

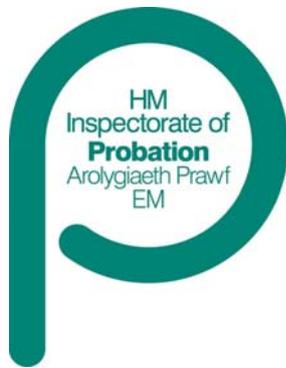
Report on an unannounced inspection of

# **HMP Bedford**

by HM Chief Inspector of Prisons

**9–20 May 2016**

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



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# Contents

Introduction	5
Fact page	7
About this inspection and report	9
Summary	11
Section 1. Safety	19
Section 2. Respect	29
Section 3. Purposeful activity	41
Section 4. Resettlement	47
Section 5. Summary of recommendations and housekeeping points	55
Section 6. Appendices	61
Appendix I: Inspection team	61
Appendix II: Progress on recommendations from the last report	63
Appendix III: Care Quality Commission Requirement Notice	71
Appendix IV: Prison population profile	75
Appendix V: Summary of prisoner questionnaires and interviews	79

### **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 Bedford is a local category B and resettlement prison for young adult and adult men. At the time of this inspection it held 493 prisoners. It was last inspected in February 2014 when we made 72 recommendations. On this occasion we found that of those 72 recommendations, only 12 had been achieved and four partially achieved. In light of this it is hardly surprising that this is a disappointing report. It is hard to understand how such an abject failure to address clear recommendations from HM Inspectorate of Prisons has been allowed to happen. Clearly neither local management nor the National Offender Management Service accepted responsibility for ensuring that action was taken. As a result, standards in the prison have declined to unacceptable levels.

In the key area of safety, a mere three out of 17 recommendations were achieved. Although the prison had good knowledge of where and when violent incidents were occurring, far too little was being done to analyse them and take effective action to reduce the violence. The levels of self-harm among prisoners had increased dramatically since the last inspection, and despite the fact that there had been self-inflicted deaths, not all recommendations made by the Prisons and Probation Ombudsman had been embedded into practice.

As in so many other prisons, it is quite clear that the ready availability of drugs, particularly new psychoactive substances (NPS) was having a serious impact on the safety of the prison. Despite this, there was no effective drug supply reduction strategy in place. Our survey showed that the number of prisoners saying that it was easy or very easy to get drugs had almost doubled since the last inspection. The number saying that they had developed a drug problem while in HMP Bedford had risen from 4% to 14%. The stark reality is that prisoners told us it was easier to get illegal drugs in the prison than it was to get clothes or sheets.

The physical condition of the prison was also poor, with many prisoners living in crowded and cramped conditions. The details of the living conditions endured by prisoners are set out in Section 2 of this report, and do not need repeating here. Suffice it to say damaged furniture, graffiti, shortages of clothing, damp clothing hanging on homemade washing lines in cells, and dirty, unscreened showers do not offer basic levels of decency.

When it comes to preparing prisoners for release, only three of the recommendations made at the last inspection had been achieved. Offender supervisors had infrequent contact with prisoners on their caseload. Delays in implementing the community rehabilitation company (CRC) arrangements meant that resettlement arrangements were weak. The CRC was not able to provide accurate data as to how many prisoners were released homeless, or into education and training.

In the face of all these failings, it is slightly reassuring to be able to report on some things that are far more positive about HMP Bedford. For instance, 79% of prisoners said that staff treated them with respect. The food was rated as good or very good by 43% of prisoners, more than double the figure in similar prisons. PE equipment and facilities were good.

I am not suggesting that staff at HMP Bedford are not working hard – inspectors found that they clearly were, and some important building blocks had been put in place to improve things in the future. The management of the prison is well aware of the challenges they face, but have not as yet been able to address them effectively. The lack of consistent leadership is unlikely to have helped the situation. There had been four people fulfilling the role of governor since the last inspection, due to a combination of factors including promotion, retirement and maternity leave. While some of this lack of continuity is unavoidable, the effect in terms of rapid changes of leadership is the same.

However, the clearest lesson to be drawn from this disappointing inspection is that if inspection recommendations are ignored to the extent that they have been at HMP Bedford, it is the prisoners who will suffer. Unfortunately, there seems to have been little progress in the period immediately following this inspection. I had been unable to attend the inspection itself, and so made an announced follow up visit two months later to make an assessment for myself. I was disappointed to find, despite assurances to the contrary, that first night arrangements were still unacceptably poor. I found that prisoners were not being sent to what had been designated as the first night centre on C wing, but were being sent wherever there was an available space. I met one foreign national prisoner who had been received into HMP Bedford the day before my visit. He had been placed in a cell with three other prisoners on C wing. The wing staff did not even know they had a new arrival in their care, and we were only able to locate him through the good offices of a wing orderly. Given that concerns had been clearly set out in the written feedback made available to the prison at the time of the inspection, it is hard to understand how this situation could arise.

The responsibility to deliver on our recommendations lies mainly with the governor but there also has to be effective oversight at a national and regional level, particularly where consistent local leadership is lacking and where some significant areas of delivery are dependent on national contracts outside the governor's direct control. Unlike our report in 2014, this inspection needs to be taken seriously, with a clear plan of action put in place to implement the recommendations, and improvements delivered through consistent and effective leadership and appropriate oversight.

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

July 2016

# Fact page

**Task of the establishment**

HMP Bedford is a local category B and resettlement prison for young adult and adult males.

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

Public

**Region/Department**

Eastern

**Number held**

493

**Certified normal accommodation**

322

**Operational capacity**

506

**Date of last full inspection**

27 January – 7 February 2014

**Brief history**

HMP Bedford has been on its current site since 1801. It was enlarged in 1849 and a new gate lodge, house block and health care centre were added in the early 1990s. It accepts prisoners mainly from Luton Crown Court, St Albans Crown Court and the magistrates' courts in Bedfordshire and Hertfordshire, alongside a resettlement population.

**Short description of residential units**

A, B and C wings are gallery-style Victorian three-storey landings. B1 is the segregation unit. C2 is the first night centre but this was due to move to E wing at the end of June 2016.

D wing is a more modern house block, on three storeys

E wing is a two-storey building used as the drug recovery wing

F wing is a Victorian two-storey wing, with gallery landings accommodating vulnerable prisoners.

The health centre is on a single landing of a new purpose-built building.

**Name of governor/director**

Roy Stevenson (acting governor)

**Escort contractor**

Serco Wincanton

**Health service provider**

Northamptonshire Healthcare NHS Foundation Trust (NHFT) and the Westminster Drugs Project (WDP).

**Learning and skills providers**

PeoplePlus

**Independent Monitoring Board chair**

Alexander Daye

**Community rehabilitation company (CRC)**

BeNCH (Bedfordshire, Northamptonshire, Cambridgeshire and Hertfordshire) CRC

# 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
  - **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.
- A8 All inspections of prisons are conducted jointly with Ofsted or Estyn (Wales), the Care Quality Commission, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

## This report

- A9 This explanation of our approach is followed by a summary of our inspection findings against the four healthy prison tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the treatment of 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 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

# Summary

## Safety

*S1 Reception staff and peer workers played a valuable role in helping new arrivals settle in. There was a suitable focus on the vulnerability and risk of new arrivals, but first night accommodation was poorly prepared and new prisoners were not provided with adequate clothing. Prisoners' perceptions of safety were similar to those at other prisons but far worse than at the time of the previous inspection. Levels of violence had increased and were high and too little was done to make the prison safer. Arrangements to manage those at risk of harm were ineffective. Not enough was done to disrupt the supply of drugs, including new psychoactive substances, which were easily available. Levels of use of force were high and oversight was weak. The number of prisoners segregated had reduced and staff provided good individual care. Clinical support for prisoners with substance misuse issues was good, with the exception of night time monitoring, which was sometimes unsafe.*

**Outcomes for prisoners were not sufficiently good against this healthy prison test.**

*S2 At the last inspection in 2014 we found that outcomes for prisoners in HMP Bedford were reasonably good against this healthy prison test. We made 17 recommendations in the area of safety. At this follow-up inspection we found that three of the recommendations had been achieved, one had been partially achieved and 13 had not been achieved.*

S3 Escort vans were reasonably clean, and prisoners said that they had been treated well by escort staff. Well-used video link facilities reduced the number of prisoners going to court. A large number of prisoner complaints related to delays in receiving property following their transfer to another prison.

S4 The layout and standard of reception facilities were poor and some prisoners stayed there too long. Staff were welcoming and there was good support from prisoner mentors. Some sensitive interviews with prisoners were held without adequate privacy, although a good first night assessment, with a focus on risk, was conducted in private. Telephone interpreting facilities were available but we were not assured that they were always used when required.

S5 New prisoners did not go to the dedicated first night accommodation (C2 landing), which was full of other prisoners, but were located wherever a space was available. First night accommodation was not prepared in advance, some cells were dirty and some prisoners did not have a pillow, kettle or adequate bedding and clothing. Night staff made hourly checks of those who were new to prison.

S6 Induction, which took place on the day after arrival for most prisoners, was not well presented but covered basic information and prisoners had the opportunity to ask questions.

S7 Considerably more prisoners than at the time of the previous inspection felt unsafe, although this was now in line with similar prisons. Levels of violence were higher than elsewhere and had also increased. The prison was well sighted on the scale and location of violent incidents, through good information sharing between safer custody and security staff. The safer custody meeting considered information about the occurrence of incidents but there was insufficient investigation and analysis of the reasons for incidents and therefore no effective actions to reduce violence and make the prison safer.

- S8 Arrangements for managing violent and bullying behaviour and supporting victims were weak. Prisoners at risk from others were held safely and were reasonably well managed on the vulnerable prisoner wing but there were insufficient spaces there, and those prisoners at risk who were held on other wings had limited support and poorer access to the regime.
- S9 Levels of self-harm and the number of prisoners subject to assessment, care in custody and teamwork (ACCT) case management processes for prisoners at risk of suicide or self-harm were higher than at similar establishments and than at the time of the previous inspection.
- S10 The quality of ACCT documentation was poor in too many cases, with some brief assessments, individual needs not reflected in care maps and some poor-quality contacts recorded. Attendance at reviews by mental health staff was inconsistent. The weekly complex needs meeting was a good initiative for safely managing prisoners whose behaviour presented a risk to others and to themselves. There were sufficient Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners) and they were well trained and supported, and access to them had improved.
- S11 Since the previous inspection, there had been two self-inflicted deaths and one apparently self-inflicted death. Not all recommendations from Prisons and Probation Ombudsman death-in-custody investigations had been embedded in practice.
- S12 Intelligence gathering was comprehensive and security information was analysed well, but security measures failed to tackle the major threats facing the prison presented by drugs, mobile phones and violence.
- S13 In our survey, over half of the prisoners said that drugs were easily available and more prisoners than at the time of the previous inspection said that they had developed a drug problem in the prison. Security intelligence pointed to 'spice', one of the 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), being prevalent. The availability and use of spice and its impact on prisoner health and the safety of the prison were a concern. The number of prisoners testing positive for drugs was similar to that at other local prisons, but was not a true reflection of drug use as NPS were undetectable. Despite the threat posed by drug use and availability, the prison had not developed a supply reduction strategy or action plan to address this significant threat.
- S14 The different levels of the incentives and earned privileges scheme offered little to encourage an improvement in behaviour, and opportunities to achieve enhanced status were limited. Too many prisoners remained on entry level beyond the published 14-day period and some were inappropriately placed on entry level on transfer in from other establishments.
- S15 The number of adjudications had risen sharply and was far higher than at comparator prisons. The use of force had risen and was high. Young adults were disproportionately represented in restraint and other disciplinary matters. There had been an improvement in the quality and completion of written documentation but oversight and monitoring of use of force were poor, with little analysis or action taken to reduce the amount of force used. Not all planned interventions were video-recorded, recordings were not reviewed and we were not assured that the planned use of force was always proportionate or necessary.
- S16 Use of segregation had reduced but was still higher than at comparator prisons. The environment on the small segregation unit was poor, and the cells on the overspill landing were in a particularly bad condition. Few prisoners were held in segregation for long periods and most returned to normal location. The introduction of exit planning and compacts for prisoners staying longer in segregation was showing promising results. Staff-prisoner

relationships on the unit were good, and staff knew the prisoners in their care well and made efforts to provide individualised care.

- S17 Arrangements for supporting prisoners with substance misuse issues required improvement. Psychosocial support services were extremely limited, with long waiting lists for assessment and no group-work courses in the previous three months. Clinical treatment started promptly and was flexible but not all prisoners were located on the designated treatment wing. The lack of regular night-time monitoring during detoxification/stabilisation was unsafe.

## Respect

S18 *Living conditions for prisoners were poor, with most living in cramped conditions and struggling to access basic equipment and clothing. Most prisoners said that staff treated them well and we observed helpful and respectful interactions. Equality and diversity arrangements had deteriorated and outcomes for some prisoners with protected characteristics were poor. Faith provision was adequate but stretched. The number of complaints submitted was not high but management and oversight were weak. Health services were reasonable overall. The quality of the food provided was good, and better than we often see. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S19 *At the last inspection in 2014 we found that outcomes for prisoners in HMP Bedford were reasonably good against this healthy prison test. We made 29 recommendations in the area of respect.<sup>2</sup> At this follow-up inspection we found that five of the recommendations had been achieved, two had been partially achieved and 22 had not been achieved.*

- S20 External areas were mostly clean and litter free but some communal internal areas were grubby. Many prisoners lived in crowded and cramped conditions. Most cells had missing or damaged furniture and prisoners struggled to get access to even basic essentials such as sufficient clean clothing, bedding and cleaning materials. Much of this was a result of poorly performing national contracts.
- S21 Access to the refurbished showers was good but shower rooms were often littered and dirty throughout the day. Some showers lacked privacy. The applications system was poor, with inconsistent arrangements across the wings. Prisoner mail processes were efficient, although some mailboxes on the wings were broken, so not secure. Too many telephones were out of action.
- S22 In our survey, most prisoners, and more than in similar prisons, said that staff treated them respectfully and that there was a member of staff they could turn to for help. We observed respectful and helpful interactions throughout the inspection but some poor behaviour went unchallenged. The quality and frequency of entries in electronic case notes were variable and too many lacked regular wing officer comments. Prisoner consultation arrangements were infrequent, with little evidence of subsequent actions.
- S23 The overall strategic management of equality and diversity had deteriorated but there was evidence of a commitment to improve structures. Equality monitoring data were analysed but no action had been taken when potential discrimination had been identified. Discrimination incident report forms were not widely available, the number submitted was very low and the quality of investigations was poor. The newly appointed team of prisoner

<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.

equality representatives was a good initiative but not yet embedded. Prisoner information and support forums were not available for all protected groups. Those in place had only recently been introduced and it was too soon to assess their impact.

- S24 Almost a third of prisoners were from a black and minority ethnic background and around 18% were Muslim. In our survey, both groups mostly reported similarly to white and non-Muslim prisoners, respectively, but black and minority ethnic prisoners were more negative in some key areas. The prison's equality monitoring data indicated areas of concern but little had been done to address these.
- S25 Foreign national prisoners had reasonable access to Home Office staff. Support for non-English-speaking prisoners was inadequate and foreign national prisoners had no access to a forum or support group, which potentially left them isolated.
- S26 In our survey, prisoners with a disability reported negatively on a range of issues, including safety. Equality monitoring data identified areas of concern but these had not been addressed. Provision for these prisoners was mixed and some needs were not met. There was only one adapted cell, and there were no care plans and no carers for those who needed support.
- S27 Support for older prisoners was poor. There were no links with support agencies and no activities targeting this group. There was no specific provision for young people.
- S28 In our survey, most prisoners said that their religious beliefs were respected and reported relatively positively on their access to corporate worship. However, not all faiths were represented, primarily because of vacancies within the chaplaincy. Chaplains were not sufficiently visible or accessible on the wings, and links into the community were limited.
- S29 The number of complaints submitted was lower than at similar prisons. Some analysis of complaints was undertaken but there was no action taken to address issues raised. Too many responses were late and did not always address the complaint made.
- S30 There were no specific legal services provided. Few prisoners knew how to access bail advice and few bail accommodation referrals were made.
- S31 Overall, the provision of health care was reasonably good. Partnership working and most aspects of clinical governance were effective. The quality of the first and secondary health screening was good but they were not always conducted with sufficient confidentiality. There was reasonable access to an appropriate range of primary care services, and long-term conditions were well managed.
- S32 The management of medicines was reasonably good, although wing-based treatment rooms did not meet infection control standards, and areas within the inpatient area were dirty.
- S33 Equipment failure and extended delays in the refurbishment of the dental room had resulted in no provision of routine dental services for several weeks. The integrated mental health team provided a reasonably good level of secondary mental health care, although the range of treatment for primary mental health was limited and needed further development.
- S34 Prisoners were positive about the quality of the food provided. The catering arrangements in general were better than we normally see, although some meals were served too early and the meagre breakfast packs were given out on the day before consumption. The range of items on the prison shop list was adequate. Prisoners could ask for additional reception packs (a grocery pack which usually contains basic food and drink items such as tea, milk,

sugar and sweets) if they arrived between prison shop ordering days, reducing the risk of debt.

## Purposeful activity

S35 *The amount of time out of cell varied but for most prisoners it was inadequate. There were frequent slippages, cancellations and delays to the regime. The leadership and management of learning and skills and work activities required improvement. There were sufficient activity places for all prisoners to work at least part time but far too many were unemployed. The variety of education and work was appropriate but too little vocational training was available. Punctuality was inconsistent and attendance and behaviour at education were often poor. The quality of teaching and learning was not good enough and prisoners were not sufficiently challenged. Prisoners achieved well but too many qualifications were at too low a level. The quality of the library and PE facilities was good but access was sometimes problematic. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S36 *At the last inspection in 2014 we found that outcomes for prisoners in HMP Bedford were not sufficiently good against this healthy prison test. We made 14 recommendations in the area of purposeful activity. At this follow-up inspection we found that one of the recommendations had been achieved and 13 had not been achieved.*

S37 The restricted regime, introduced because of staff shortages, reduced the average time out of cell by an hour a day. The regime regularly ran late and we saw long delays in unlocking prisoners for work and association. For the small number of full-time workers, the amount of time out of cell was reasonable, at around nine hours a day. For those who were in part-time work, it was around five hours a day. For others, especially the unemployed, this could be as little as three hours a day, and only one hour for some. Too many prisoners, around 41%, were locked in cells during our roll checks, which was considerably higher than at the time of the previous inspection.

S38 The operational management of learning and skills and work required improvement and had yet to demonstrate a sufficient impact to improve provision. The prison's self-assessment and recently completed 'health check' had identified concerns well and managers had started to address the main areas for development.

S39 There were sufficient activity places for all prisoners to work at least part time. However, too many were allocated to full-time activity, leaving around a fifth of prisoners unemployed. Despite this, not all activity places were filled.

S40 The range of vocational training and opportunity for prisoners to gain vocational qualifications was too limited, although the variety of education and work was appropriate.

S41 The standard of teaching, learning and assessment required improvement. Most teachers and tutors did not plan sufficiently challenging activities for learning to stimulate and engage prisoners and stretch their skills. The use of individual learning plans, including feedback to prisoners, was not consistently good enough to give prisoners sufficient information and focus on how to improve their performance. Observation records of teaching, learning and assessment did not focus sufficiently on the progress that prisoners were making or the further development of English, mathematics and wider employability skills.

- S42 Prisoners' attendance at work and training was good but too many allocated to education failed to turn up. Punctuality was not good enough at work, training or education, with many prisoners arriving for sessions late and leaving for other appointments. Once prisoners arrived at work and training, their behaviour and work ethic were good but behaviour management in education classes was poor. Too many lessons were interrupted by low-level disruption by prisoners. Prisoners had too few opportunities in vocational training and work settings to develop and gain accreditation in English and mathematics, to enhance their chances of employment on release.
- S43 Prisoners' achievement of short units of accredited qualifications in education and vocational training was good. Success rates in English, mathematics and information and communications technology were good. However, too many prisoners were studying qualifications at a level too low for their ability. The standard of work in vocational training was good.
- S44 The library was good and well organised. The stock was mostly appropriate for the population but there were few books to support vocational training or employability. Planned access for prisoners was good but the lack of officer escorts often limited access, and usage by individual prisoners was not monitored.
- S45 The PE department provided good indoor facilities, with good appreciation of healthy lifestyles and well-being. Links with the health care department were good. Planned access to the gym for all prisoners was good, but in reality slippages in the regime meant that some sessions were curtailed. No accredited PE qualifications were offered.

## Resettlement

S46 *The quality of offender management work was undermined by the regular cross-deployment of uniformed offender supervisors, who had infrequent contact with the prisoners on their caseload. The management of higher-risk cases was better, with a focus on motivation and progression. Home detention curfew arrangements were weak. Public protection arrangements had improved and were mostly good. Too many prisoners were transferred without an offender assessment system (OASys) assessment to inform their move. The demand for resettlement services was high but resettlement assessments and plans were poor. There was little evidence of prisoners receiving help in finding accommodation or employment, or assistance with debt and financial problems on release. Work with families was very good. **Outcome for prisoners were not sufficiently good against this healthy prison test.***

S47 *At the last inspection in 2014 we found that outcomes for prisoners in HMP Bedford were not sufficiently good against this healthy prison test. We made 12 recommendations in the area of resettlement. At this follow-up inspection we found that three of the recommendations had been achieved, one had been partially achieved and eight had not been achieved.*

- S48 Regular and well-attended meetings provided some oversight of reducing reoffending but strategic management was limited by the lack of an up-to-date strategy, action plan and analysis of needs.
- S49 The level of cross-deployment of uniformed offender supervisors was very high, which had a negative impact on the quality of offender management, although the recent introduction of more probation officers was a positive step forward and provided the opportunity to review delivery. Contact between prisoners and uniformed offender supervisors was too often infrequent. More regular contact in higher-risk cases managed by the onsite National

- Probation Service staff provided prisoners with a better focus and motivation to achieve sentence planning targets.
- S50 The backlog of offender assessment system (OASys) assessments was relatively small but this masked the fact that far too many prisoners were transferred on without one. The quality of OASys assessments was mixed, with those completed by probation staff of a better quality than those completed by uniformed offender supervisors. Few prisoners applied for home detention curfew and too many were not considered in time or were released late.
- S51 The screening of new prisoners for public protection issues and to identify contact restrictions was mostly good but in a small number of cases further checks were required. When risks were identified, contact restrictions were applied promptly and appropriately. The role and effectiveness of the interdepartmental risk management team had improved considerably and multi-agency public protection arrangements (MAPPA) levels were confirmed well ahead of release, which promoted the prison's involvement in release planning. Information exchange between the community rehabilitation company (CRC) and the OMU was poor, which potentially hindered good risk management.
- S52 Categorisation reviews were up to date. Attention was given to progressive moves in some cases but far too many prisoners were moved on without an assessment or sentence plan to inform the suitability of their move. Despite good efforts to transfer category B prisoners, including sex offenders, to more appropriate prisons, the lack of places nationally meant that some stayed at the establishment for too long.
- S53 The demand for resettlement services was high, with an average of 90 prisoners released a month. Delays and difficulties in implementing the CRC arrangements had led to problems in delivering some resettlement services, which were weak. Resettlement assessments were not thorough enough, and in some cases risk-of-harm issues were not taken into account when providing help. Pre-release resettlement reviews were poor as they did not include the prisoner or result in a meaningful release plan.
- S54 In our survey, about a quarter of prisoners said that they had arrived with housing problems and money worries. The CRC was unable to provide accurate data to identify the number of prisoners released homeless, or assess the impact of accommodation support or the debt advice provided.
- S55 Too few prisoners benefited from timely interventions to support their employment, training or education on release. A skills action plan was not undertaken for all new arrivals to develop their employability skills. Far too few prisoners attended the employability course or had assistance in preparing a CV, and the virtual campus (internet access for prisoners to community education, training and employment opportunities) was not used to support job search. There were no reliable data to establish the number of prisoners released into employment or training on release.
- S56 Health care arrangements for prisoners due for release were good. Planning for those with enduring mental health needs was timely and effective, and appropriate liaison with community services ensured continuity of care. For prisoners with substance misuse issues, the psychosocial support team appropriately prioritised prisoners before release and provided good throughcare links to local community drug and alcohol services to ensure treatment continuation.
- S57 Provision for the children and families of prisoners was good. A range of parenting and family activities was run and high-quality family visits were available weekly. Outreach workers gave support to the children and families of prisoners in the community. The visits environment

was reasonable, with plans to improve well under way. Visitors said that staff were friendly and polite but they experienced difficulties in booking visits by telephone and email.

