7.4	Do staff normally speak to you most of the time/all of the time during association?	15%	20%	15%	24%
7.5	Do you have a personal officer?	71%	68%	71%	81%
For those with a personal officer:					
7.6	Do you think your personal officer is helpful/very helpful?	64%	62%	64%	69%
<b>SECTION 8: Safety</b>					
8.1	Have you ever felt unsafe here?	46%	34%	46%	27%
8.2	Do you feel unsafe now?	19%	15%	19%	10%
8.4	Have you been victimised by other prisoners here?	37%	26%	37%	26%
Since you have been here, have other prisoners:					
8.5	Made insulting remarks about you, your family or friends?	19%	12%	19%	11%
8.5	Hit, kicked or assaulted you?	10%	7%	10%	7%
8.5	Sexually abused you?	3%	1%	3%	1%
8.5	Threatened or intimidated you?	24%	16%	24%	15%
8.5	Taken your canteen/property?	11%	6%	11%	8%
8.5	Victimised you because of medication?	4%	4%	4%	8%
8.5	Victimised you because of debt?	6%	4%	6%	4%
8.5	Victimised you because of drugs?	4%	4%	4%	5%
8.5	Victimised you because of your race or ethnic origin?	8%	3%	8%	4%
8.5	Victimised you because of your religion/religious beliefs?	7%	3%	7%	3%
8.5	Victimised you because of your nationality?	6%	2%	6%	2%
8.5	Victimised you because you were from a different part of the country?	11%	4%	11%	6%
8.5	Victimised you because you are from a Traveller community?	2%	1%	2%	2%
8.5	Victimised you because of your sexual orientation?	2%	1%	2%	1%
8.5	Victimised you because of your age?	5%	3%	5%	5%
8.5	Victimised you because you have a disability?	5%	3%	5%	4%
8.5	Victimised you because you were new here?	5%	5%	5%	6%

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8.5	Victimised you because of your offence/crime?	6%	5%	6%	2%
8.5	Victimised you because of gang related issues?	11%	4%	11%	2%
8.6	Have you been victimised by staff here?	40%	29%	40%	34%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	18%	11%	18%	11%
8.7	Hit, kicked or assaulted you?	9%	4%	9%	3%
8.7	Sexually abused you?	3%	1%	3%	0%
8.7	Threatened or intimidated you?	19%	12%	19%	13%
8.7	Victimised you because of medication?	4%	4%	4%	6%
8.7	Victimised you because of debt?	4%	2%	4%	3%
8.7	Victimised you because of drugs?	5%	2%	5%	3%
8.7	Victimised you because of your race or ethnic origin?	7%	4%	7%	6%
8.7	Victimised you because of your religion/religious beliefs?	7%	3%	7%	1%
8.7	Victimised you because of your nationality?	4%	2%	4%	2%
8.7	Victimised you because you were from a different part of the country?	7%	3%	7%	5%
8.7	Victimised you because you are from a Traveller community?	2%	1%	2%	2%
8.7	Victimised you because of your sexual orientation?	2%	1%	2%	0%
8.7	Victimised you because of your age?	5%	2%	5%	2%
8.7	Victimised you because you have a disability?	5%	3%	5%	3%
8.7	Victimised you because you were new here?	8%	4%	8%	6%
8.7	Victimised you because of your offence/crime?	6%	4%	6%	3%
8.7	Victimised you because of gang related issues?	7%	2%	7%	1%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	36%	40%	36%	36%
<b>SECTION 9: Health services</b>					
9.1	Is it easy/very easy to see the doctor?	24%	31%	24%	22%
9.1	Is it easy/very easy to see the nurse?	48%	53%	48%	46%
9.1	Is it easy/very easy to see the dentist?	18%	13%	18%	12%
	For those who have been to the following services, do you think the quality of the health service from the following is good/very good:				
9.2	The doctor?	48%	47%	48%	50%
9.2	The nurse?	56%	58%	56%	51%
9.2	The dentist?	48%	43%	48%	35%
9.3	The overall quality of health services?	42%	43%	42%	42%
9.4	Are you currently taking medication?	38%	48%	38%	46%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	80%	83%	80%	91%
9.6	Do you have any emotional well being or mental health problems?	29%	29%	29%	26%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	70%	51%	70%	51%

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<b>SECTION 10: Drugs and alcohol</b>					
10.1	Did you have a problem with drugs when you came into this prison?	22%	24%	22%	21%
10.2	Did you have a problem with alcohol when you came into this prison?	18%	17%	18%	22%
10.3	Is it easy/very easy to get illegal drugs in this prison?	51%	36%	51%	24%
10.4	Is it easy/very easy to get alcohol in this prison?	25%	22%	25%	16%
10.5	Have you developed a problem with drugs since you have been in this prison?	9%	8%	9%	6%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	4%	7%	4%	8%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	50%	64%	50%	58%
10.8	Have you received any support or help with your alcohol problem while in this prison?	60%	65%	60%	54%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	87%	77%	87%	81%
<b>SECTION 11: Activities</b>					
	Is it very easy/ easy to get into the following activities:				
11.1	A prison job?	56%	42%	56%	56%
11.1	Vocational or skills training?	48%	39%	48%	45%
11.1	Education (including basic skills)?	61%	54%	61%	60%
11.1	Offending behaviour programmes?	26%	22%	26%	22%
	Are you currently involved in any of the following activities:				
11.2	A prison job?	62%	58%	62%	72%
11.2	Vocational or skills training?	18%	15%	18%	17%
11.2	Education (including basic skills)?	21%	24%	21%	23%
11.2	Offending behaviour programmes?	16%	12%	16%	11%
11.3	Have you had a job while in this prison?	93%	81%	93%	85%
	For those who have had a prison job while in this prison:				
11.3	Do you feel the job will help you on release?	41%	42%	41%	35%
11.3	Have you been involved in vocational or skills training while in this prison?	91%	73%	91%	74%
	For those who have had vocational or skills training while in this prison:				
11.3	Do you feel the vocational or skills training will help you on release?	61%	56%	61%	51%
11.3	Have you been involved in education while in this prison?	95%	78%	95%	75%
	For those who have been involved in education while in this prison:				
11.3	Do you feel the education will help you on release?	58%	59%	58%	46%
11.3	Have you been involved in offending behaviour programmes while in this prison?	88%	70%	88%	72%
	For those who have been involved in offending behaviour programmes while in this prison:				
11.3	Do you feel the offending behaviour programme(s) will help you on release?	57%	51%	57%	49%

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	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
11.4	Do you go to the library at least once a week?	46%	44%	46%	53%
11.5	Does the library have a wide enough range of materials to meet your needs?	62%	46%	62%	72%
11.6	Do you go to the gym three or more times a week?	54%	34%	54%	39%
11.7	Do you go outside for exercise three or more times a week?	60%	50%	60%	43%
11.8	Do you go on association more than five times each week?	44%	69%	44%	81%
11.9	Do you spend ten or more hours out of your cell on a weekday?	26%	16%	26%	14%
<b>SECTION 12: Friends and family</b>					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	31%	33%	31%	27%
12.2	Have you had any problems with sending or receiving mail?	44%	44%	44%	42%
12.3	Have you had any problems getting access to the telephones?	18%	24%	18%	24%
12.4	Is it easy/ very easy for your friends and family to get here?	18%	29%	18%	17%
<b>SECTION 13: Preparation for release</b>					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	83%	83%	83%	79%
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	35%	35%	35%	38%
13.2	Contact by letter?	40%	35%	40%	37%
13.2	Contact by phone?	32%	25%	32%	24%
13.2	Contact by visit?	31%	33%	31%	31%
13.3	Do you have a named offender supervisor in this prison?	81%	73%	81%	61%
For those who are sentenced:					
13.4	Do you have a sentence plan?	71%	68%	71%	71%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	57%	53%	57%	62%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	43%	48%	43%	46%
13.6	Offender supervisor?	41%	35%	41%	31%
13.6	Offender manager?	28%	27%	28%	24%
13.6	Named/ personal officer?	10%	12%	10%	12%
13.6	Staff from other departments?	13%	16%	13%	21%
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	68%	63%	68%	68%
13.8	Are there plans for you to achieve any of your targets in another prison?	22%	20%	22%	22%
13.9	Are there plans for you to achieve any of your targets in the community?	21%	29%	21%	26%
13.10	Do you have a needs based custody plan?	8%	6%	8%	12%
13.11	Do you feel that any member of staff has helped you to prepare for release?	16%	16%	16%	15%