- S58 There was a promising range of modules to challenge attitudes, thinking and behaviour, including those provided by the CRC. However, the targeting of prisoners was not sufficiently robust and completion rates were too low.

## Main concerns and recommendations

- S59 Concern: The numbers of violent incidents had increased and were higher than at similar prisons. The prison had not undertaken adequate investigation or analysis of the incidents to understand the causes and, as a result, few actions had been taken to make the prison safer.

**Recommendation: The causes of violent incidents should be established, and actions identified and implemented to make the prison safer.**

- S60 Concern: Over half of prisoners said that drugs were easily available, and the number who said that they had developed a drug problem in the prison had risen considerably. Security intelligence pointed to NPS being prevalent. Despite the threat posed by drug use and availability, the prison had not developed a supply reduction strategy or action plan to address this significant threat.

**Recommendation: A comprehensive drug supply reduction strategy and action plan should be implemented.**

- S61 Concern: Living conditions were poor for too many prisoners. Many cells had missing or broken furniture, and prisoners struggled to get hold of basic essentials such as clean clothing, bedding and cleaning materials. Many of these issues resulted from failings in the nationally agreed maintenance and stores contracts.

**Recommendation: Cells should be fully furnished and equipped, and prisoners should be provided with adequate clothing, bedding and cleaning materials.**

- S62 Concern: There were sufficient learning and skills and work places for all prisoners to be employed at least part time but too many were allocated full-time employment, leaving a substantial number of prisoners without any activity at all. Those without an activity had little time, around three hours, unlocked each day.

**Recommendation: All prisoners should have access to learning and skills and work activities on at least a part-time basis and should be unlocked for the period of the core day when they are not at work.**

- S63 Concern: The demand for resettlement services was high but the CRC was failing to deliver effective resettlement provision. The quality of assessments on arrival, resettlement plans and reviews before release was poor. The CRC was unable to provide data to identify the number of prisoners released homeless or assess the impact of the accommodation support or debt advice provided.

**Recommendation: The quality of community rehabilitation company (CRC) resettlement assessment, planning and support should be improved. The effectiveness of the CRC's accommodation, debt and financial advice should be measured, with the aim of reducing the number of prisoners being released homeless and/or in debt.**

# Section 1. Safety

## Courts, escorts and transfers

### Expected outcomes:

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

- I.1 Most prisoners had short journeys to the prison, and in our survey most respondents said that they had been treated well by escort staff. The vans we inspected were reasonably clean. Prisoners were not handcuffed on disembarkation. The person escort records we examined had been completed fully and risk issues identified appropriately.
- I.2 Many prisoners told us of long waits in courts after their hearings. In our survey, 77% of respondents said that their property had arrived at the same time as themselves but a large number of submitted complaints related to missing property following transfer on from the establishment (see also paragraph 2.41).
- I.3 There was good use of video-link facilities, which reduced the number of prisoners going to court.

### Recommendations

- I.4 **Prisoners should be transferred to the prison shortly after the conclusion of their court appearance, and should be given information about where they are going.** (Repeated recommendation I.5)
- I.5 **All personal property should be sent with prisoners when transferred on from the establishment.**

## 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.6 The physical condition, cleanliness and layout of the reception area were poor. Holding rooms were mostly bare, with little information on display, and nothing in foreign languages (see also paragraph 2.28 and recommendation 2.34). There was little privacy for sensitive interviews such as cell sharing risk assessments, and the door of the health care room was left open during interviews, compromising privacy (see also paragraph 2.59).
- I.7 Although reception processes were efficient, large numbers of prisoners arrived at the same time after courts closed. This meant that some prisoners waited up to four hours in reception, and in our survey only 37% of prisoners said that they had been in reception for less than two hours.
- I.8 We observed a friendly and welcoming approach from reception staff and in our survey, more prisoners than elsewhere said they were treated well in reception. Prisoners met peer

mentors, some of whom were Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), who helped them to complete documentation, served meals and answered questions. New arrivals could have a shower on request and, subject to security concerns, were all offered a free telephone call. They were given reception packs (a grocery pack which usually contains basic food and drink items such as tea, milk, sugar and sweets/tobacco).

- 1.9** New arrivals were provided with a set of eating utensils, toiletries, bedding and prison clothing. However, there were difficulties in meeting demand because the prison had either run out or because items were not released efficiently from the prison stores or the laundry for supply to new receptions (see section on residential units).
- 1.10** A first night officer conducted a private interview with new arrivals which covered safety and vulnerability issues. Telephone interpreting services were available but not always used (see recommendation 2.34).
- 1.11** The allocation of new arrivals to first night accommodation was poorly managed. Although there was a wing identified as the first night centre (C2 landing), it mostly accommodated prisoners waiting for a place elsewhere in the prison; this meant that new prisoners were placed wherever a space was available throughout the prison. Many new arrivals we spoke to told us that their cell had been dirty and lacked essential equipment such as kettles and pillows. In our survey, fewer prisoners than at the time of the previous inspection said that they had felt safe on their first night (66% versus 74%). However, night staff were informed about prisoners who had not been in prison before and made hourly checks on them.
- 1.12** Induction started on the day after arrival for most prisoners, and in our survey more prisoners than elsewhere said that they had attended it (88% versus 74%). It was a poorly delivered presentation, involving a peer mentor reading out some basic information. However, there was an opportunity for prisoners to ask questions and there was good interaction with the peer mentor. There was nothing available in foreign languages (see also paragraph 2.28 and recommendation 2.34)

## Recommendations

- 1.13 Reception processes should be conducted in a clean and comfortable environment, with adequate privacy for confidential interviews.**
- 1.14 All new arrivals should be located in a clean, fully equipped cell and be provided with sufficient clothing and bedding.**

## 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.**

- 1.15** In our survey, the numbers of prisoners who said that they had felt unsafe at the establishment at some time, or currently felt unsafe, were similar to those at comparable prisons. However, considerably more prisoners than at the time of the previous inspection said that they had felt unsafe at the establishment at some time (52% versus 33%) and currently felt unsafe (24% versus 14%). Levels of violence, including fights and assaults

between prisoners, had risen and were higher than at similar prisons. Assaults on staff had risen the most.

- I.16** The safer custody team had good knowledge of the occurrence and type of violent incidents through a daily meeting with security staff which reconciled information from security reports, adjudications, daily briefings and observation books. This information was available to the monthly safer custody meetings and some ad-hoc actions were agreed. However, too many subsequent investigations into violent incidents were superficial and did not elucidate the fundamental reasons for them, so it had not been possible to identify underlying causes such as gang affiliations, drug use, extortion or debt, which could have led to more strategic action to make the prison safer (see main recommendation S59).
- I.17** A violence reduction strategy had been introduced in early 2016. This laid out a response to bullying and violent behaviour which involved monitoring and restricting perpetrators, and planned support for victims. However, in reality the response was ineffective and we found that most monitoring records lacked behaviour targets or any record of observations. The response to serious or continued violent behaviour was to apply incentives and earned privileges (IEP) sanctions but, again, meaningful targets relating to the reasons for bullying or violent behaviour were not recorded and there were no records of how well the prisoner behaved while on the basic level of the IEP scheme. Victim support processes were equally weak, lacking detailed support plans and monitoring. The prison had not developed any interventions to be used with violent and bullying prisoners to address their behaviour. There was no specific violence reduction strategy for young adults, even though they were over-represented in violent incidents (see also paragraphs I.46 and 2.31 and main recommendation S59).
- I.18** The management of vulnerable prisoners was mixed. The vulnerable prisoner wing (F wing) accommodated 38, keeping them safe, with a good level of care and access to a reasonable, if limited, regime of activities. At the time of the inspection, there were nine prisoners waiting for a place on this wing who were currently accommodated in the health centre or on the first night wing. These prisoners could attend F wing for association and activities. A third group of vulnerable prisoners comprised those who did not feel safe on the main wings, and 12 such individuals were located on the drug recovery wing. Although they were kept safe and had more time out of their cells than mainstream prisoners, most of them had a restricted regime.

## Recommendation

- I.19** **The prison should introduce interventions to help prisoners change negative, violent or antisocial behaviour.** (Repeated recommendation I.24)

## 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.20** The number of self-harm incidents had increased dramatically since the previous inspection, almost doubling from 67 to 121 in the previous six months, and was much higher than at similar prisons. The number of individual prisoners self-harming had risen from 56 to 96 in the previous six months. As a result, the number of assessment, care in custody and

teamwork (ACCT) case management documents opened was also much higher than at similar prisons and than at the time of the previous inspection. The reasons for this large increase were not well understood by the prison.

- I.21 The quality of ACCT management was poor in too many cases. Too many assessments were brief and care plans did not always include all relevant actions. Attendance at reviews, especially by mental health nurses, was inconsistent, reviews were chaired by various managers and ongoing issues were not picked up in care plans. Too many contacts were observational and did not reflect engagement with the prisoner.
- I.22 There had been two self-inflicted deaths and a further one that was apparently self-inflicted since the previous inspection. Action plans had been developed in response to the Prisons and Probation Ombudsman reports that had been received, but actions from recommendations concerning the quality of ACCT management, attendance by mental health staff at ACCT reviews and robust procedures for identifying risk during reception processes had not been embedded in practice.
- I.23 A weekly complex needs meeting considering the management of prisoners who posed a risk to other prisoners, staff and themselves was a good initiative which promoted continuing case management.
- I.24 There were sufficient Listeners and access to them had improved. In our survey, more prisoners than at comparator prisons said that they could speak to a Listener at any time (66% versus 52%), although far fewer foreign national than British prisoners said this (48% versus 71%). Listeners said that there were no problems in accessing prisoners requiring emotional support and that they were well supported by the prison.

## Recommendations

- I.25 **The management of prisoners subject to assessment, care in custody and teamwork (ACCT) procedures should ensure that all risks are identified, actions to reduce risk are planned, all staff who can contribute to the process are involved, there is consistent management of cases and that interaction with the prisoner makes a meaningful contribution to keeping him safe.**
- I.26 **Action taken in response to recommendations from the Prisons and Probation Ombudsman investigations of deaths in custody should be kept under review to ensure that improvements in practice are embedded.**

## 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 The prison did not have an adult safeguarding policy or a protocol with local social services, and was not represented on the local adult safeguarding board. Contact with this board had lapsed.

<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.28** Staff did not understand adult safeguarding concepts and had not been trained in identifying prisoners who were at risk or in making referrals to safeguarding teams.

## Recommendation

- I.29** 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.

## 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** Links and information sharing between security and other departments, particularly safer custody, were good. Intelligence gathering from across the prison was reasonable, with over 350 information reports received monthly. Security information was analysed quickly and well, and reflected the current threats, which comprised drugs, including 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), mobile phones and violence. However, the necessary security measures to tackle these major threats facing the prison were not in place. There was no consolidated and coordinated approach to managing the risks, with no drug supply reduction strategy or plan aimed at reducing the entry of drugs and mobile phones, and no action plan to reduce levels of violence (see main recommendation S59). Drug target searching was well behind schedule. Uncompleted searches dated back several months, few illicit substances had been found and drug testing arrangements were poor (see below).
- I.31** In our survey, more than half of prisoners said that it was easy to get illegal drugs in the prison, which was almost twice as many as at the time of the previous inspection and considerably more than the comparator. Fourteen per cent said that they had developed a drug problem since they had been at the prison, compared with the local prison comparator of 10% and 4% at the time of the previous inspection. Intelligence pointed to NPS being prevalent in the prison. The availability and use of NPS and their impact on prisoner health and the safety of the prison were a serious concern. Many adjudications and incidents involving the use of force, and a number of health emergencies were attributed to the use of these drugs.
- I.32** The random mandatory drug testing (MDT) positive rate averaged 9.7% in the previous six months, which showed an upward trend but was similar to that at other local prisons. However, this was not a true reflection of the levels of drug use as NPS were currently undetectable. Few suspicion tests were completed, with only 10 in the previous six months. The MDT programme was poorly staffed and there were delays in processing results. The testing suite doubled as the MDT office and did not have a sterile searching area.
- I.33** The prison was developing a better working relationship with the local police. A designated police intelligence officer provided support with managing prisoners who were members of organised crime groups, and carried out debriefs with prisoners who were subjects of current intelligence.

- I.34** At the time of the inspection, there were two prisoners subject to closed visits and eight banned visitors. All of those who had been or were currently on closed visits had been placed under the restrictions for visits-related illicit activity. Most did not remain under these restrictions for more than a month.

## Recommendations

- I.35** **All target searching should be completed and the mandatory drug testing (MDT) programme should be adequately resourced to undertake all required testing on time.**
- I.36** **The MDT suite should provide a sterile testing area.**

## 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.37** The current IEP policy dated from 2013 and had not been reviewed, and there was no evidence of quality assurance to ensure that the scheme was applied fairly and effectively.
- I.38** Around half of prisoners were on the standard level, 13% were enhanced, 7% were on the basic level and 32% were on the entry level. Case notes showed that over 50 prisoners were still on the entry level, even though they had been at the prison for longer than the published 14-day period, and some had mistakenly been placed on this level when transferring in from other prisons.
- I.39** In our survey, the proportion of prisoners who said that they had been treated fairly under the IEP scheme was similar to that at comparator prisons but lower than at the time of the previous inspection. Far fewer respondents than elsewhere and than at the time of the previous inspection said that the scheme encouraged good behaviour and we found that the opportunities to achieve the highest level were too limited.
- I.40** Targets for those on the basic level were largely standardised and not individually focused. Reviews generally took place on time and few prisoners remained on the basic level for long periods.

## Recommendation

- I.41** **There should be an effective quality assurance scheme to ensure that the application of incentives and earned privileges (IEP) is fair and effective.** (Repeated recommendation I.55)

<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.**

### Disciplinary procedures

- I.42** The number of adjudications conducted had increased sharply and was far higher than at comparator prisons. The main charges were for assaults, fights and unauthorised articles. Adjudications were monitored at the segregation monitoring and review group meetings, although these meetings had not been held consistently in recent months. The deputy governor carried out quality assurance checks on 10% of all adjudications.
- I.43** Records of adjudications showed that they were conducted fairly and in line with requirements but some charges could have been dealt with more appropriately using the IEP system. Punishments were proportionate and in accordance with the published tariff.

### The use of force

- I.44** The number of incidents involving the use of force had risen considerably, with 104 incidents in the previous six months, which was higher than at similar prisons. In the previous three months, the prison had collected data on the use of restraint as a result of NPS use and had identified 10 incidents in which NPS had been a contributory factor. The quality and completion of written records of incidents had improved and those we examined were generally detailed and showed that force had been used as a last resort and was justified.
- I.45** Oversight of the use of force was poor, with only one meeting in the previous six months. Not all planned incidents were video-recorded or reviewed. Three incidents involving the drawing of batons had taken place in the previous six months but were only just being investigated at the time of the inspection. The one video recording we were able to view showed a poorly managed incident and we were not assured that the use of force had been necessary.
- I.46** Young people represented only 4% of the population but accounted for almost 20% of incidents in which force was used. However, neither this nor the perceptions of Muslim prisoners, who were also overrepresented in the use of force, had been investigated (see also paragraphs 2.27 and 2.31).
- I.47** Special accommodation had been used on four occasions during the previous six months. Completion of documentation relating to its use had improved and prisoners did not remain in the cell for longer than necessary.

### Recommendation

- I.48** **Managerial oversight of the use of force should be improved. Patterns and trends should be identified and acted on, to ensure that force is always justified and proportionate, including for all minority groups.**

## Segregation

- I.49** Use of segregation had reduced but was still slightly higher than at comparator prisons. Segregation was used mostly for prisoners awaiting adjudication, which was inappropriate. A total of 131 prisoners had been segregated during the previous six months and most had returned to normal location within the prison. Only six prisoners had remained on the unit for over 20 days in the previous six months. Reviews were timely and attended by a multidisciplinary team, and exit planning and the use of compacts to manage poor behaviour had been introduced recently and were showing early signs of promise.
- I.50** The segregation unit environment was poor and the exercise yard cage-like. Cells on the unit were cleaner than at the time of the previous inspection but cells on the B2 landing used as an overspill for the unit were dirty, with little furniture. The regime on the unit was very limited, and even more so for those on B2, with little access to off-unit activities. Some prisoners were able to have time in the open air together and some attended corporate worship following risk assessments.
- I.51** Staff–prisoner relationships on the unit were good and staff knew the prisoners in their care well. Staff treated prisoners well and tailored compacts and interactions to meet varied and individual needs.
- I.52** Prisoners on open ACCT documents were rarely located on the unit; when this had occurred, there was a reasonable explanation for why segregation had been necessary.

## Recommendations

- I.53** **Action should be taken to reducing the high use of segregation for prisoners awaiting adjudication.**
- I.54** **The regime on the segregation unit should provide access to off-unit activities and association with others, when risk assessments permit.**

## 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.55** The substance misuse policy document was out of date and, while there was an action plan focusing on some aspects of service provision, supply reduction measures were not included (see main recommendation S60). Drug strategy meetings took place regularly but the security department was not represented.
- I.56** In our survey, fewer prisoners with a drug or alcohol problem than at comparator establishments and than at the time of the previous inspection said that they had found the support they had received while at the prison helpful (62% versus 77% and 82%, respectively).
- I.57** Owing to staff shortages, the psychosocial support provided by Westminster Drug Project (WDP) had been extremely limited. Waiting lists for assessment were long, with 90 prisoners waiting to be assessed at the time of the inspection, and although the team appropriately prioritised urgent referrals, some prisoners waited up to four weeks to be seen.

- I.58** No group-work programmes had been delivered in the previous three months and only two recovery champions were in post. Prisoners were unable to access either Alcoholics Anonymous or Narcotics Anonymous groups, and the designated drug recovery unit on E wing no longer operated.
- I.59** An average of 100 prisoners received opiate substitute treatment at any one time and 99 had completed alcohol detoxification in the previous six months. Clinical treatment started promptly but not all prisoners undergoing detoxification or stabilisation were located on D wing, the prison's designated drug and alcohol treatment unit. On one day during the inspection, there was space for only two out of seven new arrivals, while over a third of the wing population had no clinical need.
- I.60** Drug- and alcohol-dependent prisoners on general location were not monitored at night, and night-time observations on D wing were inconsistent; these practices were unsafe and put prisoners at risk.
- I.61** Controlled drug administration on D wing was safe and supervised appropriately. Prescribing regimes were flexible and based on individual need, and 37% of opiate-dependent prisoners were reducing their dosage. Clinical reviews took place regularly but were not conducted jointly with WDP staff. A dual diagnosis service and pathway for those with co-existing mental health and substance misuse problems was lacking.

## Recommendations

- I.62** Prisoners with drug and/or alcohol problems should have prompt access to a range of psychosocial support services, and psychosocial interventions should be integrated with clinical treatment.
- I.63** Prisoners requiring stabilisation and detoxification should be located on the designated treatment wing, and appropriate 24-hour observation and monitoring should take place.
- I.64** A dual diagnosis service and pathway should be introduced for prisoners who experience mental health and substance-related problems.



## 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 External areas of the prison were mostly clean, litter free and well maintained. Communal areas on the wings were reasonable at ground level but were dusty and grubby on the upper landings and stairways.
- 2.2 Many prisoners lived in old, overcrowded and cramped conditions. Most of the in-cell toilets had inadequate screening, hardly any cells contained enough furniture and almost all of it was damaged. The prison had made efforts to replace it, and during the inspection around 30 new lockers arrived; however, this was far too few and there was no indication when more would arrive under the national contract (see main recommendation S61). Although there was a decorating programme in operation, too many cells had graffiti on walls and fittings.
- 2.3 In our survey, prisoners were much more negative than at the time of the previous inspection about access to clothing, bedding, cleaning materials, showers and response times to cell call bells. There was a critical shortage of clothing, with many prisoners having nothing but the clothes they stood up in. New receptions were issued with only one set of clothes, and for much of the inspection there were no towels available. We witnessed prisoners 'buying' towels and other equipment from other prisoners. There were boxes containing some new clothing and towels in the main clothing store but systems to replenish the reception store were poor (see main recommendation S61).
- 2.4 There were small wing laundries and prisoners could have their clothes washed once a week. Despite this, and partly due to a lack of alternative clothing, many prisoners resorted to washing their own clothes in-cell and we saw home-made washing lines with damp clothing hanging in many cells.
- 2.5 Access to the recently refurbished showers was good but they were only cleaned in the mornings and many were littered and dirty for the remainder of the day. Some showers lacked privacy, with no screening in place.
- 2.6 The applications system had deteriorated and prisoners we spoke to had little faith in it. Processes differed across the prison, there was no tracking system and many applications boxes were damaged and not secure.
- 2.7 Too many telephones were out of order. Four of the nine telephones on A wing did not work and neither of the telephones on E wing were in working order. Access to incoming mail was good, with no delays. However, prisoners on some wings raised concerns over damaged mailboxes, which were not secure. Families and friends could also post letters to the prison at the gate.
- 2.8 Access to stored property was reasonable and we found little evidence of any delays, with the exception of items being held at police stations and electrical items waiting to be tested.

## Recommendations

- 2.9 All prisoners should have adequate access to working telephones.** (Repeated recommendation 2.12)
- 2.10 Showers should be adequately screened.**

## 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.**

- 2.11** In our survey, most prisoners, and more than at similar prisons (79% versus 72%), said that staff treated them respectfully and, despite the lack of a formal personal officer scheme, many said that there was a member of staff they could turn to for help. The interactions we observed throughout the inspection were respectful and often helpful. However, we saw some poor behaviour going unchallenged, including smoking in communal areas and damage to in-cell prison property, and there was a lack of consistency in applying the offensive display policy.
- 2.12** Our review of electronic case notes showed that the quality and frequency of entries were variable. In most cases, there were long periods with no wing officer comments and few management checks.
- 2.13** The prisoner consultation council had met only once in the previous six months. Attendance was limited and there was no evidence of subsequent actions being taken to address the issues raised.

## Recommendations

- 2.14 Wing staff should make regular entries in all prisoner case notes, which show evidence of interaction.**
- 2.15 There should be regular opportunities for prisoner consultation, which should be recorded and show evidence of action taken to address concerns.**

## 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.**

### Strategic management

- 2.16** The overall strategic management of equality and diversity had deteriorated but there was evidence of some improved structures. The equality and diversity policy did not contain sufficient detail to inform or improve the work carried out for each of the protected characteristics. Equality impact assessments were no longer in place. The prison did not have a dedicated equality officer; this work was assigned each day to a different officer and led to inconsistencies in the quality and delivery of the work.
- 2.17** There had been evidence of a commitment to improve the management of equality work since January 2016. A dedicated equality administrator had been appointed to raise the profile of this work and implement new processes. Individual senior management team members had been allocated to lead on the development of work to support some of the protected characteristics, and the governor now chaired the monthly equality action team meeting.
- 2.18** The equality monitoring tool was used for each of the protected characteristics. However, when outcomes were poor and potential discrimination was identified, no specific action was taken to address the concerns (see below).
- 2.19** Discrimination incident report forms (DIRFs) were not widely available on all wings and some staff were unaware of their purpose. Only eight DIRFs had been submitted in the previous six months, far fewer than at comparator prisons. The quality of investigations into DIRFs was poor and often did not address the issues raised.
- 2.20** The recruitment of five new prisoner equality representatives was a positive initiative but not yet embedded. The appointment of a peer champion to coordinate this team was helpful but it was too soon to assess the impact of this.
- 2.21** Information and support forums had recently been introduced for some protected characteristics, led by members of the senior management team, but it was too soon to assess their effectiveness, and several of them had not been convened as planned.

### Recommendations

- 2.22 Policies and action planning for each minority group should be updated and tailored to the specific needs of the prison. (Repeated recommendation 2.26)**

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

- 2.23 Prisoners with protected characteristics should have access to a consultation forum to provide support and address concerns.**
- 2.24 Discrimination incident report forms should be available on all wings, and the quality of investigations into complaints should be improved and show evidence of impartial and thorough investigation which addresses the concerns raised.**
- 2.25 Potential discrimination identified in the equality monitoring data should be fully investigated and action taken to address the issues.**

## Protected characteristics

- 2.26** Almost a third of prisoners were from a black and minority ethnic background. In our survey, although this group reported similarly to white prisoners, they were more negative in some key areas. For example, on arrival, fewer black and minority ethnic than white prisoners said that they had had access to a member of the health services team, or that they had been able to speak to a Listener (a prisoner trained by the Samaritans to provide confidential emotional support to fellow prisoners). The prison's equality monitoring data indicated that black and minority ethnic prisoners were held on the segregation unit for more days than other prisoners but there was little evidence of any action taken to understand or address this. A recent race forum had identified some tensions between Traveller prisoners and the rest of the population, and some actions had been taken to investigate this.
- 2.27** Eighteen per cent of the population were Muslim, and in our survey they reported similarly to non-Muslim prisoners. Far more Muslim than non-Muslim prisoners said that their religious beliefs were respected (88% versus 59%). However, for two consecutive quarters, the use of force against Muslim prisoners took place more often than for other religious groups, but this had not been fully investigated.
- 2.28** Foreign national prisoners had daily access to Home Office immigration staff but were not always given sufficient notice of the authority to detain them as immigration detainees beyond their prison sentence. There was little use of professional telephone interpreting services and we were not assured that these services were used regularly when needed, other than by health services staff (see also paragraphs 1.10 and 2.59). There was no written translated material available in reception or during induction, which had the potential to leave non-English-speaking prisoners isolated and confused, and there was no support forum for foreign national prisoners. In our survey, foreign national prisoners reported more negatively than British prisoners on a range of indicators. For example, fewer said that they had felt safe on their first night (48% versus 69%), that they could access a Listener (48% versus 71%) or that there was a member of staff they could turn to if they had a problem (53% versus 71%).
- 2.29** At the time of the inspection, over a quarter of prisoners were recorded as having a disability. In our survey, prisoners with a disability reported more negatively than those without on a range of issues; for example, more said that they had ever felt unsafe (69% versus 47%) and that they had been victimised by other prisoners (52% compared to 21%). The prison's equality monitoring data showed that prisoners with a disability were overrepresented in incidents of use of force but this had not been addressed. Provision for this group was mixed and some needs were not met; for example, some prisoners with limited mobility did not have full access to the regime. Most showers were accessible only by stairs, and only one adapted cell was available. There were no care plans on residential wings and no formal peer carer scheme (see also paragraph 2.55).

- 2.30** Support for older prisoners was poor. There had been only one forum in the previous six months and this had been poorly attended. There were no links with any specialist support agencies and no specific activities targeting this group, many of whom were locked in their cells during the day, with limited access to the regime.
- 2.31** Young people were disproportionately represented in disciplinary matters, including the use of restraint, and this had not been investigated. There was no specific provision for them and the 'time out' befriending and support service for this group was no longer in place.
- 2.32** There was only one recorded gay prisoner and there were no transgender prisoners at the time of the inspection. There was no specific support for gay prisoners but there was evidence of individually tailored compacts for transgender prisoners who had previously been at the establishment.

## Recommendations

- 2.33** **The Home Office should serve all decisions to detain notices to prisoners at least one month before the end of their sentence.** (Repeated recommendation 2.41)
- 2.34** **Staff should make greater use of the telephone interpreting service to communicate with foreign national prisoners with little English, and up-to-date prison information and notices, including reception material, should be translated into relevant languages and made freely available to prisoners.** (Repeated recommendation 2.40)
- 2.35** **Support and care for older prisoners and those with disabilities should be improved, including wing-based care planning.**

## 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** In our survey, more prisoners than at other local prisons said that their religious beliefs were respected (64% versus 48%), and that it was easy or very easy to attend religious services (53% versus 44%).
- 2.37** Faith facilities were reasonable, with a large, well-equipped chapel that could be adapted for use by different faith groups. Prisoners with limited mobility could not access the chapel but were visited in their cells by members of the chaplaincy team.
- 2.38** At the time of the inspection, there were many vacancies within the small chaplaincy team, which left the team stretched, had an impact on the workload of the remaining chaplains and limited the provision available to prisoners. Although chaplains made daily visits to new prisoners and those in the health centre and on the segregation unit, prisoners told us that they were not always visible on the residential units. The 'through-the-gate' resettlement service was no longer delivered as funding had been withdrawn. There was no nominated family liaison officer based in the chaplaincy but contact with families and bereavement support were provided on request.

## 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.**

- 2.39** A total of 590 complaints had been submitted in the previous six months, which was low compared with the numbers at comparator prisons. In our survey, more prisoners than elsewhere said that complaints were dealt with fairly. However, the timeliness of responses was inadequate. Some improvement had been seen recently but too many replies were still late.
- 2.40** The governor examined 10% of all complaints, and written feedback about both the complaint and the response was given to prisoners. The responses we looked at were variable, with some that were respectful and detailed, and others that were inadequate and did not answer all the issues raised.
- 2.41** Some analysis of complaints was undertaken but no trends or patterns had been identified or addressed. In our own analysis, the main areas of concern for prisoners were finance (particularly concerning prison shop and residential matters) and not receiving property. Complaints about staff were dealt with appropriately and investigations were commissioned when needed.

### Recommendation

- 2.42** **Complaints should be analysed regularly to identify trends and address problems.** (Repeated recommendation 2.54)

## 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.**

- 2.43** Prisoners did not have access to trained legal services staff but limited support was provided by offender supervisors. However, prisoners were not routinely offered access to bail accommodation advice or information. In our survey, only 17% said that it was easy to get bail information and only eight referrals had been made for bail accommodation in the year to date.
- 2.44** Legal visits took place daily and there was a wide range of legal textbooks in the library.

### Recommendation

- 2.45** **All remand prisoners should receive information about bail, and bail application should be actively pursued.**

## 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.**

**2.46** 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. A number of areas have been identified that require improvement with subsequent notices issued by the CQC which have been detailed within Appendix III of this report.

### Governance arrangements

**2.47** Overall, the provision of health care was reasonably good. Health services had been provided by Northamptonshire Healthcare NHS Foundation Trust (NHFT) since April 2016. Well-attended quarterly partnership board meetings covered essential areas. The health and social needs assessment completed in September 2015 informed service delivery.

**2.48** Health services were provided 24 hours a day, with two nurses available during the night. During the day, services were provided by a general medical team, an integrated mental health team and a substance misuse team. Experienced clinical managers worked hard to drive effective service delivery and improvement. The service had some staff vacancies, which were managed by using regular agency and bank staff.

**2.49** There was a good overview of serious incidents, and lessons learnt were shared with staff. There was no dedicated health forum but patient surveys had recently been introduced; it was too early to assess the impact of these.

**2.50** There was a confidential health care complaints system. The responses we sampled were mostly timely and respectful but some did not address the issues raised. There was no information available on the further action that prisoners could take if they were dissatisfied with the response to their complaint.

**2.51** The health centre had a range of rooms, where most clinical care and consultations took place, and an inpatient unit. Most of the wing-based treatment rooms were dirty and cluttered. Areas in the inpatient unit were also dirty, including toilets, floors and surfaces, with food left lying around. Infection control standards were not met and this compromised prisoner safety.

**2.52** A systematic approach was being undertaken to transfer to the policies of the new provider, and staff were working to an up-to-date safeguarding policy. Most staff had completed mandatory training and had reasonable access to managerial and clinical supervision and good informal support arrangements.

**2.53** Emergency equipment, including automated external defibrillators (AEDs), was placed strategically across the prison. We found a few out-of-date items, including checks for several oxygen cylinders. Some custody staff had received first-aid training and only eight had

<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>.

received AED training, but further training was planned. Ambulances were called promptly when needed.

- 2.54** Older prisoners received appropriate health checks and had access to some age-appropriate screening, and younger adults were offered chlamydia screening.
- 2.55** Since April 2015, with the implementation of the Care Act (2014), arrangements for social care assessments and care delivery had been in place but were not sufficiently promoted across the prison. Only two referrals had been made. There was access to occupational therapy equipment and to mobility and health aids.
- 2.56** Health promotion literature was available in a range of languages. Smoking cessation support and access to immunisations and screening for blood-borne viruses were good. Barrier protection was available from health services staff and this was well advertised.

## Recommendations

- 2.57** **All treatment rooms and the inpatient unit should be cleaned to an NHS-equivalent standard and should be fully compliant with infection control standards.**
- 2.58** **The emergency resuscitation equipment should be in good order, with an effective monitoring system in place.**

## Delivery of care (physical health)

- 2.59** During reception, prisoners received an initial health screening by a registered nurse and appropriate referrals were made. Prisoners also had access to a GP, substance misuse nurse and a mental health nurse if required. Relevant information from the court and the person escort record were reviewed and consent was requested for access to community records. During the assessments we observed, the door to the health care room was left open, which compromised confidentiality (see also paragraph 1.6 and recommendation 1.13). Professional telephone interpreting was available and used by health services staff when needed.
- 2.60** Secondary health screening was completed on the day after arrival. However, this took place in a corridor; although a screen was placed around the area to try to improve the situation, it still breached prisoners' privacy and dignity.
- 2.61** There was an appropriate range of primary care services, and waiting times were acceptable, apart from for the dentist. A weekly complex pain clinic was held by the physiotherapist and GP, which was a good initiative. Prisoners had access to 'on the day' urgent GP appointments, and out-of-hours GP cover was provided to the same level as in the community.
- 2.62** Nurses conducted an initial triage of minor ailments on the wings. Life-long conditions were well managed, with an appropriate range of nurse-led clinics. Some external hospital visits had been rearranged for a variety of reasons, including a lack of custody escort staff and also incidents at the prison necessitating emergency care, but this was monitored and well managed.
- 2.63** The 11-bed inpatient unit was used for prisoners with physical and mental health needs but there was no operational policy to outline its function and it was sometimes used for those without a clinical need. The care provided was mostly effective, with good care planning for

most, but we had concerns about the cleanliness of the unit and about certain aspects of care, including the lack of a risk assessment for the use of bedrails, which meant that not all health needs were addressed, and put patients at risk.

## Recommendations

- 2.64 Health screening should take place confidentially, in an appropriate, safe area that promotes privacy and dignity.**
- 2.65 The inpatient unit should only accommodate prisoners with identified clinical needs and its role should be clearly defined, with a consistent approach towards risk assessment and care planning.**

## Pharmacy

- 2.66** Lloyd's had provided pharmacy services since April 2016. Medicines were supplied to prisoners on the main wings from a hatch, which was unsuitable as they could not easily hear what was being said to them. The queue was managed efficiently. The pharmacy team administered medicines, and a pharmacist was present on most days. Medicines were administered four times a day, if required. Medicines were labelled correctly and patients were supplied with patient information leaflets and could ask the pharmacist about their medicines. However, we found some unlabelled loose foils of capsules stored with the medication chart, which was unsafe as they lacked the pertinent information.
- 2.67** Risk assessments for in-possession medicines were carried out in reception and were reviewed by pharmacy staff when they were made aware of changes in circumstances.
- 2.68** The rooms used for medicines administration were generally too small and the integrated drug treatment system room was not fit for purpose as prisoners received their medicines through a stable door, which was unsuitable and posed a safety risk. Methadone was measured by hand, which, although done efficiently, took more time than would have been the case with a pump. The controlled drug cupboard in this area was unusable, so methadone was transported around the prison every day, in a way that did not comply with safe practice. Other controlled drug cabinets were not rag-bolted to the wall or floor.
- 2.69** A methadone pump was used on D wing. This was cleaned and calibrated daily, and this was documented. Medicines could not be stored on F wing as the storage room used there had too high a temperature.
- 2.70** The use of the out-of-hours cupboard was not audited and stock checks did not balance. Refrigerator temperatures were not well audited, and some had been out of range for a few days. There was little provision for medicines to be supplied on demand, with patient group directions (enabling nurses to supply and administer prescription-only medicine) available only for some vaccines and for paracetamol, which was used rarely, which meant that patients in pain over a weekend had difficulty in obtaining pain relief.
- 2.71** There was a two-monthly medicines and therapeutics committee meeting. However, because of the recent change in the health care provider, there was a lack of current policies, and accountabilities between the health care and pharmacy providers were blurred.

## Recommendations

- 2.72** Rooms used for medicines administration should be fit for purpose, with adequate accessibility and storage requirements, and controlled drug storage issues should be resolved.
- 2.73** Methadone transport around the prison should be by two members of staff, with a radio, preferably when prisoners are in their cells.
- 2.74** A robust audit of refrigerator temperatures and use of the out-of-hours cupboard should be introduced.
- 2.75** Policies and documentation should be updated to reflect current practice, and accountability between the health care and pharmacy providers should be defined more clearly.

## Dentistry

- 2.76** No routine dental services had been provided for several weeks because of equipment failure and extended delays in the refurbishment of the dental room. This had resulted in cancellation of appointments and long waiting times for routine appointments. There were arrangements for prisoners to access emergency treatment.

## Recommendation

- 2.77** Prisoners should have prompt access to dental care and treatment, in a dental suite that is refurbished to ensure compliance with national required standards, with good maintenance arrangements.

## Delivery of care (mental health)

- 2.78** The integrated mental health team provided primary and secondary care and support to individuals with a range of mental health problems during the week. There was an on-call service at the weekend and a duty mental health nurse was available in the evenings.
- 2.79** The team comprised mental health nurses and a learning disability nurse, and a psychiatrist provided two sessions a week. At the time of the inspection, they were supporting 18 prisoners. Six of these had serious and enduring mental health problems and were managed effectively using the care programme approach.
- 2.80** There was an open referral system and a daily triage meeting each weekday, to prioritise cases. A weekly team meeting was held to discuss caseloads. The team aimed to see those with primary mental health needs within five days but a few people had waited for two weeks. Those with more urgent needs were prioritised and seen as soon as possible within 24 hours.
- 2.81** Mental health awareness training was available to custody staff, with 42% having received this in the previous three years, and further training was planned.
- 2.82** There were good working relationships between the mental health team and prison staff, and links with the substance misuse team were reasonable, but there was no formal dual diagnosis service (see paragraph 1.61 and recommendation 1.64).

- 2.83** Good support was provided to prisoners with mental health needs on the segregation unit. Attempts had been made to improve the assessment, care in custody and teamwork (ACCT) case management process, with the mental health team aiming to attend all first ACCT reviews scheduled before 3pm during the week. When they were unable to attend the review, a Mental Health Act assessment was conducted as soon as possible after the opening of the ACCT.
- 2.84** Prisoners with mild-to-moderate mental health needs received self-help guidance and some were referred to the GP. However, there were too few psychological interventions (and those provided were at a low level) and no therapeutic groups, and there was no access to counselling, although there were plans to introduce psychology services.
- 2.85** Too many prisoners experienced delays in being transferred to external mental health facilities. Between November 2015 and April 2016, six patients had been transferred, and five of these had exceeded the specified 14-day period, with the longest wait being eight weeks.

## Recommendations

- 2.86** Prisoners should have timely access to a full range of mental health support, including clinical psychology services, group interventions and counselling to meet the mental health needs of the population.
- 2.87** Transfers under the Mental Health Act to specialist secondary and tertiary mental health services should occur within the current Department of Health transfer time guidelines.

## 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.**

- 2.88** In our survey, far more prisoners than elsewhere said that the prison food was good (43% versus 21%). This view was echoed in our focus groups and throughout the inspection, and we found the food to be of a high standard. The menu cycle was varied and catered for all diets, including cultural and medical.
- 2.89** There was good consultation about the food, with regular surveys, and kitchen staff attended serveries at mealtimes to discuss any issues. This mitigated the lack of regular discussion at the infrequent prisoner council (see paragraph 2.13 and recommendation 2.15).
- 2.90** There was little opportunity to dine in association and most prisoners ate in their cells, sometimes next to an inadequately screened toilet (see paragraph 2.2). The meagre breakfast pack was issued at lunchtime on the day before it was to be eaten. Some meals were served too early.
- 2.91** Hygiene standards and catering arrangements in general were better than we normally see, both on the serveries and in the main kitchen. Some essential equipment had been out of action for too long as there were difficulties in getting repairs and replacements carried out under the national contract.

- 2.92** The previously good national vocational qualification training in food hygiene and catering had lapsed and prisoners could complete only basic food hygiene training.

### **Recommendation**

- 2.93** Breakfast should be of sufficient quantity and issued on the morning it is to be eaten.

## **Purchases**

### **Expected outcomes:**

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

- 2.94** Prisoners were offered a range of reception packs (grocery packs which usually contain basic food and drink items such as tea, milk, sugar and sweets) on arrival. Shop orders were submitted on Tuesdays but new arrivals could buy additional reception packs until they were able to place a full shop order, which helped to reduce the likelihood of debt.
- 2.95** The range of items on the prison shop list was adequate but consultation with prisoners was too infrequent.
- 2.96** Prisoners were able to order newspapers and magazines. They could also order larger goods from catalogues but were charged an administration fee.

### **Recommendation**

- 2.97** Prisoners should not be charged a fee 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 out of cell had reduced. A restricted regime had been introduced owing to staffing shortages, and this reduced the time unlocked by an hour a day. The small number of full-time workers could achieve around nine hours a day out of cell, but for part-time workers this was limited to five hours and the many unemployed could achieve around three and a half hours a day at best. Some prisoners, such as those on the basic level of the incentives and earned privileges scheme, were unlocked for as little as one hour a day (see main recommendation S62).
- 3.2** In our checks during the working day, we found an average of 41% of prisoners locked in cells, which was far higher than at the time of the previous inspection.
- 3.3** The regime often ran late and we saw regular and long delays in unlocking prisoners for activities/work and association. Exercise was offered daily but only for 30 minutes, and was not available to full-time workers.

#### Recommendation

- 3.4 All prisoners should have access to at least one hour of exercise in the open air each day.**

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<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.**

**3.5** 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>	Requires improvement
<i>Achievements of prisoners engaged in learning and skills and work:</i>	Good
<i>Quality of learning and skills and work provision, including the quality of teaching, training, learning and assessment:</i>	Requires improvement
<i>Personal development and behaviour:</i>	Requires improvement
<i>Leadership and management of learning and skills and work:</i>	Requires improvement

### Management of learning and skills and work

- 3.6** Managers from the prison had a close working relationship with the education provider, People Plus. They had a clear vision for the further development of purposeful work and education opportunities to meet the needs of the prison population. However, operational management required improvement and had yet to demonstrate a sufficient impact on improving learning and skills provision. The proportion of accredited qualifications had increased and there were plans to introduce further qualifications. However, the range and number of vocational qualifications available were too limited.
- 3.7** The prison's self-assessment and recently completed 'health check' were mostly accurate and planned actions were realistic. Managers had started to implement initiatives to address the main areas for development.
- 3.8** There were sufficient activity places for all prisoners to work at least part time. However, too many were allocated to full-time places, leaving around a fifth of prisoners unemployed. In addition, too many activity places were unallocated at the time of the inspection (see main recommendation S62).
- 3.9** The variety and range of education and work were appropriate but the quality of the education and vocational training offered by People Plus required improvement.
- 3.10** Teachers benefited from feedback following their teaching observations, but findings from the observations of teaching, learning and assessment did not focus teachers on ensuring that learners made sufficient progress, or help teachers to run effective learning sessions which

<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>.

stimulated and engaged prisoners in order to stretch their skills or further develop English, mathematics and wider employability skills.