## Main comparator and comparator to last time

### Key to tables

Any percentage highlighted in green is significantly better		HMP Stocken 2015	Category C training prisons comparator	HMP Stocken 2015	HMP Stocken 2012
Any percentage highlighted in blue is significantly worse					
Any percentage highlighted in orange shows a significant difference in prisoners' background details					
Percentages which are not highlighted show there is no significant difference					
For those that need help do you know of anyone in this prison who can help you on release with the following:					
13.12	Employment?	30%	34%	30%	38%
13.12	Accommodation?	20%	38%	20%	37%
13.12	Benefits?	21%	41%	21%	43%
13.12	Finances?	16%	27%	16%	31%
13.12	Education?	32%	34%	32%	42%
13.12	Drugs and alcohol?	37%	44%	37%	45%
For those who are sentenced:					
13.13	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	53%	55%	53%	56%

## Diversity analysis



### Key question responses (ethnicity and religion) HMP Stocken 2015

**Prisoner survey responses** (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

#### Key to tables

		Black and minority ethnic prisoners	White prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		<b>56</b>	<b>138</b>	<b>24</b>	<b>164</b>
1.3	Are you sentenced?	100%	100%	100%	100%
1.5	Are you a foreign national?	5%	2%	8%	3%
1.6	Do you understand spoken English?	100%	100%	100%	100%
1.7	Do you understand written English?	100%	100%	100%	100%
1.8	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?			88%	20%
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	0%	6%	0%	4%
1.1	Are you Muslim?	40%	2%		
1.12	Do you consider yourself to have a disability?	13%	20%	13%	19%
1.13	Are you a veteran (ex-armed services)?	0%	7%	0%	6%
1.14	Is this your first time in prison?	36%	30%	33%	31%
2.6	Were you treated well/very well by the escort staff?	73%	73%	79%	71%
2.7	Before you arrived here were you told that you were coming here?	56%	62%	56%	60%
3.2	When you were searched in reception, was this carried out in a respectful way?	75%	83%	70%	83%
3.3	Were you treated well/very well in reception?	72%	71%	61%	72%
3.4	Did you have any problems when you first arrived?	62%	63%	68%	61%
3.7	Did you have access to someone from health care when you first arrived here?	74%	67%	53%	71%
3.9	Did you feel safe on your first night here?	82%	82%	65%	85%
3.10	Have you been on an induction course?	96%	91%	96%	92%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	52%	43%	35%	46%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
4.4	Are you normally offered enough clean, suitable clothes for the week?	64%	62%	53%	63%
4.4	Are you normally able to have a shower every day?	87%	96%	87%	94%
4.4	Is your cell call bell normally answered within five minutes?	35%	36%	36%	35%
4.5	Is the food in this prison good/very good?	34%	39%	30%	40%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	24%	45%	26%	42%
4.7	Are you able to speak to a Listener at any time, if you want to?	52%	58%	48%	58%
4.8	Do you feel your religious beliefs are respected?	44%	35%	59%	36%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	56%	52%	64%	51%
5.1	Is it easy to make an application?	84%	91%	82%	89%
5.3	Is it easy to make a complaint?	74%	70%	75%	71%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	35%	34%	29%	35%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	30%	37%	27%	37%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	12%	6%	22%	6%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	65%	69%	52%	70%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	62%	65%	43%	66%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	15%	16%	13%	16%
7.4	Do you have a personal officer?	78%	68%	64%	71%
8.1	Have you ever felt unsafe here?	41%	47%	64%	43%
8.2	Do you feel unsafe now?	25%	17%	43%	17%
8.3	Have you been victimised by other prisoners?	41%	36%	64%	33%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	24%	23%	36%	20%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	13%	7%	27%	6%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	15%	4%	27%	5%
8.5	Have you been victimised because of your nationality? (By prisoners)	9%	5%	18%	4%
8.5	Have you been victimised because you have a disability? (By prisoners)	2%	7%	4%	5%