## Provision of activities

- 3.11** The prison provided around 86 part-time education places, and around 400 prisoners had the opportunity to participate in work-related activity and developmental courses, such as first aid and manual handling. Waiting lists for work and training were short. The range of vocational learning opportunities was limited owing to restricted workshop and classroom space. While managers had worked hard to increase the number and range of work-related qualifications, contract negotiations had been slow and staff shortages in some areas had had an impact on the range and opportunities available.
- 3.12** The range of education courses was adequate to meet needs, including English, mathematics, information and communications technology, and music. This included a 'fast track' English entry level 3 qualification for prisoners looking to expedite their access to work. A range of short preparation-for-employment and pre-release courses was available, although poorly attended. There were too few higher-level qualifications to meet the needs of prisoners already qualified at entry level.
- 3.13** Too few prisoners had access to full qualifications (as opposed to units towards them), such as those in industrial cleaning and painting and decorating.
- 3.14** There were sufficient work opportunities for prisoners who wished to work in wing cleaning, laundry, small industrial workshops and kitchens, as well as other opportunities to work as orderlies within education, training and other aspects of prison functions. Access to work was restricted to those who had been assessed as above entry-level English. However, not enough work led to vocational qualifications.

## Recommendations

- 3.15** **Qualifications should be introduced which are at the correct level to complement prisoners' starting points and challenge them to reach their potential.**
- 3.16** **The opportunities for prisoners to gain accredited qualifications while at work should be increased.**

## Quality of provision

- 3.17** The standard of teaching, learning and assessment require improvement. Not enough teachers set high expectations of behaviour or planned activities aligned to prisoners' starting points and past achievements. Consequently, too many prisoners did not fulfil their potential. Most of the more-able prisoners were not sufficiently challenged, often working at too low a level. Too many lessons were interrupted by low-level disruption by prisoners.
- 3.18** In the minority of lessons where teaching, learning and assessment were very effective, including practical workshops, teachers ensured that prisoners made good progress through providing purposeful activities that were interesting and motivating. Teachers provided prisoners with sufficient time to think through new concepts and apply new meanings and methods to solve problems or deduce answers. As a result, most prisoners improved their confidence and made good progress. In industry-related subjects, teachers had high

expectations for prisoners, and ensured that they worked to exacting standards and produced work of a high quality.

- 3.19** Where teaching, learning and assessment were weak, teachers over-relied on worksheets and did not use a range of activities and resources to stimulate and challenge prisoners to advance their knowledge and skills. Too many teachers did not check prisoners' understanding effectively before moving on to the next concept or topic and, as a result, too many prisoners struggled to make progress. At times, teachers answered their own questions and did not ensure that prisoners had enough time to think through and arrive at answers and solutions themselves.
- 3.20** The promotion of English and mathematics in vocational subjects required improvement. For example, not enough teachers corrected errors in prisoners' spelling, punctuation or grammar. In addition, prisoners in cleaning services were over-reliant on formula tables to calculate percentages of chemicals rather than working out percentages for themselves.
- 3.21** The majority of teachers' oral feedback on prisoners' written work in lessons was effective. However, the use of individual learning plans was not consistently good enough, and too much of teachers' written feedback was cursory and did not inform prisoners how to improve their work sufficiently well. Target setting was perfunctory and did not take into account individual prisoners' starting points or needs.

## Recommendations

- 3.22 All activities planned by teachers should meet prisoners' starting points and previous achievements, and challenge them to make good progress.**
- 3.23 Teachers should check thoroughly that prisoners understand and can apply new knowledge and skills effectively. They should set more detailed targets and monitor and evaluate these rigorously to promote progress.**

## Personal development and behaviour

- 3.24** Attendance was low in education classes but high in vocational learning provision and work. In vocational training, prisoners came prepared to work, were attentive and developed a good work ethic. In practical lessons and prison workshops, prisoners enjoyed their work and were enthusiastic, including those engaged in mundane production-line activities. Delays in unlocking and difficulties in moving prisoners across the prison meant that too many prisoners often arrived late for work, education and training. Too many prisoners left the classroom frequently on unauthorised breaks, often to smoke in the toilets, missing large amounts of learning time and disrupting the learning of others.
- 3.25** Standards of behaviour in work and in the gym were good, but in education classes were poor. Prisoners were respectful towards each other and courteous to staff.
- 3.26** There was little provision to help prisoners to develop problem-solving and team-working skills. Prisoners had too few opportunities in vocational training and work settings to develop and gain accreditation in English and mathematics, to enhance their chances of employment on release.

## Recommendation

- 3.27 Attendance and punctuality at learning and skills and work activities should be improved.**

## Education and vocational achievements

- 3.28** Prisoners who completed their qualifications achieved well. Success rates in English, mathematics, and information and communications technology were good. The achievement of appropriate units towards full qualifications was good and success rates in most of the provision had improved. However, there were too few opportunities for prisoners to progress to higher-level qualifications.
- 3.29** In vocational training, the standard of work and skill development was good. For example, prisoners in painting and decorating produced a high standard of decorative finishes, and those completing barista training gained valuable customer service skills and attitudes.
- 3.30** The work ethic and development of employability skills in vocational training and work were good.

## Library

- 3.31** The library service was good and well organised. Library staff were supported by two full-time orderlies. The library was well laid out, with a good cross-section of stock, including fiction and non-fiction books. It provided good resources, such as easy-reading books and books for the expanding foreign national population. Prison Service Instructions and legal textbooks were readily available and used regularly by prisoners. There were no resources to support vocational training or preparation for employment.
- 3.32** The number of prisoners registered with the library had increased. Planned use was good but in reality the lack of officer escorts often limited access. Data on the usage by individual prisoners were not collated to monitor and judge the impact of the service.
- 3.33** The library resources were used well to promote literacy across the prison, with weekly 'reading ahead' and creative reading workshops. Links with the education department were good, and the library was used well by prisoners during their education sessions.

## Recommendations

- 3.34 The library should provide books and resources to support vocational training and preparation for employment.**
- 3.35 Data and information on library usage should be collated to understand better where use needs to be promoted.**

## 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.**

- 3.36** PE equipment and facilities were good. They included a large, well-resourced gym with ample aerobic equipment and free weights, and a good-sized sports hall with an outside multi-sport area. Instructors were experienced and competent, motivating prisoners well and acting as good role models.
- 3.37** Links with the health care department were effective in helping prisoners to lead healthy lifestyles. Despite careful planning, which allowed all prisoners, including vulnerable prisoners and those in full-time work, access to the gym, several prisoners told us that their sessions were often curtailed owing to late arrival and sessions finishing early.
- 3.38** Owing to low staffing levels, no gym or fitness qualifications were offered, and at the time of the inspection prisoners were not given the opportunity to use the outside sports area.

### Recommendation

- 3.39 Accredited qualifications in PE should be introduced.**

## 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** The strategic management of resettlement had deteriorated and was limited. Regular and well-attended meetings provided some oversight of the delivery of services, but the reducing reoffending strategy had not been updated since 2014 and there was no action plan or current analysis of needs. A survey of needs had been undertaken and was due to be analysed but this would only provide prisoners' views of their issues. There was insufficient use of other evidence, such as local offender assessment system (OASys) data and outcome figures, to shape resettlement services in the future. The specific needs of groups of prisoners, such as those nearing release into the community and the large number of foreign national prisoners held at the establishment, had not been explored.
- 4.2** Despite efforts by prison managers to ensure high-quality community rehabilitation company (CRC) arrangements, the provision remained weak and under-resourced (see main recommendation S63). Only two resettlement workers were in post to complete the basic custody screening tool 2 and pre-release reviews, which was insufficient to deliver high-quality support to the large number of prisoners arriving and leaving the establishment each month (see section on reintegration planning). Only one temporary member of staff was in post to provide accommodation and debt advice, which was also insufficient to meet demand (see section on reintegration planning). Issues had been raised with the CRC by prison managers and steps were being taken to provide improvements to the accommodation and debt advice services but there had been little success in improving resettlement planning on arrival and before release. In our survey, only 13% of prisoners said that they had been helped to prepare for release.
- 4.3** Links between the offender management unit (OMU) and public protection team had improved considerably and were good (see also paragraph 4.15). However, links between the CRC and the OMU were poor, with little information exchange to inform risk management and little sign of delivery of a coordinated resettlement plan to those serving over 12 months (see also paragraph 4.17). This potentially left gaps in provision and a lack of attention to protecting the public when giving resettlement help to prisoners (see also section on public protection and main recommendation S63).

#### Recommendation

- 4.4 An up-to-date reducing reoffending strategy and action plan, based on a comprehensive needs analysis, should inform the provision and monitoring of offender management and resettlement.**

## 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.**

- 4.5** In our survey, 74% of respondents, against the 46% comparator and 37% at the time of the previous inspection, said that no one was helping them to achieve their sentence plan targets. In addition, only 12%, against the 32% comparator and 37% at the time of the previous inspection, said that their offender supervisor was helping.
- 4.6** The OMU had a pool of 16 uniformed offender supervisors, and eight of these had their main place of work identified as offender management. However, the level of cross-deployment was very high (sometimes losing half of the profiled hours each month), which had a negative impact on the quality of offender management. Uniformed offender supervisors were unable to maintain regular and structured contact with prisoners or support them in addressing their offending behaviour or making plans for the future.
- 4.7** Probation officers had been appointed to the OMU since the previous inspection and a team of four was currently in place. This provided a good opportunity to focus on risk of harm; for example, they managed the higher-risk cases and had regular contact with these prisoners, providing a good focus on risks and motivation to achieve sentence planning targets. The introduction of this team provided an opportunity to review the delivery of offender management as a whole, with the aim of promoting high-quality provision.
- 4.8** The backlog of OASys assessments was relatively small, at 29 out of about 180 cases; however, many prisoners were transferred to other prisons before they had one (see paragraph 4.20 and recommendation 4.23), which was poor practice. During the inspection, 19 prisoners were due to be transferred to other prisons and nine of them did not have a current OASys assessment or sentence plan.
- 4.9** Assessments and plans completed by National Probation Service staff (in the prison and in the community) were of a good quality. Risk factors were identified and appropriate sentence planning targets set. These prisoners could name their offender supervisor and most were aware of their sentence plan targets and how to achieve them. However, for prisoners managed by uniformed offender supervisors, the situation was less positive. Assessments were not always done or were incomplete, omitting a sentence plan. Many of these prisoners did not know who their offender supervisor was, and did not know if they had a sentence plan. This was reflected in our survey, with only 31% of prisoners saying that they had a sentence plan and, of these, fewer than elsewhere and than at the time of the previous inspection said that they had been involved in its development (34% versus 55% and 56%, respectively).
- 4.10** Few eligible prisoners applied for home detention curfew and the reason for this was unclear. Out of 70 forms issued to eligible prisoners in the previous six months, only 16 had been returned by the prisoner to indicate his wish to be considered. Of these, some had run out of time before the assessment could be completed. While some of this was the result of very short sentences, it was not helped by delays in receiving reports from external agencies (National Probation Service and CRCs) and further delays in prison-based processes, such as sending out the assessment forms. Overall, in most of the cases we looked at, the prisoner had been released after his eligibility date. A spreadsheet was being developed to provide better oversight of delays but more needed to be done to ensure that delays in prison-based case administration processes were addressed.

## Recommendations

- 4.11 All offender assessment system (OASys) assessments and plans should be of a good quality. Contact with offender supervisors should be regular and meaningful, focused on risk of harm, and promote motivation and engagement with the sentence plan.**
- 4.12 All eligible prisoners should be encouraged to apply for release on home detention curfew. The timeliness of releases should be improved by addressing all delays in completing the assessment.**

## Public protection

- 4.13** The initial screening of new prisoners for public protection issues and to identify contact restrictions was robust. However, OASys assessments were not checked, so additional risks and restrictions were not always identified.
- 4.14** When risks were identified, contact restrictions were applied promptly. Mail and telephone monitoring was used and approved appropriately, and these restrictions were removed by the interdepartmental risk management team (IRMT) as soon as the evidence suggested that it was safe to do so.
- 4.15** Arrangements for identifying multi-agency public protection arrangements (MAPPA) cases were sound. The current level was confirmed in preparation for release and we saw good information exchange between the OMU and in-house probation staff. The quality of reports for consideration at MAPPA meetings was good; they contained details about prisoners' behaviour in custody, including security information.
- 4.16** The role and effectiveness of the IRMT had improved considerably. Higher-risk cases were referred for additional oversight and risk management planning. Other cases were discussed at the meeting when concerns about behaviour arose during the sentence, and cases were generally discussed again before release. The IRMT meeting was well attended and information exchange with community-based probation staff was good. The main gap in information exchange was from CRC resettlement services within the prison. A CRC member of staff attended the meeting but did not have enough information about the type of support being provided or the outcomes.
- 4.17** Information exchange between the CRC and the OMU about public protection issues was also poor. For example, in one case the prisoner was being referred to local authority housing by the CRC without consultation with OMU staff, who were aware of the need to locate him in an approved hostel because of the nature of his risk of harm.

## Recommendation

- 4.18 Information exchange between the community rehabilitation company and the offender management unit should be improved, to ensure that risk of harm is fully considered when providing resettlement help.**

## Categorisation

- 4.19** Initial categorisation and reviews were up to date and offender supervisors were involved. Reviews were approved by a manager and those we saw resulted in defensible decisions, but

the prisoner was not always informed of the outcome. Those who were told about the outcome received a standard letter, which failed to set out the reasons for rejection or outline targets to be achieved by the next review.

- 4.20** There were a large number of transfers to other prisons, with an average of 30 prisoners a week moving on. Good attention was given to progressive moves and we saw examples of moves to specialist prisons to access offending behaviour programmes. However, many prisoners were moved on without an OASys assessment or sentence plan to inform the suitability of their move (see paragraph 4.8) or ensure the availability of the necessary programmes or other treatment.
- 4.21** Despite good efforts to transfer category B prisoners, including sex offenders and indeterminate-sentenced prisoners, to more appropriate prisons, the lack of places nationally meant that some stayed at the establishment for too long. We saw examples of prisoners staying at Bedford for over a year with little access to offending behaviour work.

## Recommendations

- 4.22 Prisoners should always be informed of the outcome of their recategorisation review, and individual targets should be set for those who are unsuccessful.**
- 4.23 All transfers to other prisons should be informed by an up-to-date and high-quality OASys assessment and sentence plan.**
- 4.24 More places should be made available for category B prisoners, including sex offenders, to ensure that they do not have to stay at a local prison for too long.**

## 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.**

- 4.25** The demand for resettlement services was high, with an average of 160 new receptions and 90 releases a month. Delays and difficulties in implementing the CRC arrangements had led to problems in delivering of some resettlement services, which were poor. For example, assessments on arrival were not thorough enough and the subsequent plan was weak. In some cases, risk-of-harm issues were not taken into account when providing help (see sections on strategic management of resettlement and public protection). Resettlement reviews undertaken 12 weeks before release were also poor as they did not include the prisoner or result in a meaningful plan; some such plans we saw were simply a duplication of the initial plan, with no evidence of action taken.
- 4.26** There were too few CRC staff, and the operational model resulted in resettlement staff rarely meeting prisoners after completing the initial plan. Actions identified on plans consisted of emails to other organisations, with no evidence of follow-up, and prisoners were not informed of actions taken. We were not assured that all necessary action had been taken in all cases as recording was poor (see main recommendation S63).

## Accommodation

- 4.27** In our survey, just over a quarter of prisoners said that they had had housing problems on arrival at the establishment. Housing advice was contracted to Langley House Trust but there was only one temporary worker in post at the time of the inspection, which was insufficient to meet the high demand.
- 4.28** There had been 523 discharges in the previous six months. Although records indicated that 449 referrals had been made to Langley House Trust between October 2015 and March 2016, the outcome of these were unknown.
- 4.29** The CRC was unable to provide accurate data to identify the number of prisoners released homeless in the previous six months or to assess the quality of accommodation advice provided to prisoners (see main recommendation S63).

## Education, training and employment

- 4.30** The quality of the National Careers Service provided by Futures was inadequate. Too few prisoners benefited from timely interventions to support their employment, training or education on release. A skills action plan was not undertaken for all new arrivals to develop their employability skills, and those developed for prisoners at or above entry level 3 were too generic, not focusing sufficiently on individual needs. However, a few considered occupations or training routes on release.
- 4.31** Far too few prisoners attended the preparation for employment courses or had assistance in preparing a CV. The virtual campus (internet access for prisoners to community education, training and employment opportunities) was not used to support job search.
- 4.32** The number of prisoners benefitting from employment training and education advice and guidance, and being supported into education, training or employment was unclear, due to poor data collection.

## Recommendations

- 4.33** **The quality of education, training and employment advice and guidance should be improved and the virtual campus should be used to help prisoners to search for employment and develop a CV.**
- 4.34** **Data should be collated to provide evidence for the effectiveness of employment, training and education provision and the number of prisoners gaining employment, training or education places on release.**

## Health care

- 4.35** Prisoners due for release were seen in reception before discharge and given a seven-day supply of their prescribed medications. A health discharge summary letter was faxed to their community GP. A discharge pack with information about local health and substance misuse services was provided and condoms were available.
- 4.36** Pre-release planning for prisoners with enduring mental health needs was timely and effective, and, with the consent of the prisoner, family members were invited to attend care

programme approach reviews before release. Appropriate liaison with community services ensured continuity of care.

- 4.37** Arrangements for patients with palliative or end-of-life needs were in place if required.

## Drugs and alcohol

- 4.38** The drug and alcohol service provider appropriately prioritised prisoners due for release. Harm reduction and overdose prevention information was given consistently and release plans were of a good quality.
- 4.39** Strong links with local community providers to facilitate treatment continuation had been developed. Prison link workers from local drug and alcohol agencies visited regularly and could arrange for prisoners to be met at the gate on release

## Finance, benefit and debt

- 4.40** In our survey, approximately a quarter of prisoners said that they had arrived with money worries. Since the previous inspection, workers from Citizens Advice, the Money Advice Service and Luton Rights had been replaced by one Langley House Trust worker. Records indicated that there had been 505 prisoners referred for advice between October 2015 and March 2016. However, the CRC was unable to provide accurate data to assess the number of prisoners helped or the outcome of any work carried out.
- 4.41** Benefits advice was provided by Jobcentre Plus. The Langley House Trust worker told us that she was not authorised to assist prisoners with opening bank accounts, so this service was not available (see main recommendation S63).

## Children, families and contact with the outside world

- 4.42** Provision for children and families of prisoners was good. Ormiston Trust provided a wide range of services, including a parenting course, craft box activities (which included craft and memory boxes which prisoners prepared and sent out to their children) and Stories with Dads (where fathers could record stories onto CDs to send to their children). High-quality weekly family visits were also provided and were available to all prisoners. An outreach worker and volunteer provided essential support to children and families of prisoners in the community.
- 4.43** General domestic visits were provided every afternoon except Friday. Visitors said that staff were friendly and polite. Prisoners and visitors were required to leave the visits hall between the two sessions, and had to use two visiting orders to attend both sessions.
- 4.44** The visits environment was reasonable, with plans to improve it well under way. The visits hall was bright and had sufficient capacity for the number of visits required. The children's play area was open for most visits sessions and staffed by the Trust. Hot and cold refreshments, provided by Hertfordshire Association for the Care and Rehabilitation of Offenders (HACRO), were always available.
- 4.45** Prisoners and visitors complained that booking visits by telephone and email was difficult and some prisoners told us that they had waited up to three months to get their first visit. The prison acknowledged that this was under-resourced. However, once an initial visit had been booked, further visits could be booked at the visitors centre, through Ormiston Trust.

## Recommendations

- 4.46** Visitors should not have to use two visiting orders for a two-hour visit, and the session should not be temporarily suspended after one hour. (Repeat recommendation 4.61.)
- 4.47** Visits booking should be adequately resourced, to ensure that visits can be booked promptly by telephone and email.

## Attitudes, thinking and behaviour

- 4.48** As a local prison, the establishment was not resourced to deliver accredited offending behaviour programmes, other than for substance misuse (although no courses were currently being run), which was appropriate.
- 4.49** There had not been a recent local needs analysis to profile the required type of interventions to address offending behaviour but a few modules were provided by the CRC. These included 'safer relationships' and a motivational programme. However, these had been delivered to only 20 prisoners, only 10 of whom had completed them, and we had concerns about whether the appropriate prisoners were targeted to attend these programmes. These concerns had been identified by the prison and work was being undertaken to improve both of these important aspects.
- 4.50** The education department delivered a range of personal and social development modules, some of which aimed to improve thinking and problem-solving skills. There had been a high number of starts on these and a good level of completions.



# Section 5. Summary of recommendations and good practice

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

## Main recommendations

To NOMS

- 5.1 Cells should be fully furnished and equipped, and prisoners should be provided with adequate clothing, bedding and cleaning materials. (S61)
- 5.2 The quality of community rehabilitation company (CRC) resettlement assessment, planning and support should be improved. The effectiveness of the CRC's accommodation, debt and financial advice should be measured, with the aim of reducing the number of prisoners being released homeless and/or in debt. (S63)

## Main recommendations

To the governor

- 5.3 The causes of violent incidents should be established, and actions identified and implemented to make the prison safer. (S59)
- 5.4 A comprehensive drug supply reduction strategy and action plan should be implemented. (S60)
- 5.5 All prisoners should have access to learning and skills and work activities on at least a part-time basis and should be unlocked for the period of the core day when they are not at work. (S62)

## Recommendations

To NOMS

### Offender management and planning

- 5.6 More places should be made available for category B prisoners, including sex offenders, to ensure that they do not have to stay at a local prison for too long. (4.24)

## Recommendations

To the Home Office

### Equality and diversity

- 5.7 The Home Office should serve all decisions to detain notices to prisoners at least one month before the end of their sentence. (2.33, repeated recommendation 2.41)

## Recommendations

To PECS

### Courts, escort and transfers

- 5.8** Prisoners should be transferred to the prison shortly after the conclusion of their court appearance, and should be given information about where they are going. (1.4, repeated recommendation 1.5)

## Recommendations

To the governor

### Courts, escort and transfers

- 5.9** All personal property should be sent with prisoners when transferred on from the establishment. (1.5)

### Early days in custody

- 5.10** Reception processes should be conducted in a clean and comfortable environment, with adequate privacy for confidential interviews. (1.13)
- 5.11** All new arrivals should be located in a clean, fully equipped cell and be provided with sufficient clothing and bedding. (1.14)

### Bullying and violence reduction

- 5.12** The prison should introduce interventions to help prisoners change negative, violent or antisocial behaviour. (1.19, repeated recommendation 1.24)

### Self-harm and suicide

- 5.13** The management of prisoners subject to assessment, care in custody and teamwork (ACCT) procedures should ensure that all risks are identified, actions to reduce risk are planned, all staff who can contribute to the process are involved, there is consistent management of cases and that interaction with the prisoner makes a meaningful contribution to keeping him safe. (1.25)
- 5.14** Action taken in response to recommendations from the Prisons and Probation Ombudsman investigations of deaths in custody should be kept under review to ensure that improvements in practice are embedded. (1.26)

### Safeguarding

- 5.15** 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. (1.29)

### Security

- 5.16** All target searching should be completed and the mandatory drug testing (MDT) programme should be adequately resourced to undertake all required testing on time. (1.35)

**5.17** The MDT suite should provide a sterile testing area. (1.36)

### Incentives and earned privileges

**5.18** There should be an effective quality assurance scheme to ensure that the application of incentives and earned privileges (IEP) is fair and effective. (1.41, repeated recommendation 1.55).

### Discipline

**5.19** Managerial oversight of the use of force should be improved. Patterns and trends should be identified and acted on, to ensure that force is always justified and proportionate, including for all minority groups. (1.48)

**5.20** Action should be taken to reducing the high use of segregation for prisoners awaiting adjudication. (1.53)

**5.21** The regime on the segregation unit should provide access to off-unit activities and association with others, when risk assessments permit. (1.54)

### Substance misuse

**5.22** Prisoners with drug and/or alcohol problems should have prompt access to a range of psychosocial support services, and psychosocial interventions should be integrated with clinical treatment. (1.62)

**5.23** Prisoners requiring stabilisation and detoxification should be located on the designated treatment wing, and appropriate 24-hour observation and monitoring should take place. (1.63)

**5.24** A dual diagnosis service and pathway should be introduced for prisoners who experience mental health and substance-related problems. (1.64)

### Residential units

**5.25** All prisoners should have adequate access to working telephones. (2.9, repeated recommendation 2.12)

**5.26** Showers should be adequately screened. (2.10)

### Staff-prisoner relationships

**5.27** Wing staff should make regular entries in all prisoner case notes, which show evidence of interaction. (2.14)

**5.28** There should be regular opportunities for prisoner consultation, which should be recorded and show evidence of action taken to address concerns. (2.15)

### Equality and diversity

**5.29** Policies and action planning for each minority group should be updated and tailored to the specific needs of the prison. (2.22, repeated recommendation 2.26)

- 5.30** Prisoners with protected characteristics should have access to a consultation forum to provide support and address concerns. (2.23)
- 5.31** Discrimination incident report forms should be available on all wings, and the quality of investigations into complaints should be improved and show evidence of impartial and thorough investigation which addresses the concerns raised. (2.24)
- 5.32** Potential discrimination identified in the equality monitoring data should be fully investigated and action taken to address the issues. (2.25)
- 5.33** Staff should make greater use of the telephone interpreting service to communicate with foreign national prisoners with little English, and up-to-date prison information and notices, including reception material, should be translated into relevant languages and made freely available to prisoners. (2.34, repeated recommendation 2.40)
- 5.34** Support and care for older prisoners and those with disabilities should be improved, including wing-based care planning. (2.35)

### Complaints

- 5.35** Complaints should be analysed regularly to identify trends and address problems. (2.42, repeated recommendation 2.54)

### Legal rights

- 5.36** All remand prisoners should receive information about bail, and bail application should be actively pursued. (2.45)

### Health services

- 5.37** All treatment rooms and the inpatient unit should be cleaned to an NHS-equivalent standard and should be fully compliant with infection control standards. (2.57)
- 5.38** The emergency resuscitation equipment should be in good order, with an effective monitoring system in place. (2.58)
- 5.39** Health screening should take place confidentially, in an appropriate, safe area that promotes privacy and dignity. (2.64)
- 5.40** The inpatient unit should only accommodate prisoners with identified clinical needs and its role should be clearly defined, with a consistent approach towards risk assessment and care planning. (2.65)
- 5.41** Rooms used for medicines administration should be fit for purpose, with adequate accessibility and storage requirements, and controlled drug storage issues should be resolved. (2.72)
- 5.42** Methadone transport around the prison should be by two members of staff, with a radio, preferably when prisoners are in their cells. (2.73)
- 5.43** A robust audit of refrigerator temperatures and use of the out-of-hours cupboard should be introduced. (2.74)

- 5.44** Policies and documentation should be updated to reflect current practice, and accountability between the health care and pharmacy providers should be defined more clearly. (2.75)
- 5.45** Prisoners should have prompt access to dental care and treatment, in a dental suite that is refurbished to ensure compliance with national required standards, with good maintenance arrangements. (2.77)
- 5.46** Prisoners should have timely access to a full range of mental health support, including clinical psychology services, group interventions and counselling to meet the mental health needs of the population. (2.86)
- 5.47** Transfers under the Mental Health Act to specialist secondary and tertiary mental health services should occur within the current Department of Health transfer time guidelines. (2.87)

### Catering

- 5.48** Breakfast should be of sufficient quantity and issued on the morning it is to be eaten. (2.93)

### Purchases

- 5.49** Prisoners should not be charged a fee for catalogue orders. (2.97)

### Time out of cell

- 5.50** All prisoners should have access to at least one hour of exercise in the open air each day. (3.4)

### Learning and skills and work activities

- 5.51** Qualifications should be introduced which are at the correct level to complement prisoners' starting points and challenge them to reach their potential. (3.15)
- 5.52** The opportunities for prisoners to gain accredited qualifications while at work should be increased. (3.16)
- 5.53** All activities planned by teachers should meet prisoners' starting points and previous achievements, and challenge them to make good progress. (3.22)
- 5.54** Teachers should check thoroughly that prisoners understand and can apply new knowledge and skills effectively. They should set more detailed targets and monitor and evaluate these rigorously to promote progress. (3.23)
- 5.55** Attendance and punctuality at learning and skills and work activities should be improved. (3.27)
- 5.56** The library should provide books and resources to support vocational training and preparation for employment. (3.34)
- 5.57** Data and information on library usage should be collated to understand better where use needs to be promoted. (3.35)

### Physical education and healthy living

- 5.58** Accredited qualifications in PE should be introduced. (3.39)

### Strategic management of resettlement

- 5.59** An up-to-date reducing reoffending strategy and action plan, based on a comprehensive needs analysis, should inform the provision and monitoring of offender management and resettlement. (4.4)

### Offender management and planning

- 5.60** All offender assessment system (OASys) assessments and plans should be of a good quality. Contact with offender supervisors should be regular and meaningful, focused on risk of harm, and promote motivation and engagement with the sentence plan. (4.11)
- 5.61** All eligible prisoners should be encouraged to apply for release on home detention curfew. The timeliness of releases should be improved by addressing all delays in completing the assessment. (4.12)
- 5.62** Information exchange between the community rehabilitation company and the offender management unit should be improved, to ensure that risk of harm is fully considered when providing resettlement help. (4.18)
- 5.63** Prisoners should always be informed of the outcome of their recategorisation review, and individual targets should be set for those who are unsuccessful. (4.22)
- 5.64** All transfers to other prisons should be informed by an up-to-date and high-quality OASys assessment and sentence plan. (4.23)

### Reintegration planning

- 5.65** The quality of education, training and employment advice and guidance should be improved and the virtual campus should be used to help prisoners to search for employment and develop a CV. (4.33)
- 5.66** Data should be collated to provide evidence for the effectiveness of employment, training and education provision and the number of prisoners gaining employment, training or education places on release. (4.34)
- 5.67** Visitors should not have to use two visiting orders for a two-hour visit, and the session should not be temporarily suspended after one hour. (4.46, repeat recommendation 4.61.)
- 5.68** Visits booking should be adequately resourced, to ensure that visits can be booked promptly by telephone and email. (4.47)

## Section 6. Appendices

### Appendix I: Inspection team

Alison Perry	Team leader
Sandra Fieldhouse	Inspector
Paul Rowlands	Inspector
Andrew Rooke	Inspector
Karen Dillon	Inspector
Fionnula Gordon	Inspector
Catherine Shaw	Researcher
Alissa Redmond	Researcher
Sophie Skinner	Researcher
Patricia Taflan	Researcher
Sigrid Engelen	Substance misuse inspector
Maureen Jamieson	Health services inspector
Sue Melvin	Pharmacist
Kathleen Byrne	Care Quality Commission inspector
Stephen Hunsley	Ofsted inspector
Shane Langthorne	Ofsted inspector
Matt Vaughan	Ofsted inspector
Liz Smith	Offender management inspector
Jo Dowling	Offender management 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 2014, reception arrangements were managed well, and first night procedures and induction were adequate. Most prisoners felt safe and most violent incidents were minor. Arrangements to support prisoners in self-harm crisis were generally good. Safeguarding was more developed than we normally see. Security was broadly proportionate, access to illegal drugs was well controlled and substance misuse support was improving. There were deficiencies across the range of disciplinary procedures, particularly governance of the use of force. Staff offered good care to prisoners in the segregation unit, despite a poor environment and regime. **Outcomes for prisoners were reasonably good against this healthy prison test.***

#### Main recommendations

The prison should reduce the number of incidents involving the use of force and improve the governance of and accountability for its use, including use of special or unfurnished accommodation, as well as planned interventions. The prison needs to be assured that use of force regarding Young Adults is proportionate. Documentation of all such uses should also be improved. (S38)

**Not achieved**

The number of prisoners in the segregation unit should be reduced, with those subject to assessment, care in custody and teamwork (ACCT) case monitoring only located there in exceptional circumstances, and the quality of regime and environment should be improved. (S39)

**Partially achieved**

#### Recommendations

Prisoners should be transferred to prison shortly after the conclusion of their court appearance, and should be given information routinely about where they are going. (I.5)

**Not achieved** (recommendation repeated, I.4)

All new arrivals should go to a dedicated first night centre, except in exceptional circumstances, such as medical need. (I.15)

**Not achieved**

The content and delivery of induction should be improved to ensure that all prisoners, especially those in custody and/or at Bedford for the first time, receive all the necessary information. (I.16)

**Not achieved**

There should be a strategy for reducing violence among young adult prisoners. (I.23)

**Not achieved**

The prison should introduce interventions to help prisoners change negative, violent or antisocial behaviour. (I.24)

**Not achieved** (recommendation repeated, I.19)

Staff should have sufficient time to ensure accurate and thorough assessment of prisoner risk. (I.33)

**Not achieved**

Prisoners should have unrestricted access to Listeners. (I.34)

**Achieved**

Prisoners should only be placed in anti-ligature clothing with appropriate justification. (I.35)

**Achieved**

The mandatory drug testing programme should be adequately resourced to undertake the required level of suspicion testing. (I.46)

**Not achieved**

There should be an effective quality assurance scheme to ensure that the application of incentives and earned privileges (IEP) is fair and effective. (I.55)

**Not achieved** (recommendation repeated, I.41)

Analysis of data for disciplinary procedures, use of force and segregation should be improved and used more effectively to reduce the number of adjudications, use of force and the throughput in the segregation unit. (I.61)

**Not achieved**

The prison should explore and address any inequality in the use of force against Muslim prisoners. (I.67)

**Not achieved**

The drug strategy meeting should be focused on ensuring suitable strategic oversight of drug supply- and demand-reduction approaches. (I.84)

**Not achieved**

'Road to recovery' (R2R) group programmes for prisoners with alcohol-only needs should be offered periodically according to need. (I.85)

**Not achieved**

The skills of R2R facilitators should be reviewed and relevant training and support offered to fill any gaps. (I.86)

**Achieved**

## Respect

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

*At the last inspection, in 2014, most residential accommodation was old, worn and overcrowded, but kept clean. However, toilets were dirty and lacked privacy. Interactions between staff and prisoners were mostly respectful. Structures to promote equality and diversity were broadly adequate, but provision was very limited and the needs of some minorities were overlooked or addressed inadequately. The responses to most prisoner complaints were satisfactory, and legal service provision was adequate. Health care was good. Faith provision was satisfactory and prisoners appreciated the range of supportive services. Prisoners were complimentary about the prison food but unhappy about the timing of their main meal. Outcomes for prisoners were reasonably good against this healthy prison test.*

### Recommendations

The prison should seek an alternative to the use of subterranean accommodation. (2.9)

**Not achieved**

All cells should have adequate natural light, suitably screened and clean toilets, be in a good decorative condition, adequately ventilated and contain suitable furniture, including lockable cabinets. (2.10)

**Not achieved**

Communal showers should be adequately ventilated and in good decorative condition. (2.11)

**Achieved**

All prisoners should have adequate access to working telephones. (2.12)

**Not achieved** (recommendation repeated, 2.9)

Staff should address prisoners by their preferred names. (2.18)

**Not achieved**

Policies and action planning for each minority group should be updated and tailored to the specific needs of the prison. (2.26)

**Not achieved** (recommendation repeated, 2.22)

Equality impact assessments should be completed in time. (2.27)

**Not achieved**

The prison should ensure that there is adequate time for staff to undertake equality work. (2.28)

**Not achieved**

There should be a sufficient number of prisoner equality representatives, who receive appropriate training and information, including notice of the agenda and minutes of the equality action team meeting. (2.29)

**Not achieved**

The prison should develop links with external support agencies for each protected group. (2.30)

**Not achieved**

There should be regular consultative forums for prisoners from each minority group. (2.39)

**Not achieved**

Staff should make greater use of the telephone interpreting service to communicate with foreign national prisoners with little English, and up-to-date prison information and notices, including reception material, should be translated into relevant languages and made freely available to prisoners. (2.40)

**Not achieved** (recommendation repeated, 2.34)

The Home Office should serve all decisions to detain notices to prisoners at least one month before the end of their sentence. (2.41)

**Not achieved** (recommendation repeated, 2.33)

Foreign national detainees should be moved to an immigration removal centre once they have served their criminal sentence. (2.42)

**Not achieved**

Prisoners with disabilities and older prisoners with identified needs should be consulted in the development of a multidisciplinary support plan, which involves the health care department, to which all staff have ready access. (2.43)

**Not achieved**

Complaints should be analysed regularly to identify trends and address problems. (2.54)

**Not achieved** (recommendation repeated, 2.42)

There should be a health complaints process that is confidential, and responses should be consistent, respectful, address the issues raised and provide prisoners with adequate explanation. (2.65)

**Achieved**

All health staff should have regular clinical supervision. (2.66)

**Achieved**

Prison staff with direct prisoner contact should be trained in resuscitation, including use of the automated defibrillator. (2.67)

**Partially achieved**

The inpatient unit should not be included in the certified normal accommodation, and should only accommodate prisoners with identified clinical needs. (2.76)

**Not achieved**

In-possession risk assessments should be reviewed, and patients should receive medicines at the appropriate therapeutic intervals. (2.86)

**Achieved**

The dental suite should be refurbished to ensure compliance with national required standards, and ensure a safe suitable clinical environment, with good maintenance arrangements. (2.93)

**Not achieved**

There should be effective identification of and focused care for prisoners with dual diagnosis needs. (2.100)

**Partially achieved**

The prison should review the arrangements for the serving of the hot meal to address the negative perceptions of prisoners. (2.108)

**Achieved**

The prison should expand the opportunities for prisoners to dine in association. (2.109)

**Not achieved**

Breakfast should be issued on the morning it is to be eaten. (2.110)

**Not achieved**

New arrivals should be able to buy items from the prison shop within their first 24 hours. (2.115)

**Not achieved**

The prison should explore and address the reasons for black and minority ethnic prisoner dissatisfaction with the goods available in the prison shop. (2.116)

**Not achieved**

Prisoners should not be charged an administration fee for catalogue orders. (2.117)

**Not achieved**

## Purposeful activity

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

*At the last inspection, in 2014, time out of cell was reasonable for most prisoners but varied greatly. There were too few activity places and attendance was poor for activities other than education. The education provision was adequate with generally good teaching, but most of the work for prisoners was mundane. Educational and vocational achievements were not good enough. The library offered a very good environment with good access. Gym facilities were good and the programme offered a range of recreational activity with a positive emphasis on healthy living. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

### Main recommendations

The prison should urgently increase the provision of education, vocational training and work to engage as many prisoners as possible. Purposeful activity should be meaningful. (S40)

**Not achieved**

### Recommendations

The amount of time prisoners spend out of their cells should be increased (3.4)

**Not achieved**

The prison should introduce a wider range and quantity of accredited vocational training. (3.10)

**Not achieved**

Attendance rates in learning and skills activities should be improved. (3.11)

**Not achieved**

Quality assurance and data should be used comprehensively to support improvement to the provision. (3.12)

**Not achieved**

Prisoners should begin purposeful activity as soon as possible after their induction. (3.21)

**Not achieved**

The virtual campus should be fully utilised to support learners' development and resettlement needs. (3.22)

**Not achieved**

Teachers should be supported to promote fully learners' understanding of equality and diversity. (3.28)

**Not achieved**

Peer mentors should be used to support the less able learners. (3.29)

**Not achieved**

Tutors should improve target setting in individual learning plans, and help learners to focus on learning achieved in their learning diaries. (3.30)

**Not achieved**

The prison should improve accredited outcomes for poorly performing course. (3.33)

**Achieved**

All prisoners in the workshops and work activities should be supported to develop an appropriate work ethic. (3.34)

**Not achieved**

Library orderlies should be accredited for the skills that they develop while at work. (3.38)

**Not achieved**

PE showers should be fitted with privacy screens. (3.47)

**Not 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 2014, Strategic management of resettlement was insufficient, offender management work was limited, and prisoners' risk of harm was not always addressed. Public protection arrangements were inadequate and required immediate attention. Offender supervisor contact with prisoners was too limited. Reintegration pathway provision was variable, and there was no custody planning for short-term and remand prisoners. Work with children and families was good, although visits arrangements required improvement. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

### Main recommendations

The prison should prioritise the management of prisoners' risk of harm to others, offender supervisors should improve their knowledge of risk and all high risk of harm prisoners should be appropriately managed before their release. (S41)

**Achieved**

## Recommendations

The prison's reducing reoffending strategy should place offender management at the heart of the work, improve information exchange, and be clearly informed by a comprehensive needs analysis of the population. (4.7)

**Not achieved**

Offender supervisors should have access to further training, particularly in the management of risk of harm. (4.8)

**Not achieved**

Progressive transfers of prisoners should be prioritised and always based on an up-to-date offender assessment system (OASys) assessment. (4.17)

**Not achieved**

All sentenced prisoners should have an offender supervisor, and management oversight of casework should be improved. (4.18)

**Partially achieved**

The quality of sentence plans and frequency of offender supervisor contact with prisoners should be improved. (4.19)

**Not achieved**

Offender supervisors should be directly involved in recategorisation reviews and transfer decisions. (4.30)

**Achieved**

Category D prisoners should be transferred directly to an open prison. (4.31)

**Achieved**

Where possible, discharge boards should be held long enough before release to be effective, and should see all sentenced prisoners to address their resettlement needs. (4.39)

**Not achieved**

The prison should ensure that all prisoners access education, training and employment help before their release. (4.47)

**Not achieved**

Visitors should not have to use two visiting orders for a two-hour visit, and the session should not be temporarily suspended after one hour. (4.61)

**Not achieved** (recommendation repeated, 2.46)

The prison should develop and implement a formal strategy for addressing prisoners' attitudes, thinking and behaviour needs that reflects the population. (4.69)

**Not achieved**



# Appendix III: Care Quality Commission Requirement Notice



## Requirement Notices

**Provider:** Northamptonshire Healthcare NHS Foundation Trust

**Location:** HMP Bedford

**Location ID:** RP1Y7

**Regulated activities:** Treatment of disease, disorder, or injury, Diagnostic and screening and Surgical procedures.

### Action we have told the provider to take

The table below shows the regulations that were not being met. The provider must send CQC a report that says what action it is going to take to meet these regulations.

#### Regulation 10 Dignity and Respect

**10(1)** Service users must be treated with dignity and respect.

**10(2)** Without limiting paragraph (1), the things which a registered person is required to do to comply with paragraph (1) include in particular—

10(2)(a) ensuring the privacy of the service user;

### How the regulation was not being met:

Patients using the service must be treated with respect and dignity at all times while they are receiving care and treatment. To meet this regulation, providers must make sure that they provide care and treatment in a way that ensures people's dignity and treats them with respect at all times.

All reasonable efforts should be made to make sure that discussions about care treatment and support only take place where they cannot be overheard.

### Arrangements for secondary health screens

Some secondary health screens were conducted in a corridor close to the resettlement unit. The facilities were poor, with lighting in this area being low and noise levels high.

As part of the health screen health care staff asked prisoners highly personal questions about their physical health, mental health and family circumstances. The

use of a screen in this area had been an attempt to mitigate privacy, dignity and confidentiality concerns, however, conversations taking place between staff and patients could be heard and this was a breach of patient confidentiality. The corridor area was used by operational staff and prisoners were also escorted through this area. A staff kitchen and toilet were located in the same area.

**Regulation 12 Safe care and treatment**

**12.—**(1) Care and treatment must be provided in a safe way for service users.  
**12(2)** Without limiting paragraph (1), the things which a registered person must do to comply with that paragraph include—  
 (a) assessing the risks to the health and safety of service users of receiving the care or treatment;  
 (b) doing all that is reasonably practicable to mitigate any such risks;  
 (h) assessing the risk of, and preventing, detecting and controlling the spread of , infections, including those that are health care associated;  
 (i) Where responsibility for the care and treatment of service users is shared with, or transferred to, other persons, working with such other persons, service users and other appropriate persons to ensure that timely care planning takes place to ensure the health, safety and welfare of the service users.

**How the regulation was not being met:**

The intention of this regulation is to prevent people from receiving unsafe care and treatment and prevent avoidable harm or risk of harm. Providers must assess the risks to people's health and safety during any care or treatment

Where the responsibility for care and treatment is shared, care planning must be timely to maintain people's health, safety and welfare.

**Substance Misuse**

Care and treatment was not always provided to prisoners in a way that protected their safety and welfare. Of particular concern were those prisoners with substance and alcohol dependency issues. Drug and/or alcohol dependent prisoners on general location were not monitored at night. Night time observations, by nurses, of drug and/or alcohol dependent prisoners on D-wing were not happening.

**Inpatients**

Care planning and risk assessment were inconsistent and did not address one prisoner's care needs fully. There was no falls risk assessment in place for the prisoner concerned. Similarly there was no manual handling assessment and there was no risk assessment for the use of bed rails for the prisoner. A Waterlow pressure ulcer risk assessment had not been completed for this prisoner. Fluid and food charts

were not maintained and there was no care plan for managing double incontinence.

The condition of cells on the inpatient unit was poor. Toilets were filthy and had not been cleaned for some time. Floors and surfaces were dirty and dusty and food was left lying around. Infection control standards were not met and this compromised patient safety.

There was no joint agreed and documented policy for the operation of the inpatient unit between the trust and the prison and there was no operational admission/discharge policy for the unit.

### **Wing treatment areas**

Wing based treatment rooms were dirty, dusty and cluttered. Many did not meet NHS standards of infection control or equivalent. Poor hygiene and overall standards of cleanliness, did not meet infection control standards.

### **Dentist**

Patients did not have access to routine dental care. There had been no routine dental service at HMP Bedford for several weeks. This had resulted in lengthy waiting times for routine appointments.