## Diversity analysis

### Key to tables

		Black and minority ethnic prisoners	White prisoners	Muslim prisoners	Non-Muslim prisoners
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	43%	39%	68%	37%
8.7	Have you ever felt threatened or intimidated by staff here?	24%	17%	41%	16%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	11%	5%	22%	4%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	11%	5%	22%	5%
8.7	Have you been victimised because of your nationality? (By staff)	7%	3%	13%	3%
8.7	Have you been victimised because you have a disability? (By staff)	2%	6%	4%	5%
9.1	Is it easy/very easy to see the doctor?	24%	25%	27%	24%
9.1	Is it easy/ very easy to see the nurse?	44%	49%	60%	47%
9.4	Are you currently taking medication?	26%	42%	32%	37%
9.6	Do you feel you have any emotional well being/mental health issues?	20%	32%	29%	28%
10.3	Is it easy/very easy to get illegal drugs in this prison?	36%	56%	55%	51%
11.2	Are you currently working in the prison?	56%	64%	50%	63%
11.2	Are you currently undertaking vocational or skills training?	21%	17%	32%	16%
11.2	Are you currently in education (including basic skills)?	29%	18%	22%	22%
11.2	Are you currently taking part in an offending behaviour programme?	16%	17%	4%	18%
11.4	Do you go to the library at least once a week?	53%	44%	46%	47%
11.6	Do you go to the gym three or more times a week?	64%	50%	55%	53%
11.7	Do you go outside for exercise three or more times a week?	60%	60%	73%	58%
11.8	On average, do you go on association more than five times each week?	48%	42%	46%	42%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	29%	25%	22%	26%
12.2	Have you had any problems sending or receiving mail?	42%	45%	55%	43%
12.3	Have you had any problems getting access to the telephones?	27%	15%	27%	16%

## Diversity Analysis



### Key question responses (disability and age over 50) HMP Stocken 2015

**Prisoner survey responses** (missing data has been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

#### Key to tables

		Consider themselves to have a disability		Do not consider themselves to have a disability	
				Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		<b>35</b>	<b>157</b>	<b>23</b>	<b>170</b>
1.3	Are you sentenced?	100%	100%	100%	100%
1.5	Are you a foreign national?	6%	3%	0%	4%
1.6	Do you understand spoken English?	100%	100%	100%	100%
1.7	Do you understand written English?	100%	100%	100%	100%
1.8	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	20%	31%	13%	31%
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	12%	3%	0%	5%
1.1	Are you Muslim?	9%	13%	0%	15%
1.12	Do you consider yourself to have a disability?			30%	17%
1.13	Are you a veteran (ex-armed services)?	9%	4%	18%	4%
1.14	Is this your first time in prison?	31%	32%	30%	32%
2.6	Were you treated well/very well by the escort staff?	68%	73%	83%	71%
2.7	Before you arrived here were you told that you were coming here?	50%	63%	48%	62%
3.2	When you were searched in reception, was this carried out in a respectful way?	82%	81%	74%	82%
3.3	Were you treated well/very well in reception?	73%	71%	70%	71%
3.4	Did you have any problems when you first arrived?	94%	56%	70%	61%
3.7	Did you have access to someone from health care when you first arrived here?	63%	69%	48%	71%
3.9	Did you feel safe on your first night here?	80%	83%	73%	83%
3.10	Have you been on an induction course?	85%	94%	87%	94%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	42%	46%	50%	44%

## Diversity Analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability		Prisoners aged 50 and over	Prisoners under the age of 50	
	Any percentage highlighted in blue is significantly worse						
	Any percentage highlighted in orange shows a significant difference in prisoners' background details						
	Percentages which are not highlighted show there is no significant difference						
4.4	Are you normally offered enough clean, suitable clothes for the week?	70%	62%	82%	60%		
4.4	Are you normally able to have a shower every day?	100%	92%	91%	93%		
4.4	Is your cell call bell normally answered within five minutes?	18%	38%	39%	34%		
4.5	Is the food in this prison good/very good?	33%	39%	30%	39%		
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	38%	40%	61%	36%		
4.7	Are you able to speak to a Listener at any time, if you want to?	55%	56%	61%	55%		
4.8	Do you feel your religious beliefs are respected?	45%	36%	21%	40%		
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	56%	52%	35%	55%		
5.1	Is it easy to make an application?	81%	90%	91%	88%		
5.3	Is it easy to make a complaint?	74%	70%	50%	74%		
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	31%	35%	27%	35%		
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	33%	36%	40%	35%		
6.3	In the last six months have any members of staff physically restrained you (C&R)?	9%	7%	4%	8%		
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	67%	68%	70%	68%		
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	55%	66%	74%	63%		
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	15%	16%	18%	15%		
7.4	Do you have a personal officer?	67%	72%	65%	72%		
8.1	Have you ever felt unsafe here?	61%	42%	48%	45%		
8.2	Do you feel unsafe now?	30%	16%	15%	20%		
8.3	Have you been victimised by other prisoners?	55%	33%	53%	35%		
8.5	Have you ever felt threatened or intimidated by other prisoners here?	39%	19%	26%	23%		
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	12%	7%	4%	9%		
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	6%	7%	9%	7%		
8.5	Have you been victimised because of your nationality? (By prisoners)	6%	6%	9%	6%		
8.5	Have you been victimised because of your age? (By prisoners)	3%	4%	18%	3%		
8.5	Have you been victimised because you have a disability? (By prisoners)	18%	2%	9%	5%		

## Diversity Analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
8.6	Have you been victimised by a member of staff?	49%	37%	44%	40%
8.7	Have you ever felt threatened or intimidated by staff here?	18%	19%	18%	20%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	9%	5%	4%	7%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	6%	7%	9%	7%
8.7	Have you been victimised because of your nationality? (By staff)	3%	4%	4%	4%
8.7	Have you been victimised because of your age? (By staff)	9%	4%	18%	3%
8.7	Have you been victimised because you have a disability? (By staff)	21%	1%	4%	5%
9.1	Is it easy/very easy to see the doctor?	25%	24%	22%	25%
9.1	Is it easy/ very easy to see the nurse?	55%	46%	29%	51%
9.4	Are you currently taking medication?	78%	29%	68%	34%
9.6	Do you feel you have any emotional well being/mental health issues?	65%	21%	29%	29%
10.3	Is it easy/very easy to get illegal drugs in this prison?	58%	48%	68%	48%
11.2	Are you currently working in the prison?	58%	63%	74%	61%
11.2	Are you currently undertaking vocational or skills training?	13%	19%	0%	21%
11.2	Are you currently in education (including basic skills)?	16%	22%	13%	22%
11.2	Are you currently taking part in an offending behaviour programme?	13%	17%	18%	16%
11.4	Do you go to the library at least once a week?	33%	49%	55%	45%
11.6	Do you go to the gym three or more times a week?	24%	59%	29%	57%
11.7	Do you go outside for exercise three or more times a week?	45%	63%	56%	60%
11.8	On average, do you go on association more than five times each week?	33%	46%	50%	42%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	26%	26%	14%	27%
12.2	Have you had any problems sending or receiving mail?	39%	45%	48%	44%
12.3	Have you had any problems getting access to the telephones?	22%	16%	21%	18%



## Prisoner survey responses HMP Stocken 2015

**Prisoner survey responses** (missing data have been excluded for each question) Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

### Key to tables

		Induction wing (H)	All other wings (F, I, L and M)
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>Number of completed questionnaires returned</b>		<b>30</b>	<b>161</b>
<b>SECTION 1: General information</b>			
1.2	Are you under 21 years of age?	0%	1%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	10%	9%
1.4	Is your sentence less than 12 months?	0%	1%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	10%	11%
1.5	Are you a foreign national?	3%	3%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	100%
1.8	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	7%	33%
1.9	Do you consider yourself to be Gypsy/Romany/Traveller?	7%	4%
1.1	Are you Muslim?	3%	15%
1.11	Are you homosexual/gay or bisexual?	0%	3%
1.12	Do you consider yourself to have a disability?	20%	18%
1.13	Are you a veteran (ex-armed services)?	10%	4%
1.14	Is this your first time in prison?	37%	31%
1.15	Do you have any children under the age of 18?	64%	54%
<b>SECTION 2: Transfers and escorts</b>			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	40%	38%
2.5	Did you feel safe?	90%	83%
2.6	Were you treated well/very well by the escort staff?	80%	71%
2.7	Before you arrived here were you told that you were coming here?	67%	59%
2.8	When you first arrived here did your property arrive at the same time as you?	90%	80%
<b>SECTION 3: Reception, first night and induction</b>			
3.1	Were you in reception for less than 2 hours?	47%	43%
3.2	When you were searched in reception, was this carried out in a respectful way?	97%	78%
3.3	Were you treated well/very well in reception?	84%	68%