## Appendix IV: 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	10	232	50.3
Recall	3	43	9.6
Convicted unsentenced	5	50	11.4
Remand	5	123	26.6
Civil prisoners	0	0	0
Detainees	0	10	2.1
<b>Total</b>	<b>23</b>	<b>458</b>	<b>100</b>

Sentence	18–20-year-olds	21 and over	%
Unsentenced	10	187	41
Less than six months	2	57	12.3
six months to less than 12 months	3	34	7.7
12 months to less than 2 years	2	21	4.8
2 years to less than 4 years	4	47	10.6
4 years to less than 10 years	2	66	14.1
10 years and over (not life)	0	31	6.4
ISPP (indeterminate sentence for public protection)	0	8	3.1
Life	0	7	1.5
<b>Total</b>	<b>23</b>	<b>458</b>	<b>100</b>

Age	Number of prisoners	%
Please state minimum age here: 18		
Under 21 years	23	4.8
21 years to 29 years	186	38.7
30 years to 39 years	161	33.5
40 years to 49 years	68	14.1
50 years to 59 years	28	5.8
60 years to 69 years	8	1.7
70 plus years	7	1.5
Please state maximum age here: 83		
<b>Total</b>	<b>481</b>	<b>100%</b>

Nationality	18–20-year-olds	21 and over	%
British	21	381	83.8
Foreign nationals	2	77	16.4
<b>Total</b>			

<b>Security category</b>	<b>18–20-year-olds</b>	<b>21 and over</b>	<b>%</b>
Uncategorised unsentenced	9	180	39.3
Uncategorised sentenced	0	3	0.6
Category A	0	0	0
Category B	0	60	12.5
Category C	1	212	44.3
Category D	0	3	0.6
Other	13	0	2.7
<b>Total</b>			

<b>Ethnicity</b>	<b>18–20-year-olds</b>	<b>21 and over</b>	<b>%</b>
<b>White</b>			
British	9	264	56.8
Irish	0	8	1.7
Gypsy/Irish Traveller	0	9	1.9
Other white	0	0	0
	<b>11</b>	<b>325</b>	<b>69.9</b>
<b>Mixed</b>			
White and black Caribbean	3	18	4.4
White and black African	0	3	0.6
White and Asian	0	1	0.2
Other mixed	0	0	0
	<b>3</b>	<b>27</b>	<b>6.2</b>
<b>Asian or Asian British</b>			
Indian	2	14	3.3
Pakistani	1	26	5.6
Bangladeshi	1	7	1.7
Chinese	0	0	0
Other Asian	1	15	3.3
	<b>5</b>	<b>62</b>	<b>13.9</b>
<b>Black or black British</b>			
Caribbean	1	21	4.6
African	1	13	2.9
Other black	2	6	1.7
	<b>4</b>	<b>40</b>	<b>9.1</b>
<b>Other ethnic group</b>			
Arab	0	0	0
Other ethnic group	0	2	0.4
	<b>0</b>	<b>2</b>	<b>0.4</b>
Not stated	0	2	0.4
<b>Total</b>	<b>23</b>	<b>458</b>	<b>100</b>

Religion	18–20-year-olds	21 and over	%
Baptist	0	0	0
Church of England	1	40	8.5
Roman Catholic	1	114	23.9
Other Christian denominations	2	68	14.6
Muslim	8	78	17.9
Sikh	0	6	1.2
Hindu	0	6	1.2
Buddhist	0	5	1.0
Jewish	0	2	0.4
Other	1	4	1
No religion	10	135	30.1
<b>Total</b>	<b>23</b>	<b>458</b>	<b>100</b>

Other demographics	18–20-year-olds	21 and over	%
Veteran (ex-armed services)	Not stated	Not stated	
<b>Total</b>			

### Sentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	6	1.2	94	19.5
1 month to 3 months	6	1.2	97	20.2
3 months to six months	0	0	33	6.9
six months to 1 year	1	0.2	22	4.6
1 year to 2 years	0	0	18	3.7
2 years to 4 years	0	0	6	1.2
4 years or more	0	0	1	0.2
<b>Total</b>	<b>13</b>	<b>2.7</b>	<b>271</b>	<b>56.3</b>

### Sentenced prisoners only

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

### Unsentenced prisoners only

Length of stay	18–20-year-olds		21 and over	
	Number	%	Number	%
Less than 1 month	5	1	67	13.9
1 month to 3 months	5	1	56	11.6
3 months to six months	0	0	50	10.4
six months to 1 year	0	0	13	2.7
1 year to 2 years	0	0	1	0.2
2 years to 4 years	0	0	0	0
4 years or more	0	0	0	0
<b>Total</b>	<b>10</b>	<b>2.1</b>	<b>187</b>	<b>38.9</b>

<b>Main offence</b>	<b>18–20-year-olds</b>	<b>21 and over</b>	<b>%</b>
Violence against the person	Not available		
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 V: 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 9 May 2016 the prisoner population at HMP Bedford was 488. Using the method described above, questionnaires were distributed to a sample of 195 prisoners.

We received a total of 153 completed questionnaires, a response rate of 78%. This included one questionnaire completed via interview. Twelve respondents refused to complete a questionnaire and 30 questionnaires were not returned.

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<sup>9</sup> 95% confidence interval with a sampling error of 7%. The formula assumes an 80% response rate (70% 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>
A	37
B	15
C	37
D	34
E	14
F	12
Healthcare	4

### **Presentation of survey results and analyses**

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

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%.

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 Bedford in 2016 compared with responses from prisoners surveyed in all other local prisons. This comparator is based on all responses from prisoner surveys carried out in 33 local prisons since April 2013.
- The current survey responses from HMP Bedford in 2016 compared with the responses of prisoners surveyed at HMP Bedford in 2014.
- A comparison within the 2016 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2016 survey between those who are British nationals and those who are foreign nationals.
- A comparison within the 2016 survey between the responses of Muslim prisoners and non-Muslim prisoners.
- A comparison within the 2016 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 2016 survey between the responses of prisoners on A, B, and C wings and the responses of prisoners on D, E and F wings.

<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 0.01 which means that there is only a 1% likelihood that the difference is due to chance.

## Survey summary

### Section I: About you

<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>	8 (5%)
	<i>21 - 29</i>	55 (37%)
	<i>30 - 39</i>	42 (28%)
	<i>40 - 49</i>	30 (20%)
	<i>50 - 59</i>	10 (7%)
	<i>60 - 69</i>	1 (1%)
	<i>70 and over</i>	2 (1%)
<b>Q1.3</b>	<b>Are you sentenced?</b>	
	<i>Yes</i>	80 (54%)
	<i>Yes - on recall</i>	18 (12%)
	<i>No - awaiting trial</i>	35 (23%)
	<i>No - awaiting sentence</i>	15 (10%)
	<i>No - awaiting deportation</i>	1 (1%)
<b>Q1.4</b>	<b>How long is your sentence?</b>	
	<i>Not sentenced</i>	51 (35%)
	<i>Less than 6 months</i>	19 (13%)
	<i>6 months to less than 1 year</i>	10 (7%)
	<i>1 year to less than 2 years</i>	9 (6%)
	<i>2 years to less than 4 years</i>	14 (10%)
	<i>4 years to less than 10 years</i>	16 (11%)
	<i>10 years or more</i>	18 (13%)
	<i>IPP (indeterminate sentence for public protection)</i>	3 (2%)
	<i>Life</i>	4 (3%)
<b>Q1.5</b>	<b>Are you a foreign national (i.e. do not have UK citizenship)?</b>	
	<i>Yes</i>	19 (13%)
	<i>No</i>	128 (87%)
<b>Q1.6</b>	<b>Do you understand spoken English?</b>	
	<i>Yes</i>	141 (95%)
	<i>No</i>	7 (5%)
<b>Q1.7</b>	<b>Do you understand written English?</b>	
	<i>Yes</i>	138 (93%)
	<i>No</i>	10 (7%)

<b>Q1.8</b>	<b>What is your ethnic origin?</b>			
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	80 (56%)	<i>Asian or Asian British - Chinese</i>	2 (1%)
	<i>White - Irish</i>	1 (1%)	<i>Asian or Asian British - other</i>	4 (3%)
	<i>White - other</i>	15 (10%)	<i>Mixed race - white and black Caribbean</i>	5 (3%)
	<i>Black or black British - Caribbean</i>	3 (2%)	<i>Mixed race - white and black African</i>	3 (2%)
	<i>Black or black British - African</i>	8 (6%)	<i>Mixed race - white and Asian</i>	2 (1%)
	<i>Black or black British - other</i>	0 (0%)	<i>Mixed race - other</i>	2 (1%)
	<i>Asian or Asian British - Indian</i>	5 (3%)	<i>Arab</i>	0 (0%)
	<i>Asian or Asian British - Pakistani</i>	6 (4%)	<i>Other ethnic group</i>	2 (1%)
	<i>Asian or Asian British - Bangladeshi</i>	6 (4%)		
<b>Q1.9</b>	<b>Do you consider yourself to be Gypsy/Romany/Traveller?</b>			
	<i>Yes</i>			12 (8%)
	<i>No</i>			133 (92%)
<b>Q1.10</b>	<b>What is your religion?</b>			
	<i>None</i>	31 (21%)	<i>Hindu</i>	1 (1%)
	<i>Church of England</i>	37 (25%)	<i>Jewish</i>	0 (0%)
	<i>Catholic</i>	29 (20%)	<i>Muslim</i>	26 (18%)
	<i>Protestant</i>	2 (1%)	<i>Sikh</i>	4 (3%)
	<i>Other Christian denomination</i>	9 (6%)	<i>Other</i>	6 (4%)
	<i>Buddhist</i>	3 (2%)		
<b>Q1.11</b>	<b>How would you describe your sexual orientation?</b>			
	<i>Heterosexual/ Straight</i>			142 (97%)
	<i>Homosexual/Gay</i>			1 (1%)
	<i>Bisexual</i>			4 (3%)
<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>			34 (23%)
	<i>No</i>			115 (77%)
<b>Q1.13</b>	<b>Are you a veteran (ex-armed services)?</b>			
	<i>Yes</i>			8 (5%)
	<i>No</i>			141 (95%)
<b>Q1.14</b>	<b>Is this your first time in prison?</b>			
	<i>Yes</i>			66 (44%)
	<i>No</i>			84 (56%)
<b>Q1.15</b>	<b>Do you have children under the age of 18?</b>			
	<i>Yes</i>			81 (54%)
	<i>No</i>			69 (46%)

## 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>		99 (66%)
	<i>2 hours or longer</i>		39 (26%)
	<i>Don't remember</i>		13 (9%)

<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>	99 (66%)
	Yes	20 (13%)
	No	27 (18%)
	Don't remember	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>	99 (66%)
	Yes	6 (4%)
	No	40 (27%)
	Don't remember	4 (3%)
<b>Q2.4</b>	<b>On your most recent journey here, was the van clean?</b>	
	Yes	87 (58%)
	No	52 (34%)
	Don't remember	12 (8%)
<b>Q2.5</b>	<b>On your most recent journey here, did you feel safe?</b>	
	Yes	117 (77%)
	No	29 (19%)
	Don't remember	5 (3%)
<b>Q2.6</b>	<b>On your most recent journey here, how were you treated by the escort staff?</b>	
	Very well	36 (24%)
	Well	62 (41%)
	Neither	33 (22%)
	Badly	8 (5%)
	Very badly	4 (3%)
	Don't remember	7 (5%)
<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>	
	Yes, someone told me	98 (65%)
	Yes, I received written information	4 (3%)
	No, I was not told anything	43 (29%)
	Don't remember	5 (3%)
<b>Q2.8</b>	<b>When you first arrived here did your property arrive at the same time as you?</b>	
	Yes	116 (77%)
	No	30 (20%)
	Don't remember	4 (3%)

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

<b>Q3.1</b>	<b>How long were you in reception?</b>	
	Less than 2 hours	55 (37%)
	2 hours or longer	85 (57%)
	Don't remember	10 (7%)
<b>Q3.2</b>	<b>When you were searched, was this carried out in a respectful way?</b>	
	Yes	128 (85%)
	No	17 (11%)
	Don't remember	5 (3%)

<b>Q3.3</b>	<b>Overall, how were you treated in reception?</b>		
	<i>Very well</i>		38 (25%)
	<i>Well</i>		69 (45%)
	<i>Neither</i>		27 (18%)
	<i>Badly</i>		11 (7%)
	<i>Very badly</i>		4 (3%)
	<i>Don't remember</i>		3 (2%)
<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>		
	<i>Loss of property</i>	22 (15%)	<i>Physical health</i> 24 (16%)
	<i>Housing problems</i>	40 (27%)	<i>Mental health</i> 42 (28%)
	<i>Contacting employers</i>	12 (8%)	<i>Needing protection from other prisoners</i> 15 (10%)
	<i>Contacting family</i>	60 (40%)	<i>Getting phone numbers</i> 47 (31%)
	<i>Childcare</i>	4 (3%)	<i>Other</i> 9 (6%)
	<i>Money worries</i>	36 (24%)	<i>Did not have any problems</i> 29 (19%)
	<i>Feeling depressed or suicidal</i>	40 (27%)	
<b>Q3.5</b>	<b>Did you receive any help/support from staff in dealing with these problems when you first arrived here?</b>		
	<i>Yes</i>		47 (34%)
	<i>No</i>		64 (46%)
	<i>Did not have any problems</i>		29 (21%)
<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>		
	<i>Tobacco</i>		122 (81%)
	<i>A shower</i>		62 (41%)
	<i>A free telephone call</i>		94 (62%)
	<i>Something to eat</i>		118 (78%)
	<i>PIN phone credit</i>		65 (43%)
	<i>Toiletries/ basic items</i>		104 (69%)
	<i>Did not receive anything</i>		5 (3%)
<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>		
	<i>Chaplain</i>		75 (52%)
	<i>Someone from health services</i>		94 (65%)
	<i>A Listener/Samaritans</i>		46 (32%)
	<i>Prison shop/ canteen</i>		26 (18%)
	<i>Did not have access to any of these</i>		26 (18%)
<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>		59 (42%)
	<i>What support was available for people feeling depressed or suicidal</i>		55 (40%)
	<i>How to make routine requests (applications)</i>		48 (35%)
	<i>Your entitlement to visits</i>		39 (28%)
	<i>Health services</i>		58 (42%)
	<i>Chaplaincy</i>		61 (44%)
	<i>Not offered any information</i>		44 (32%)

<b>Q3.9</b>	<b>Did you feel safe on your first night here?</b>	
	Yes	99 (66%)
	No	43 (28%)
	Don't remember	9 (6%)
<b>Q3.10</b>	<b>How soon after you arrived here did you go on an induction course?</b>	
	Have not been on an induction course	18 (12%)
	Within the first week	103 (69%)
	More than a week	21 (14%)
	Don't remember	8 (5%)
<b>Q3.11</b>	<b>Did the induction course cover everything you needed to know about the prison?</b>	
	Have not been on an induction course	18 (12%)
	Yes	61 (40%)
	No	59 (39%)
	Don't remember	13 (9%)
<b>Q3.12</b>	<b>How soon after you arrived here did you receive an education ('skills for life') assessment?</b>	
	Did not receive an assessment	27 (18%)
	Within the first week	79 (53%)
	More than a week	33 (22%)
	Don't remember	9 (6%)

#### 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
	Communicate with your solicitor or legal representative?	22 (15%)	32 (22%)	18 (13%)	31 (22%)	28 (19%) 13 (9%)
	Attend legal visits?	25 (19%)	41 (30%)	25 (19%)	22 (16%)	9 (7%) 13 (10%)
	Get bail information?	12 (9%)	10 (8%)	24 (18%)	26 (20%)	23 (18%) 36 (27%)
<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>					
	Not had any letters					34 (23%)
	Yes					55 (38%)
	No					57 (39%)
<b>Q4.3</b>	<b>Can you get legal books in the library?</b>					
	Yes					59 (42%)
	No					16 (11%)
	Don't know					65 (46%)
<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		
	Do you normally have enough clean, suitable clothes for the week?	73 (50%)	68 (47%)	4 (3%)		
	Are you normally able to have a shower every day?	116 (80%)	27 (19%)	2 (1%)		
	Do you normally receive clean sheets every week?	43 (30%)	95 (66%)	7 (5%)		
	Do you normally get cell cleaning materials every week?	75 (53%)	61 (43%)	6 (4%)		
	Is your cell call bell normally answered within five minutes?	39 (27%)	96 (67%)	8 (6%)		
	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	73 (51%)	69 (48%)	1 (1%)		
	If you need to, can you normally get your stored property?	37 (27%)	59 (42%)	43 (31%)		

<b>Q4.5</b>	<b>What is the food like here?</b>	
	<i>Very good</i>	12 (8%)
	<i>Good</i>	50 (35%)
	<i>Neither</i>	40 (28%)
	<i>Bad</i>	23 (16%)
	<i>Very bad</i>	19 (13%)
<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>	16 (11%)
	<i>Yes</i>	70 (49%)
	<i>No</i>	58 (40%)
<b>Q4.7</b>	<b>Can you speak to a Listener at any time, if you want to?</b>	
	<i>Yes</i>	98 (66%)
	<i>No</i>	14 (9%)
	<i>Don't know</i>	36 (24%)
<b>Q4.8</b>	<b>Are your religious beliefs respected?</b>	
	<i>Yes</i>	94 (64%)
	<i>No</i>	13 (9%)
	<i>Don't know/ N/A</i>	39 (27%)
<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>	77 (52%)
	<i>No</i>	14 (9%)
	<i>Don't know/ N/A</i>	57 (39%)
<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>	27 (18%)
	<i>Very easy</i>	47 (32%)
	<i>Easy</i>	31 (21%)
	<i>Neither</i>	9 (6%)
	<i>Difficult</i>	10 (7%)
	<i>Very difficult</i>	7 (5%)
	<i>Don't know</i>	16 (11%)

### Section 5: Applications and complaints

<b>Q5.1</b>	<b>Is it easy to make an application?</b>	
	<i>Yes</i>	108 (73%)
	<i>No</i>	31 (21%)
	<i>Don't know</i>	8 (5%)
<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>	
		Not made one    Yes    No
	Are applications dealt with fairly?	22 (16%)    61 (44%)    56 (40%)
	Are applications dealt with quickly (within seven days)?	22 (16%)    37 (27%)    76 (56%)
<b>Q5.3</b>	<b>Is it easy to make a complaint?</b>	
	<i>Yes</i>	75 (51%)
	<i>No</i>	34 (23%)
	<i>Don't know</i>	37 (25%)

**Q5.4 Please answer the following questions about complaints (if you have not made a complaint please tick the 'not made one' option).**

	Not made one	Yes	No
Are complaints dealt with fairly?	68 (48%)	29 (20%)	45 (32%)
Are complaints dealt with quickly (within seven days)?	68 (50%)	19 (14%)	50 (36%)

**Q5.5 Have you ever been prevented from making a complaint when you wanted to?**

Yes	26 (19%)
No	112 (81%)

**Q5.6 How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?**

Don't know who they are	54 (38%)
Very easy	15 (11%)
Easy	14 (10%)
Neither	30 (21%)
Difficult	15 (11%)
Very difficult	13 (9%)

**Section 6: Incentive and earned privileges scheme****Q6.1 Have you been treated fairly in your experience of the incentive and earned privileges (IEP) scheme (this refers to enhanced, standard and basic levels)?**

Don't know what the IEP scheme is	23 (16%)
Yes	49 (34%)
No	51 (36%)
Don't know	20 (14%)

**Q6.2 Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels)**

Don't know what the IEP scheme is	23 (17%)
Yes	44 (32%)
No	52 (38%)
Don't know	17 (13%)

**Q6.3 In the last six months have any members of staff physically restrained you (C&R)?**

Yes	15 (11%)
No	127 (89%)

**Q6.4 If you have spent a night in the segregation/care and separation unit in the last six months, how were you treated by staff?**

I have not been to segregation in the last 6 months	107 (78%)
Very well	5 (4%)
Well	6 (4%)
Neither	13 (9%)
Badly	4 (3%)
Very badly	3 (2%)

**Section 7: Relationships with staff****Q7.1 Do most staff treat you with respect?**

Yes	111 (79%)
No	30 (21%)

<b>Q7.2</b>	<b>Is there a member of staff you can turn to for help if you have a problem?</b>	
	Yes	99 (69%)
	No	44 (31%)
<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>	
	Yes	49 (34%)
	No	96 (66%)
<b>Q7.4</b>	<b>How often do staff normally speak to you during association?</b>	
	<i>Do not go on association</i>	8 (6%)
	<i>Never</i>	27 (19%)
	<i>Rarely</i>	42 (29%)
	<i>Some of the time</i>	33 (23%)
	<i>Most of the time</i>	21 (15%)
	<i>All of the time</i>	13 (9%)
<b>Q7.5</b>	<b>When did you first meet your personal (named) officer?</b>	
	<i>I have not met him/her</i>	102 (73%)
	<i>In the first week</i>	10 (7%)
	<i>More than a week</i>	15 (11%)
	<i>Don't remember</i>	13 (9%)
<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>	102 (73%)
	<i>Very helpful</i>	13 (9%)
	<i>Helpful</i>	10 (7%)
	<i>Neither</i>	8 (6%)
	<i>Not very helpful</i>	5 (4%)
	<i>Not at all helpful</i>	2 (1%)

## Section 8: Safety

<b>Q8.1</b>	<b>Have you ever felt unsafe here?</b>	
	Yes	76 (52%)
	No	70 (48%)
<b>Q8.2</b>	<b>Do you feel unsafe now?</b>	
	Yes	34 (24%)
	No	110 (76%)
<b>Q8.3</b>	<b>In which areas have you felt unsafe? (Please tick all that apply to you.)</b>	
	<b>Never felt unsafe</b>	70 (52%)
	<i>Everywhere</i>	26 (19%)
	<i>Segregation unit</i>	4 (3%)
	<i>Association areas</i>	18 (13%)
	<i>Reception area</i>	6 (4%)
	<i>At the gym</i>	8 (6%)
	<i>In an exercise yard</i>	13 (10%)
	<i>At work</i>	5 (4%)
	<i>During movement</i>	16 (12%)
	<i>At education</i>	5 (4%)
	<i>At meal times</i>	11 (8%)
	<i>At health services</i>	6 (4%)
	<i>Visits area</i>	11 (8%)
	<i>In wing showers</i>	18 (13%)
	<i>In gym showers</i>	8 (6%)
	<i>In corridors/stairwells</i>	11 (8%)
	<i>On your landing/wing</i>	13 (10%)
	<i>In your cell</i>	15 (11%)
	<i>At religious services</i>	5 (4%)
<b>Q8.4</b>	<b>Have you been victimised by other prisoners here?</b>	
	Yes	40 (28%)
	No	102 (72%)