### Key to tables

	Any percentage highlighted in green is significantly better	Induction wing (H)	All other wings (F, I, L and M)
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
	When you first arrived:		
3.4	Did you have any problems?	69%	62%
3.4	Did you have any problems with loss of property?	17%	27%
3.4	Did you have any housing problems?	7%	6%
3.4	Did you have any problems contacting employers?	3%	1%
3.4	Did you have any problems contacting family?	31%	19%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	0%
3.4	Did you have any money worries?	17%	12%
3.4	Did you have any problems with feeling depressed or suicidal?	24%	15%
3.4	Did you have any physical health problems?	21%	12%
3.4	Did you have any mental health problems?	21%	18%
3.4	Did you have any problems with needing protection from other prisoners?	3%	3%
3.4	Did you have problems accessing phone numbers?	28%	17%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	80%	72%
3.6	A shower?	37%	41%
3.6	A free telephone call?	37%	37%
3.6	Something to eat?	50%	49%
3.6	PIN phone credit?	47%	52%
3.6	Toiletries/ basic items?	73%	59%
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	52%	54%
3.7	Someone from health services?	83%	66%
3.7	A Listener/Samaritans?	35%	38%
3.7	Prison shop/ canteen?	31%	28%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	72%	57%
3.8	Support was available for people feeling depressed or suicidal?	52%	43%
3.8	How to make routine requests?	65%	46%
3.8	Your entitlement to visits?	58%	45%
3.8	Health services?	55%	50%
3.8	The chaplaincy?	49%	52%
3.9	Did you feel safe on your first night here?	87%	81%
3.10	Have you been on an induction course?	84%	94%
3.12	Did you receive an education (skills for life) assessment?	87%	89%

### Key to tables

	Any percentage highlighted in green is significantly better	Induction wing (H)	All other wings (F, I, L and M)
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>SECTION 4: Legal rights and respectful custody</b>			
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	52%	43%
4.1	Attend legal visits?	52%	48%
4.1	Get bail information?	3%	11%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	53%	46%
4.3	Can you get legal books in the library?	45%	47%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	80%	58%
4.4	Are you normally able to have a shower every day?	100%	92%
4.4	Do you normally receive clean sheets every week?	87%	72%
4.4	Do you normally get cell cleaning materials every week?	57%	53%
4.4	Is your cell call bell normally answered within five minutes?	40%	34%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	77%	66%
4.4	Can you normally get your stored property, if you need to?	14%	11%
4.5	Is the food in this prison good/very good?	60%	34%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	57%	36%
4.7	Are you able to speak to a Listener at any time, if you want to?	67%	55%
4.8	Are your religious beliefs are respected?	50%	35%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	64%	52%
4.10	Is it easy/very easy to attend religious services?	53%	42%
<b>SECTION 5: Applications and complaints</b>			
5.1	Is it easy to make an application?	93%	88%
5.3	Is it easy to make a complaint?	76%	70%
5.5	Have you ever been prevented from making a complaint when you wanted to?	23%	27%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	28%	37%
<b>SECTION 6: Incentive and earned privileges scheme</b>			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	42%	32%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	35%	36%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	7%	7%

**Key to tables**

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	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>SECTION 7: Relationships with staff</b>			
7.1	Do most staff, in this prison, treat you with respect?	71%	67%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	73%	63%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	23%	26%
7.4	Do staff normally speak to you most of the time/all of the time during association?	10%	16%
7.5	Do you have a personal officer?	67%	71%
<b>SECTION 8: Safety</b>			
8.1	Have you ever felt unsafe here?	47%	46%
8.2	Do you feel unsafe now?	28%	18%
8.4	Have you been victimised by other prisoners here?	37%	37%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	20%	20%
8.5	Hit, kicked or assaulted you?	14%	9%
8.5	Sexually abused you?	7%	3%
8.5	Threatened or intimidated you?	27%	23%
8.5	Taken your canteen/property?	7%	12%
8.5	Victimised you because of medication?	3%	4%
8.5	Victimised you because of debt?	10%	5%
8.5	Victimised you because of drugs?	3%	4%
8.5	Victimised you because of your race or ethnic origin?	7%	9%
8.5	Victimised you because of your religion/religious beliefs?	7%	8%
8.5	Victimised you because of your nationality?	10%	6%
8.5	Victimised you because you were from a different part of the country?	7%	12%
8.5	Victimised you because you are from a traveller community?	0%	2%
8.5	Victimised you because of your sexual orientation?	0%	3%
8.5	Victimised you because of your age?	7%	4%
8.5	Victimised you because you have a disability?	7%	5%
8.5	Victimised you because you were new here?	7%	5%
8.5	Victimised you because of your offence/crime?	10%	5%
8.5	Victimised you because of gang related issues?	14%	10%
8.6	Have you been victimised by staff here?	35%	41%

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	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	21%	18%
8.7	Hit, kicked or assaulted you?	14%	8%
8.7	Sexually abused you?	10%	1%
8.7	Threatened or intimidated you?	10%	21%
8.7	Victimised you because of medication?	3%	5%
8.7	Victimised you because of debt?	3%	3%
8.7	Victimised you because of drugs?	7%	5%
8.7	Victimised you because of your race or ethnic origin?	7%	7%
8.7	Victimised you because of your religion/religious beliefs?	7%	7%
8.7	Victimised you because of your nationality?	7%	4%
8.7	Victimised you because you were from a different part of the country?	7%	7%
8.7	Victimised you because you are from a traveller community?	3%	1%
8.7	Victimised you because of your sexual orientation?	3%	1%
8.7	Victimised you because of your age?	7%	5%
8.7	Victimised you because you have a disability?	3%	5%
8.7	Victimised you because you were new here?	3%	8%
8.7	Victimised you because of your offence/crime?	7%	5%
8.7	Victimised you because of gang related issues?	7%	7%
<b>SECTION 9: Health services</b>			
9.1	Is it easy/very easy to see the doctor?	23%	25%
9.1	Is it easy/very easy to see the nurse?	43%	49%
9.1	Is it easy/very easy to see the dentist?	7%	19%
9.4	Are you currently taking medication?	43%	37%
9.6	Do you have any emotional well being or mental health problems?	28%	29%
<b>SECTION 10: Drugs and alcohol</b>			
10.1	Did you have a problem with drugs when you came into this prison?	27%	22%
10.2	Did you have a problem with alcohol when you came into this prison?	20%	18%
10.3	Is it easy/very easy to get illegal drugs in this prison?	60%	49%
10.4	Is it easy/very easy to get alcohol in this prison?	23%	25%
10.5	Have you developed a problem with drugs since you have been in this prison?	10%	8%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	3%	4%

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<b>SECTION 11: Activities</b>			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	57%	56%
11.1	Vocational or skills training?	52%	47%
11.1	Education (including basic skills)?	58%	61%
11.1	Offending Behaviour Programmes?	18%	26%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	64%	62%
11.2	Vocational or skills training?	16%	18%
11.2	Education (including basic skills)?	14%	23%
11.2	Offending Behaviour Programmes?	20%	16%
11.4	Do you go to the library at least once a week?	43%	47%
11.5	Does the library have a wide enough range of materials to meet your needs?	65%	61%
11.6	Do you go to the gym three or more times a week?	38%	57%
11.7	Do you go outside for exercise three or more times a week?	57%	61%
11.8	Do you go on association more than five times each week?	50%	42%
11.9	Do you spend ten or more hours out of your cell on a weekday?	21%	27%
<b>SECTION 12: Friends and family</b>			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	39%	29%
12.2	Have you had any problems with sending or receiving mail?	57%	41%
12.3	Have you had any problems getting access to the telephones?	14%	19%
12.4	Is it easy/ very easy for your friends and family to get here?	23%	16%
<b>SECTION 13: Preparation for release</b>			
13.3	Do you have a named offender supervisor in this prison?	84%	81%
13.10	Do you have a needs based custody plan?	7%	8%
13.11	Do you feel that any member of staff has helped you to prepare for release?	17%	16%