<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>	
	<i>Insulting remarks (about you or your family or friends)</i>	23 (16%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	11 (8%)
	<i>Sexual abuse</i>	2 (1%)
	<i>Feeling threatened or intimidated</i>	17 (12%)
	<i>Having your canteen/property taken</i>	12 (8%)
	<i>Medication</i>	7 (5%)
	<i>Debt</i>	6 (4%)
	<i>Drugs</i>	9 (6%)
	<i>Your race or ethnic origin</i>	6 (4%)
	<i>Your religion/religious beliefs</i>	6 (4%)
	<i>Your nationality</i>	2 (1%)
	<i>You are from a different part of the country than others</i>	5 (4%)
	<i>You are from a traveller community</i>	2 (1%)
	<i>Your sexual orientation</i>	3 (2%)
	<i>Your age</i>	1 (1%)
	<i>You have a disability</i>	4 (3%)
	<i>You were new here</i>	5 (4%)
	<i>Your offence/crime</i>	7 (5%)
	<i>Gang related issues</i>	5 (4%)
<b>Q8.6</b>	<b>Have you been victimised by staff here?</b>	
	Yes	30 (21%)
	No	112 (79%)
<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>	9 (6%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	2 (1%)
	<i>Sexual abuse</i>	0 (0%)
	<i>Feeling threatened or intimidated</i>	10 (7%)
	<i>Medication</i>	10 (7%)
	<i>Debt</i>	0 (0%)
	<i>Drugs</i>	4 (3%)
	<i>Your race or ethnic origin</i>	3 (2%)
	<i>Your religion/religious beliefs</i>	2 (1%)
	<i>Your nationality</i>	3 (2%)
	<i>You are from a different part of the country than others</i>	4 (3%)
	<i>You are from a traveller community</i>	2 (1%)
	<i>Your sexual orientation</i>	0 (0%)
	<i>Your age</i>	1 (1%)
	<i>You have a disability</i>	4 (3%)
	<i>You were new here</i>	4 (3%)
	<i>Your offence/ crime</i>	1 (1%)
	<i>Gang related issues</i>	3 (2%)
<b>Q8.8</b>	<b>If you have been victimised by prisoners or staff, did you report it?</b>	
	Not been victimised	86 (65%)
	Yes	14 (11%)
	No	32 (24%)

**Section 9: Health services****Q9.1 How easy or difficult is it to see the following people?**

	<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
The doctor	23 (17%)	4 (3%)	22 (16%)	19 (14%)	39 (28%)	32 (23%)
The nurse	19 (14%)	9 (7%)	39 (28%)	17 (12%)	30 (22%)	23 (17%)
The dentist	28 (21%)	1 (1%)	7 (5%)	11 (8%)	27 (20%)	62 (46%)

**Q9.2 What do you think of the quality of the health service from the following people?**

	<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
The doctor	26 (19%)	11 (8%)	30 (22%)	26 (19%)	26 (19%)	17 (13%)
The nurse	22 (16%)	18 (13%)	41 (30%)	25 (18%)	15 (11%)	15 (11%)
The dentist	52 (39%)	2 (1%)	9 (7%)	23 (17%)	21 (16%)	28 (21%)

**Q9.3 What do you think of the overall quality of the health services here?**

<i>Not been</i>	18 (13%)
<i>Very good</i>	9 (7%)
<i>Good</i>	28 (20%)
<i>Neither</i>	29 (21%)
<i>Bad</i>	30 (22%)
<i>Very bad</i>	23 (17%)

**Q9.4 Are you currently taking medication?**

Yes	69 (49%)
No	72 (51%)

**Q9.5 If you are taking medication, are you allowed to keep some/ all of it in your own cell?**

<i>Not taking medication</i>	72 (51%)
<i>Yes, all my meds</i>	21 (15%)
<i>Yes, some of my meds</i>	15 (11%)
<i>No</i>	33 (23%)

**Q9.6 Do you have any emotional or mental health problems?**

Yes	53 (38%)
No	86 (62%)

**Q9.7 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)?**

<i>Do not have any emotional or mental health problems</i>	86 (62%)
Yes	20 (14%)
No	32 (23%)

**Section 10: Drugs and alcohol****Q10.1 Did you have a problem with drugs when you came into this prison?**

Yes	48 (35%)
No	88 (65%)

**Q10.2 Did you have a problem with alcohol when you came into this prison?**

Yes	31 (23%)
No	106 (77%)

<b>Q10.3</b>	<b>Is it easy or difficult to get illegal drugs in this prison?</b>	
	Very easy	55 (39%)
	Easy	20 (14%)
	Neither	1 (1%)
	Difficult	2 (1%)
	Very difficult	2 (1%)
	Don't know	60 (43%)
<b>Q10.4</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	Very easy	11 (8%)
	Easy	14 (10%)
	Neither	8 (6%)
	Difficult	9 (6%)
	Very difficult	11 (8%)
	Don't know	87 (62%)
<b>Q10.5</b>	<b>Have you developed a problem with illegal drugs since you have been in this prison?</b>	
	Yes	19 (14%)
	No	120 (86%)
<b>Q10.6</b>	<b>Have you developed a problem with diverted medication since you have been in this prison?</b>	
	Yes	10 (7%)
	No	130 (93%)
<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>	85 (63%)
	Yes	24 (18%)
	No	25 (19%)
<b>Q10.8</b>	<b>Have you received any support or help (for example substance misuse teams) for your alcohol problem, whilst in this prison?</b>	
	<i>Did not / do not have an alcohol problem</i>	106 (79%)
	Yes	14 (10%)
	No	15 (11%)
<b>Q10.9</b>	<b>Was the support or help you received, whilst in this prison, helpful?</b>	
	<i>Did not have a problem/ did not receive help</i>	102 (78%)
	Yes	18 (14%)
	No	11 (8%)

### Section 11: 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	20 (14%)	7 (5%)	32 (23%)	26 (19%)	25 (18%)	28 (20%)
	Vocational or skills training	26 (19%)	9 (7%)	41 (31%)	27 (20%)	13 (10%)	18 (13%)
	Education (including basic skills)	16 (12%)	15 (11%)	52 (39%)	28 (21%)	9 (7%)	12 (9%)
	Offending behaviour programmes	50 (38%)	2 (2%)	16 (12%)	28 (21%)	20 (15%)	16 (12%)
<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>					51 (38%)	
	Prison job					46 (35%)	
	Vocational or skills training					7 (5%)	

Education (including basic skills)	42 (32%)
Offending behaviour programmes	4 (3%)

**Q11.3 If you have been involved in any of the following, while in this prison, do you think they will help you on release?**

	<i>Not been involved</i>	Yes	No	<i>Don't know</i>
Prison job	46 (38%)	25 (21%)	36 (30%)	14 (12%)
Vocational or skills training	56 (54%)	25 (24%)	14 (13%)	9 (9%)
Education (including basic skills)	39 (35%)	34 (31%)	21 (19%)	16 (15%)
Offending behaviour programmes	55 (54%)	18 (18%)	15 (15%)	14 (14%)

**Q11.4 How often do you usually go to the library?**

<i>Don't want to go</i>	21 (15%)
Never	35 (25%)
<i>Less than once a week</i>	32 (23%)
<i>About once a week</i>	44 (32%)
<i>More than once a week</i>	7 (5%)

**Q11.5 Does the library have a wide enough range of materials to meet your needs?**

<i>Don't use it</i>	38 (28%)
Yes	59 (43%)
No	41 (30%)

**Q11.6 How many times do you usually go to the gym each week?**

<i>Don't want to go</i>	26 (19%)
0	28 (21%)
1 to 2	26 (19%)
3 to 5	51 (38%)
<i>More than 5</i>	5 (4%)

**Q11.7 How many times do you usually go outside for exercise each week?**

<i>Don't want to go</i>	6 (4%)
0	10 (7%)
1 to 2	42 (30%)
3 to 5	31 (22%)
<i>More than 5</i>	50 (36%)

**Q11.8 How many times do you usually have association each week?**

<i>Don't want to go</i>	7 (5%)
0	5 (4%)
1 to 2	15 (11%)
3 to 5	34 (24%)
<i>More than 5</i>	78 (56%)

**Q11.9 How many hours do you usually spend out of your cell on a weekday (please include hours at education, at work etc)?**

<i>Less than 2 hours</i>	32 (23%)
<i>2 to less than 4 hours</i>	41 (30%)
<i>4 to less than 6 hours</i>	30 (22%)
<i>6 to less than 8 hours</i>	6 (4%)
<i>8 to less than 10 hours</i>	6 (4%)
<i>10 hours or more</i>	14 (10%)
<i>Don't know</i>	9 (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>	
	Yes	49 (35%)
	No	90 (65%)
<b>Q12.2</b>	<b>Have you had any problems with sending or receiving mail (letters or parcels)?</b>	
	Yes	72 (52%)
	No	66 (48%)
<b>Q12.3</b>	<b>Have you had any problems getting access to the telephones?</b>	
	Yes	63 (45%)
	No	77 (55%)
<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>	23 (16%)
	<i>Very easy</i>	15 (11%)
	<i>Easy</i>	27 (19%)
	<i>Neither</i>	11 (8%)
	<i>Difficult</i>	28 (20%)
	<i>Very difficult</i>	28 (20%)
	<i>Don't know</i>	8 (6%)

## 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>	51 (37%)
	Yes	41 (29%)
	No	47 (34%)
<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>	98 (71%)
	<i>No contact</i>	28 (20%)
	<i>Letter</i>	9 (6%)
	<i>Phone</i>	4 (3%)
	<i>Visit</i>	7 (5%)
<b>Q13.3</b>	<b>Do you have a named offender supervisor in this prison?</b>	
	Yes	24 (18%)
	No	111 (82%)
<b>Q13.4</b>	<b>Do you have a sentence plan?</b>	
	<i>Not sentenced</i>	51 (36%)
	Yes	28 (20%)
	No	61 (44%)
<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>	112 (81%)
	<i>Very involved</i>	4 (3%)
	<i>Involved</i>	5 (4%)
	<i>Neither</i>	8 (6%)
	<i>Not very involved</i>	5 (4%)
	<i>Not at all involved</i>	5 (4%)

<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>		112 (81%)
	<i>Nobody</i>		19 (14%)
	<i>Offender supervisor</i>		3 (2%)
	<i>Offender manager</i>		3 (2%)
	<i>Named/ personal officer</i>		2 (1%)
	<i>Staff from other departments</i>		2 (1%)
<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>		112 (81%)
	<i>Yes</i>		8 (6%)
	<i>No</i>		10 (7%)
	<i>Don't know</i>		8 (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>		112 (82%)
	<i>Yes</i>		13 (9%)
	<i>No</i>		5 (4%)
	<i>Don't know</i>		7 (5%)
<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>		112 (82%)
	<i>Yes</i>		7 (5%)
	<i>No</i>		7 (5%)
	<i>Don't know</i>		11 (8%)
<b>Q13.10</b>	<b>Do you have a needs based custody plan?</b>		
	<i>Yes</i>		14 (11%)
	<i>No</i>		57 (45%)
	<i>Don't know</i>		56 (44%)
<b>Q13.11</b>	<b>Do you feel that any member of staff has helped you to prepare for your release?</b>		
	<i>Yes</i>		16 (13%)
	<i>No</i>		112 (88%)
<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>	<i>Yes</i> <i>No</i>
	Employment	27 (20%)	34 (26%) 71 (54%)
	Accommodation	25 (20%)	41 (32%) 61 (48%)
	Benefits	26 (21%)	44 (35%) 55 (44%)
	Finances	25 (20%)	35 (29%) 62 (51%)
	Education	28 (23%)	33 (28%) 59 (49%)
	Drugs and alcohol	35 (29%)	39 (32%) 47 (39%)
<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>		51 (37%)
	<i>Yes</i>		44 (32%)
	<i>No</i>		43 (31%)

## Main comparator and comparator to last time



### Prisoner survey responses HMP Bedford 2016

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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<b>Number of completed questionnaires returned</b>		<b>153</b>	<b>6,070</b>	<b>153</b>	<b>158</b>
<b>SECTION 1: General information</b>					
1.2	Are you under 21 years of age?	6%	6%	6%	4%
1.3	Are you sentenced?	66%	68%	66%	61%
1.3	Are you on recall?	12%	9%	12%	14%
1.4	Is your sentence less than 12 months?	20%	20%	20%	28%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	2%	3%	2%	1%
1.5	Are you a foreign national?	13%	13%	13%	19%
1.6	Do you understand spoken English?	95%	97%	95%	95%
1.7	Do you understand written English?	93%	96%	93%	92%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	33%	25%	33%	32%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	8%	5%	8%	6%
1.1	Are you Muslim?	18%	12%	18%	18%
1.11	Are you homosexual/gay or bisexual?	3%	3%	3%	3%
1.12	Do you consider yourself to have a disability?	23%	25%	23%	19%
1.13	Are you a veteran (ex-armed services)?	6%	5%	6%	7%
1.14	Is this your first time in prison?	44%	33%	44%	36%
1.15	Do you have any children under the age of 18?	54%	54%	54%	52%
<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?	26%	22%	26%	25%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	39%	39%	39%	24%
2.3	Were you offered a toilet break?	12%	8%	12%	6%
2.4	Was the van clean?	58%	57%	58%	56%
2.5	Did you feel safe?	78%	74%	78%	74%
2.6	Were you treated well/very well by the escort staff?	65%	67%	65%	62%
2.7	Before you arrived here were you told that you were coming here?	65%	64%	65%	60%
2.7	Before you arrived here did you receive any written information about coming here?	3%	3%	3%	2%
2.8	When you first arrived here did your property arrive at the same time as you?	77%	78%	77%	75%

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<b>SECTION 3: Reception, first night and induction</b>					
3.1	Were you in reception for less than 2 hours?	37%	40%	37%	44%
3.2	When you were searched in reception, was this carried out in a respectful way?	85%	77%	85%	83%
3.3	Were you treated well/very well in reception?	70%	62%	70%	68%
When you first arrived:					
3.4	Did you have any problems?	81%	77%	81%	80%
3.4	Did you have any problems with loss of property?	15%	16%	15%	19%
3.4	Did you have any housing problems?	27%	22%	27%	23%
3.4	Did you have any problems contacting employers?	8%	5%	8%	9%
3.4	Did you have any problems contacting family?	40%	34%	40%	39%
3.4	Did you have any problems ensuring dependants were being looked after?	3%	3%	3%	7%
3.4	Did you have any money worries?	24%	24%	24%	27%
3.4	Did you have any problems with feeling depressed or suicidal?	27%	24%	27%	26%
3.4	Did you have any physical health problems?	16%	18%	16%	16%
3.4	Did you have any mental health problems?	28%	24%	28%	23%
3.4	Did you have any problems with needing protection from other prisoners?	10%	8%	10%	6%
3.4	Did you have problems accessing phone numbers?	31%	32%	31%	34%
For those with problems:					
3.5	Did you receive any help/ support from staff in dealing with these problems?	42%	31%	42%	37%
When you first arrived here, were you offered any of the following:					
3.6	Tobacco?	81%	79%	81%	84%
3.6	A shower?	41%	29%	41%	36%
3.6	A free telephone call?	62%	53%	62%	60%
3.6	Something to eat?	78%	70%	78%	77%
3.6	PIN phone credit?	43%	51%	43%	36%
3.6	Toiletries/ basic items?	69%	57%	69%	66%
<b>SECTION 3: Reception, first night and induction continued</b>					
When you first arrived here did you have access to the following people:					
3.7	The chaplain or a religious leader?	52%	45%	52%	51%
3.7	Someone from health services?	65%	66%	65%	69%
3.7	A Listener/Samaritans?	32%	31%	32%	24%
3.7	Prison shop/ canteen?	18%	21%	18%	16%
When you first arrived here were you offered information about any of the following:					
3.8	What was going to happen to you?	42%	41%	42%	38%
3.8	Support was available for people feeling depressed or suicidal?	40%	36%	40%	34%

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3.8	How to make routine requests?	35%	34%	35%	34%
3.8	Your entitlement to visits?	28%	33%	28%	34%
3.8	Health services?	42%	43%	42%	49%
3.8	The chaplaincy?	44%	39%	44%	45%
3.9	Did you feel safe on your first night here?	66%	70%	66%	74%
3.10	Have you been on an induction course?	88%	74%	88%	89%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	46%	49%	46%	52%
3.12	Did you receive an education (skills for life) assessment?	82%	74%	82%	80%
<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?	38%	36%	38%	44%
4.1	Attend legal visits?	49%	50%	49%	53%
4.1	Get bail information?	17%	17%	17%	24%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	38%	42%	38%	33%
4.3	Can you get legal books in the library?	42%	35%	42%	44%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	50%	49%	50%	59%
4.4	Are you normally able to have a shower every day?	80%	74%	80%	89%
4.4	Do you normally receive clean sheets every week?	30%	68%	30%	48%
4.4	Do you normally get cell cleaning materials every week?	53%	51%	53%	81%
4.4	Is your cell call bell normally answered within five minutes?	27%	25%	27%	39%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	51%	56%	51%	62%
4.4	Can you normally get your stored property, if you need to?	27%	20%	27%	25%
4.5	Is the food in this prison good/very good?	43%	21%	43%	27%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	49%	47%	49%	47%
4.7	Are you able to speak to a Listener at any time, if you want to?	66%	52%	66%	51%
4.8	Are your religious beliefs are respected?	64%	48%	64%	56%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	52%	50%	52%	54%
4.10	Is it easy/very easy to attend religious services?	53%	44%	53%	56%
<b>SECTION 5: Applications and complaints</b>					
5.1	Is it easy to make an application?	74%	72%	74%	74%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	52%	48%	52%	51%
5.2	Do you feel applications are dealt with quickly (within seven days)?	33%	33%	33%	44%

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5.3	Is it easy to make a complaint?	51%	49%	51%	55%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	39%	28%	39%	39%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	28%	23%	28%	34%
5.5	Have you ever been prevented from making a complaint when you wanted to?	19%	21%	19%	21%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	21%	18%	21%	21%
<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%	40%	34%	43%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	32%	39%	32%	49%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	11%	10%	11%	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?	35%	35%	35%	27%
<b>SECTION 7: Relationships with staff</b>					
7.1	Do most staff, in this prison, treat you with respect?	79%	72%	79%	79%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	69%	67%	69%	76%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	34%	26%	34%	32%
7.4	Do staff normally speak to you most of the time/all of the time during association?	24%	17%	24%	22%
7.5	Do you have a personal officer?	27%	34%	27%	52%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	60%	67%	60%	71%
<b>SECTION 8: Safety</b>					
8.1	Have you ever felt unsafe here?	52%	47%	52%	33%
8.2	Do you feel unsafe now?	24%	21%	24%	14%
8.4	Have you been victimised by other prisoners here?	28%	32%	28%	21%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	16%	13%	16%	9%
8.5	Hit, kicked or assaulted you?	8%	9%	8%	7%
8.5	Sexually abused you?	1%	2%	1%	1%
8.5	Threatened or intimidated you?	12%	17%	12%	13%
8.5	Taken your canteen/property?	8%	8%	8%	7%
8.5	Victimised you because of medication?	5%	5%	5%	5%
8.5	Victimised you because of debt?	4%	4%	4%	3%
8.5	Victimised you because of drugs?	6%	5%	6%	3%
8.5	Victimised you because of your race or ethnic origin?	4%	4%	4%	5%
8.5	Victimised you because of your religion/religious beliefs?	4%	3%	4%	4%
8.5	Victimised you because of your nationality?	1%	3%	1%	2%

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8.5	Victimised you because you were from a different part of the country?	4%	4%	4%	3%
8.5	Victimised you because you are from a Traveller community?	1%	2%	1%	1%
8.5	Victimised you because of your sexual orientation?	2%	1%	2%	1%
8.5	Victimised you because of your age?	1%	3%	1%	2%
8.5	Victimised you because you have a disability?	3%	4%	3%	1%
8.5	Victimised you because you were new here?	4%	7%	4%	4%
8.5	Victimised you because of your offence/crime?	5%	6%	5%	2%
8.5	Victimised you because of gang related issues?	4%	5%	4%	3%
<b>SECTION 8: Safety continued</b>					
8.6	Have you been victimised by staff here?	21%	33%	21%	25%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	6%	12%	6%	10%
8.7	Hit, kicked or assaulted you?	1%	6%	1%	7%
8.7	Sexually abused you?	0%	1%	0%	1%
8.7	Threatened or intimidated you?	7%	13%	7%	12%
8.7	Victimised you because of medication?	7%	6%	7%	5%
8.7	Victimised you because of debt?	0%	2%	0%	3%
8.7	Victimised you because of drugs?	3%	3%	3%	3%
8.7	Victimised you because of your race or ethnic origin?	2%	4%	2%	3%
8.7	Victimised you because of your religion/religious beliefs?	1%	4%	1%	4%
8.7	Victimised you because of your nationality?	2%	3%	2%	3%
8.7	Victimised you because you were from a different part of the country?	3%	3%	3%	2%
8.7	Victimised you because you are from a Traveller community?	1%	1%	1%	1%
8.7	Victimised you because of your sexual orientation?	0%	1%	0%	1%
8.7	Victimised you because of your age?	1%	2%	1%	0%
8.7	Victimised you because you have a disability?	3%	3%	3%	0%
8.7	Victimised you because you were new here?	3%	5%	3%	5%
8.7	Victimised you because of your offence/crime?	1%	5%	1%	5%
8.7	Victimised you because of gang related issues?	2%	3%	2%	3%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	31%	34%	31%	41%
<b>SECTION 9: Health services</b>					
9.1	Is it easy/very easy to see the doctor?	19%	21%	19%	25%
9.1	Is it easy/very easy to see the nurse?	35%	42%	35%	36%
9.1	Is it easy/very easy to see the dentist?	6%	9%	6%	20%

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	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?	37%	40%	37%	43%
9.2	The nurse?	52%	51%	52%	53%
9.2	The dentist?	13%	29%	13%	40%
9.3	The overall quality of health services?	31%	36%	31%	41%
9.4	Are you currently taking medication?	49%	52%	49%	55%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	52%	59%	52%	51%
9.6	Do you have any emotional well being or mental health problems?	38%	41%	38%	38%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	39%	42%	39%	44%
<b>SECTION 10: Drugs and alcohol</b>					
10.1	Did you have a problem with drugs when you came into this prison?	35%	33%	35%	35%
10.2	Did you have a problem with alcohol when you came into this prison?	23%	21%	23%	24%
10.3	Is it easy/very easy to get illegal drugs in this prison?	54%	38%	54%	29%
10.4	Is it easy/very easy to get alcohol in this prison?	18%	17%	18%	9%
10.5	Have you developed a problem with drugs since you have been in this prison?	14%	10%	14%	4%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	7%	8%	7%	6%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	49%	56%	49%	57%
10.8	Have you received any support or help with your alcohol problem while in this prison?	48%	54%	48%	42%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	62%	77%	62%	82%
<b>SECTION 11: Activities</b>					
	Is it very easy/ easy to get into the following activities:				
11.1	A prison job?	28%	31%	28%	25%
11.1	Vocational or skills training?	37%	28%	37%	25%
11.1	Education (including basic skills)?	51%	44%	51%	42%
11.1	Offending behaviour programmes?	14%	17%	14%	19%
	Are you currently involved in any of the following activities:				
11.2	A prison job?	35%	44%	35%	25%
11.2	Vocational or skills training?	5%	8%	5%	8%
11.2	Education (including basic skills)?	32%	23%	32%	33%
11.2	Offending behaviour programmes?	3%	7%	3%	3%

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	Percentages which are not highlighted show there is no significant difference				
11.3	Have you had a job while in this prison?	62%	68%	62%	50%
	For those who have had a prison job while in this prison:				
11.3	Do you feel the job will help you on release?	33%	40%	33%	43%
11.3	Have you been involved in vocational or skills training while in this prison?	46%	56%	46%	44%
	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?	52%	44%	52%	48%
11.3	Have you been involved in education while in this prison?	65%	66%	65%	56%
	For those who have been involved in education while in this prison:				
11.3	Do you feel the education will help you on release?	48%	50%	48%	61%
11.3	Have you been involved in offending behaviour programmes while in this prison?	46%	53%	46%	40%
	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?	38%	40%	38%	40%
11.4	Do you go to the library at least once a week?	37%	28%	37%	37%
11.5	Does the library have a wide enough range of materials to meet your needs?	43%	32%	43%	39%
11.6	Do you go to the gym three or more times a week?	41%	23%	41%	49%
11.7	Do you go outside for exercise three or more times a week?	58%	40%	58%	44%
11.8	Do you go on association more than five times each week?	56%	42%	56%	63%
11.9	Do you spend ten or more hours out of your cell on a weekday?	10%	9%	10%	3%
<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?	35%	31%	35%	40%
12.2	Have you had any problems with sending or receiving mail?	52%	49%	52%	48%
12.3	Have you had any problems getting access to the telephones?	45%	34%	45%	29%
12.4	Is it easy/ very easy for your friends and family to get here?	30%	35%	30%	38%
<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?	47%	61%	47%	56%
	For those who are sentenced what type of contact have you had with your offender manager:				
13.2	No contact?	69%	43%	69%	58%
13.2	Contact by letter?	22%	28%	22%	25%
13.2	Contact by phone?	10%	13%	10%	15%
13.2	Contact by visit?	17%	36%	17%	23%
13.3	Do you have a named offender supervisor in this prison?	18%	30%	18%	28%
	For those who are sentenced:				
13.4	Do you have a sentence plan?	31%	33%	31%	28%
	For those with a sentence plan:				
13.5	Were you involved/very involved in the development of your plan?	34%	55%	34%	56%

## Main comparator and comparator to last time

### Key to tables

		HMP Bedford 2016	Local prisons comparator	HMP Bedford 2016	HMP Bedford 2014
	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				
	Who is working with you to achieve your sentence plan targets:				
13.6	Nobody?	74%	46%	74%	37%
13.6	Offender supervisor?	12%	32%	12%	37%
13.6	Offender manager?	12%	26%	12%	29%
13.6	Named/ personal officer?	7%	11%	7%	12%
13.6	Staff from other departments?	7%	18%	7%	12%
	For those with a sentence plan:				
13.7	Can you achieve any of your sentence plan targets in this prison?	31%	53%	31%	37%
13.8	Are there plans for you to achieve any of your targets in another prison?	52%	28%	52%	21%
13.9	Are there plans for you to achieve any of your targets in the community?	28%	31%	28%	41%
13.10	Do you have a needs based custody plan?	11%	7%	11%	8%
13.11	Do you feel that any member of staff has helped you to prepare for release?	13%	11%	13%	11%
	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?	32%	26%	32%	37%
13.12	Accommodation?	40%	32%	40%	41%
13.12	Benefits?	44%	34%	44%	45%
13.12	Finances?	36%	21%	36%	34%
13.12	Education?	36%	27%	36%	35%
13.12	Drugs and alcohol?	45%	40%	45%	44%
	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?	51%	45%	51%	43%

## Diversity analysis



### Key question responses (ethnicity, foreign national and religion) HMP Bedford 2016

**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

Any percentage highlighted in green is significantly better		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British 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							
<b>Number of completed questionnaires returned</b>		<b>48</b>	<b>96</b>	<b>19</b>	<b>128</b>	<b>26</b>	<b>122</b>
1.3	Are you sentenced?	57%	69%	57%	67%	68%	65%
1.5	Are you a foreign national?	25%	6%			21%	12%
1.6	Do you understand spoken English?	96%	96%	79%	98%	100%	94%
1.7	Do you understand written English?	93%	95%	63%	98%	96%	92%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			65%	28%	96%	19%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	2%	11%	16%	8%	0%	10%
1.1	Are you Muslim?	52%	1%	26%	16%		
1.12	Do you consider yourself to have a disability?	19%	23%	10%	26%	19%	23%
1.13	Are you a veteran (ex-armed services)?	4%	5%	16%	4%	4%	6%
1.14	Is this your first time in prison?	53%	41%	68%	41%	52%	43%
2.6	Were you treated well/very well by the escort staff?	73%	65%	72%	65%	76%	65%
2.7	Before you arrived here were you told that you were coming here?	66%	64%	55%	67%	71%	65%
3.2	When you were searched in reception, was this carried out in a respectful way?	86%	87%	74%	88%	84%	86%
3.3	Were you treated well/very well in reception?	73%	72%	57%	72%	74%	70%
3.4	Did you have any problems when you first arrived?	75%	82%	72%	82%	72%	83%
3.7	Did you have access to someone from health care when you first arrived here?	55%	71%	59%	66%	52%	68%
3.9	Did you feel safe on your first night here?	64%	68%	48%	69%	61%	67%
3.10	Have you been on an induction course?	83%	90%	67%	91%	81%	90%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	40%	39%	37%	38%	48%	35%

## Diversity analysis

### Key to tables

Any percentage highlighted in green is significantly better		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British 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?	50%	51%	43%	53%	58%	49%
4.4	Are you normally able to have a shower every day?	83%	79%	84%	80%	84%	80%
4.4	Is your cell call bell normally answered within five minutes?	31%	28%	37%	26%	33%	27%
4.5	Is the food in this prison good/very good?	41%	47%	26%	48%	27%	47%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	49%	50%	57%	48%	40%	51%
4.7	Are you able to speak to a Listener at any time, if you want to?	56%	74%	48%	71%	58%	68%
4.8	Do you feel your religious beliefs are respected?	69%	63%	55%	66%	88%	59%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	50%	54%	26%	58%	50%	52%
5.1	Is it easy to make an application?	70%	77%	63%	75%	68%	74%
5.3	Is it easy to make a complaint?	36%	59%	39%	53%	42%	54%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	34%	36%	26%	35%	39%	33%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	47%	28%	24%	34%	37%	32%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	11%	9%	16%	9%	8%	10%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	82%	81%	74%	80%	82%	78%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	76%	68%	53%	71%	70%	68%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	26%	24%	21%	24%	24%	24%
7.4	Do you have a personal officer?	32%	27%	24%	27%	38%	25%
8.1	Have you ever felt unsafe here?	47%	54%	57%	52%	48%	52%
8.2	Do you feel unsafe now?	28%	21%	32%	23%	34%	21%
8.3	Have you been victimised by other prisoners?	21%	30%	21%	30%	24%	29%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	4%	15%	5%	13%	4%	14%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	7%	2%	5%	4%	4%	4%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	5%	5%	4%	0%	5%
8.5	Have you been victimised because of your nationality? (By prisoners)	2%	1%	0%	2%	4%	1%

## Diversity analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British 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						
8.5	Have you been victimised because you have a disability? (By prisoners)	0%	5%	0%	3%	0%	4%
8.6	Have you been victimised by a member of staff?	13%	22%	28%	20%	17%	22%
8.7	Have you ever felt threatened or intimidated by staff here?	7%	8%	11%	7%	4%	8%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	2%	1%	11%	1%	0%	3%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	1%	0%	2%	4%	1%
8.7	Have you been victimised because of your nationality? (By staff)	4%	0%	17%	0%	0%	3%
8.7	Have you been victimised because you have a disability? (By staff)	0%	4%	0%	3%	4%	3%
9.1	Is it easy/very easy to see the doctor?	18%	19%	0%	22%	17%	19%
9.1	Is it easy/ very easy to see the nurse?	31%	38%	37%	35%	26%	37%
9.4	Are you currently taking medication?	39%	55%	33%	53%	35%	52%
9.6	Do you feel you have any emotional well being/mental health issues?	22%	46%	22%	42%	18%	43%
10.3	Is it easy/very easy to get illegal drugs in this prison?	48%	55%	24%	58%	52%	54%
11.2	Are you currently working in the prison?	29%	40%	11%	38%	29%	36%
11.2	Are you currently undertaking vocational or skills training?	4%	6%	0%	6%	4%	6%
11.2	Are you currently in education (including basic skills)?	38%	28%	35%	30%	46%	28%
11.2	Are you currently taking part in an offending behaviour programme?	2%	4%	6%	3%	4%	2%
11.4	Do you go to the library at least once a week?	44%	31%	47%	34%	40%	36%
11.6	Do you go to the gym three or more times a week?	48%	39%	55%	41%	44%	41%
11.7	Do you go outside for exercise three or more times a week?	66%	55%	78%	56%	60%	58%
11.8	On average, do you go on association more than five times each week?	59%	56%	53%	56%	52%	58%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	9%	12%	17%	10%	4%	12%
12.2	Have you had any problems sending or receiving mail?	35%	57%	35%	56%	42%	55%
12.3	Have you had any problems getting access to the telephones?	43%	43%	33%	46%	40%	47%

## Diversity Analysis



### Key question responses (disability) HMP Bedford 2016

**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

	Any percentage highlighted in green is significantly better	<b>Consider themselves to have a disability</b>	<b>Do not consider themselves to have a disability</b>
	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>34</b>	<b>115</b>
1.3	Are you sentenced?	71%	64%
1.5	Are you a foreign national?	6%	16%
1.6	Do you understand spoken English?	100%	94%
1.7	Do you understand written English?	97%	92%
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%	35%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	6%	9%
1.1	Are you Muslim?	16%	18%
1.12	Do you consider yourself to have a disability?		
1.13	Are you a veteran (ex-armed services)?	9%	4%
1.14	Is this your first time in prison?	24%	51%
2.6	Were you treated well/very well by the escort staff?	56%	68%
2.7	Before you arrived here were you told that you were coming here?	64%	67%
3.2	When you were searched in reception, was this carried out in a respectful way?	91%	83%
3.3	Were you treated well/very well in reception?	65%	72%
3.4	Did you have any problems when you first arrived?	100%	74%
3.7	Did you have access to someone from health care when you first arrived here?	75%	63%
3.9	Did you feel safe on your first night here?	61%	66%
3.10	Have you been on an induction course?	94%	86%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	36%	38%
4.4	Are you normally offered enough clean, suitable clothes for the week?	50%	51%

## 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
	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 able to have a shower every day?	72%	83%
4.4	Is your cell call bell normally answered within five minutes?	25%	28%
4.5	Is the food in this prison good/very good?	53%	40%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	56%	46%
4.7	Are you able to speak to a Listener at any time, if you want to?	73%	65%
4.8	Do you feel your religious beliefs are respected?	73%	63%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	70%	48%
5.1	Is it easy to make an application?	82%	71%
5.3	Is it easy to make a complaint?	64%	49%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	37%	34%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	42%	30%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	22%	8%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	72%	81%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	69%	70%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	31%	22%
7.4	Do you have a personal officer?	23%	28%
8.1	Have you ever felt unsafe here?	69%	47%
8.2	Do you feel unsafe now?	38%	20%
8.3	Have you been victimised by other prisoners?	52%	21%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	26%	8%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	10%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	6%	4%
8.5	Have you been victimised because of your nationality? (By prisoners)	3%	1%
8.5	Have you been victimised because of your age? (By prisoners)	0%	0%

## Diversity Analysis

### Key to tables

	Any percentage highlighted in green is significantly better	<b>Consider themselves to have a disability</b>	<b>Do not consider themselves to have a disability</b>
	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		
8.5	Have you been victimised because you have a disability? (By prisoners)	6%	2%
8.6	Have you been victimised by a member of staff?	26%	20%
8.7	Have you ever felt threatened or intimidated by staff here?	16%	5%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	6%	1%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	6%	0%
8.7	Have you been victimised because of your nationality? (By staff)	3%	2%
8.7	Have you been victimised because of your age? (By staff)	0%	1%
8.7	Have you been victimised because you have a disability? (By staff)	10%	1%
9.1	Is it easy/very easy to see the doctor?	27%	17%
9.1	Is it easy/ very easy to see the nurse?	53%	30%
9.4	Are you currently taking medication?	70%	43%
9.6	Do you feel you have any emotional well being/mental health issues?	73%	27%
10.3	Is it easy/very easy to get illegal drugs in this prison?	60%	52%
11.2	Are you currently working in the prison?	32%	35%
11.2	Are you currently undertaking vocational or skills training?	3%	6%
11.2	Are you currently in education (including basic skills)?	29%	32%
11.2	Are you currently taking part in an offending behaviour programme?	3%	3%
11.4	Do you go to the library at least once a week?	37%	37%
11.6	Do you go to the gym three or more times a week?	38%	42%
11.7	Do you go outside for exercise three or more times a week?	65%	57%
11.8	On average, do you go on association more than five times each week?	58%	56%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	3%	12%
12.2	Have you had any problems sending or receiving mail?	52%	52%
12.3	Have you had any problems getting access to the telephones?	52%	43%



## Prisoner survey responses HMP Bedford 2016

**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

	Any percentage highlighted in green is significantly better	A, B & C Wings	D, E & F wings
	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>89</b>	<b>60</b>
<b>SECTION 1: General information</b>			
1.2	Are you under 21 years of age?	8%	2%
1.3	Are you sentenced?	68%	66%
1.3	Are you on recall?	7%	20%
1.4	Is your sentence less than 12 months?	17%	26%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	1%	3%
1.5	Are you a foreign national?	14%	12%
1.6	Do you understand spoken English?	93%	98%
1.7	Do you understand written English?	92%	95%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	35%	32%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	8%	9%
1.1	Are you Muslim?	18%	17%
1.11	Are you homosexual/gay or bisexual?	1%	5%
1.12	Do you consider yourself to have a disability?	14%	34%
1.13	Are you a veteran (ex-armed services)?	6%	3%
1.14	Is this your first time in prison?	55%	28%
1.15	Do you have any children under the age of 18?	51%	60%
<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?	29%	23%
2.5	Did you feel safe?	77%	79%
2.6	Were you treated well/very well by the escort staff?	68%	62%
2.7	Before you arrived here were you told that you were coming here?	62%	70%
2.8	When you first arrived here did your property arrive at the same time as you?	76%	78%
<b>SECTION 3: Reception, first night and induction</b>			
3.1	Were you in reception for less than 2 hours?	38%	34%
3.2	When you were searched in reception, was this carried out in a respectful way?	83%	88%
3.3	Were you treated well/very well in reception?	74%	63%

### Key to tables

	Any percentage highlighted in green is significantly better	A, B & C Wings	D, E & F wings
	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?	73%	90%
3.4	Did you have any problems with loss of property?	13%	18%
3.4	Did you have any housing problems?	19%	37%
3.4	Did you have any problems contacting employers?	8%	8%
3.4	Did you have any problems contacting family?	33%	53%
3.4	Did you have any problems ensuring dependants were being looked after?	4%	2%
3.4	Did you have any money worries?	20%	30%
3.4	Did you have any problems with feeling depressed or suicidal?	14%	40%
3.4	Did you have any physical health problems?	10%	25%
3.4	Did you have any mental health problems?	18%	40%
3.4	Did you have any problems with needing protection from other prisoners?	6%	15%
3.4	Did you have problems accessing phone numbers?	27%	38%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	86%	73%
3.6	A shower?	44%	38%
3.6	A free telephone call?	71%	52%
3.6	Something to eat?	81%	73%
3.6	PIN phone credit?	45%	44%
3.6	Toiletries/ basic items?	71%	67%
<b>SECTION 3: Reception, first night and induction continued</b>			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	47%	57%
3.7	Someone from health services?	64%	66%
3.7	A Listener/Samaritans?	28%	39%
3.7	Prison shop/ canteen?	20%	15%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	45%	39%
3.8	Support was available for people feeling depressed or suicidal?	39%	42%
3.8	How to make routine requests?	33%	37%
3.8	Your entitlement to visits?	29%	26%
3.8	Health services?	40%	44%
3.8	The chaplaincy?	40%	51%
3.9	Did you feel safe on your first night here?	72%	57%
3.10	Have you been on an induction course?	92%	83%
3.12	Did you receive an education (skills for life) assessment?	83%	80%

**Key to tables**

	Any percentage highlighted in green is significantly better	A, B & C Wings	D, E & F wings
	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?	39%	35%
4.1	Attend legal visits?	54%	38%
4.1	Get bail information?	20%	14%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	34%	44%
4.3	Can you get legal books in the library?	45%	38%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	59%	39%
4.4	Are you normally able to have a shower every day?	81%	80%
4.4	Do you normally receive clean sheets every week?	28%	34%
4.4	Do you normally get cell cleaning materials every week?	48%	61%
4.4	Is your cell call bell normally answered within five minutes?	16%	41%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	51%	51%
4.4	Can you normally get your stored property, if you need to?	30%	22%
4.5	Is the food in this prison good/very good?	40%	49%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	44%	55%
4.7	Are you able to speak to a Listener at any time, if you want to?	63%	71%
4.8	Are your religious beliefs are respected?	62%	65%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	44%	61%
4.10	Is it easy/very easy to attend religious services?	53%	54%
<b>SECTION 5: Applications and complaints</b>			
5.1	Is it easy to make an application?	72%	76%
5.3	Is it easy to make a complaint?	39%	69%
5.5	Have you ever been prevented from making a complaint when you wanted to?	20%	18%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	17%	23%
<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?	38%	32%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	42%	21%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	6%	16%
<b>SECTION 7: Relationships with staff</b>			
7.1	Do most staff, in this prison, treat you with respect?	78%	79%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	72%	64%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	34%	35%
7.4	Do staff normally speak to you most of the time/all of the time during association?	25%	23%
7.5	Do you have a personal officer?	29%	26%

**Key to tables**

	Any percentage highlighted in green is significantly better	A, B & C Wings	D, E & F wings
	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 8: Safety</b>			
8.1	Have you ever felt unsafe here?	48%	58%
8.2	Do you feel unsafe now?	22%	25%
8.4	Have you been victimised by other prisoners here?	22%	36%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	13%	22%
8.5	Hit, kicked or assaulted you?	5%	10%
8.5	Sexually abused you?	0%	3%
8.5	Threatened or intimidated you?	6%	21%
8.5	Taken your canteen/property?	5%	14%
8.5	Victimised you because of medication?	1%	10%
8.5	Victimised you because of debt?	1%	9%
8.5	Victimised you because of drugs?	2%	12%
8.5	Victimised you because of your race or ethnic origin?	2%	7%
8.5	Victimised you because of your religion/religious beliefs?	2%	7%
8.5	Victimised you because of your nationality?	2%	0%
8.5	Victimised you because you were from a different part of the country?	2%	5%
8.5	Victimised you because you are from a traveller community?	0%	3%
8.5	Victimised you because of your sexual orientation?	0%	5%
8.5	Victimised you because of your age?	0%	2%
8.5	Victimised you because you have a disability?	2%	3%
8.5	Victimised you because you were new here?	1%	7%
8.5	Victimised you because of your offence/crime?	4%	7%
8.5	Victimised you because of gang related issues?	1%	7%
<b>SECTION 8: Safety continued</b>			
8.6	Have you been victimised by staff here?	17%	28%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	7%	6%
8.7	Hit, kicked or assaulted you?	0%	3%
8.7	Sexually abused you?	0%	0%
8.7	Threatened or intimidated you?	5%	10%
8.7	Victimised you because of medication?	4%	12%
8.7	Victimised you because of debt?	0%	0%
8.7	Victimised you because of drugs?	1%	6%

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8.7	Victimised you because of your race or ethnic origin?	1%	3%
8.7	Victimised you because of your religion/religious beliefs?	0%	3%
8.7	Victimised you because of your nationality?	1%	3%
8.7	Victimised you because you were from a different part of the country?	2%	3%
8.7	Victimised you because you are from a traveller community?	0%	3%
8.7	Victimised you because of your sexual orientation?	0%	0%
8.7	Victimised you because of your age?	0%	2%
8.7	Victimised you because you have a disability?	2%	3%
8.7	Victimised you because you were new here?	2%	3%
8.7	Victimised you because of your offence/crime?	0%	2%
8.7	Victimised you because of gang related issues?	0%	6%
<b>SECTION 9: Health services</b>			
9.1	Is it easy/very easy to see the doctor?	10%	31%
9.1	Is it easy/very easy to see the nurse?	21%	55%
9.1	Is it easy/very easy to see the dentist?	4%	9%
9.4	Are you currently taking medication?	35%	68%
9.6	Do you have any emotional well being or mental health problems?	30%	48%
<b>SECTION 10: Drugs and alcohol</b>			
10.1	Did you have a problem with drugs when you came into this prison?	27%	47%
10.2	Did you have a problem with alcohol when you came into this prison?	15%	34%
10.3	Is it easy/very easy to get illegal drugs in this prison?	51%	58%
10.4	Is it easy/very easy to get alcohol in this prison?	13%	26%
10.5	Have you developed a problem with drugs since you have been in this prison?	10%	19%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	5%	10%
<b>SECTION 11: Activities</b>			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	28%	30%
11.1	Vocational or skills training?	40%	35%
11.1	Education (including basic skills)?	48%	53%
11.1	Offending Behaviour Programmes?	17%	10%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	35%	37%
11.2	Vocational or skills training?	6%	4%
11.2	Education (including basic skills)?	33%	25%
11.2	Offending Behaviour Programmes?	2%	2%
11.4	Do you go to the library at least once a week?	35%	38%

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11.5	Does the library have a wide enough range of materials to meet your needs?	42%	43%
11.6	Do you go to the gym three or more times a week?	43%	41%
11.7	Do you go outside for exercise three or more times a week?	61%	56%
11.8	Do you go on association more than five times each week?	53%	65%
11.9	Do you spend ten or more hours out of your cell on a weekday?	12%	9%
<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?	40%	26%
12.2	Have you had any problems with sending or receiving mail?	55%	47%
12.3	Have you had any problems getting access to the telephones?	46%	47%
12.4	Is it easy/ very easy for your friends and family to get here?	35%	23%
<b>SECTION 13: Preparation for release</b>			
13.3	Do you have a named offender supervisor in this prison?	19%	18%
13.10	Do you have a needs based custody plan?	10%	13%
13.11	Do you feel that any member of staff has helped you to prepare for release?	13%	11%