

Report on an unannounced inspection of

# **HMYOI Aylesbury**

by HM Chief Inspector of Prisons

**4–5, 24–28 April 2017**

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### **Glossary of terms**

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

# Introduction

HMYOI Aylesbury is a young offender institution (YOI) holding around 440 young adult men serving the longest sentences for this age group in the country. Most of the population are aged between 18 and 21. Around a third are over 21 and awaiting transfers to the adult prison estate.

At the last inspection of Aylesbury in 2015, we commented on debilitating staff shortages which had negative consequences for prisoners. It is disappointing to report that at this inspection little progress had been made, and some areas had deteriorated further. We found a combination of volatile and frustrated young people, too few staff and many who were inexperienced, and prisoners locked up for long periods with no activity and too little sentence progression. These factors led inexorably to some poor outcomes.

In particular, safety was a major concern. Nearly two-thirds of prisoners reported that they had felt unsafe at some point, and there were high levels of sometimes very serious violence. During the inspection, we were given several documents which commented that 'Aylesbury will always be a violent place', a phrase that was also repeated by some managers. Senior managers recognised that this fatalism about unacceptable levels of violence needed to change. Mechanisms of accountability for the very high use of force had effectively broken down, and management oversight was very poor. Hundreds of officers' accounts of use of force, which should have been completed immediately, had not been done at all.

There had been some improvements in our healthy prison test of respect, and health care and chaplaincy staff were particularly effective. However, many residential units were in poor condition and basic standards of decency were not being achieved. It was a sad indictment that prisoners in the segregation unit were reluctant to leave the unit not only because they felt safer there but also because they were more likely to receive showers and basic elements of regime than those on the main location. Weak management of equality and diversity work was a concern.

Some aspects of activities provision had improved, but time out of cell remained poor and activities were too limited. It was revealing that many young men behaved well when attending workshops and education, where they were able to engage in purposeful work and where staff had more time to talk with them as individuals. In resettlement, there had been a great deal of work to sustain the provision at a steady but insufficiently good level. Good staff were overwhelmed with work and unable to focus on the tasks they could do well given the time.

Aylesbury showed some areas of considerable potential. Most staff appeared remarkably resilient and wanted to improve the prison. There were excellent areas of innovation, such as the coffee roasting and retail workshop, which provided prisoners with valuable work skills in a realistic work environment. The Aylesbury Pathways Service continued to provide outstanding support to some of the most vulnerable and troubled young men in the prison estate.

If the cycle of poor inspections of Aylesbury is to be broken, these strengths need to be built upon. It is time to stop rediscovering the same problems and to take concerted action to deal with them at all levels. Some areas of concern, such as poor governance of use of force, could be addressed by the establishment. Others, such as staffing and difficulties with securing progressive transfers for prisoners, needed action from Her Majesty's Prison and Probation Service (HMPPS). The relatively new management team had a clear understanding of the challenges that lay ahead and the commitment to make progress, but needed support to implement our recommendations. Failure to do so yet again cannot be acceptable.

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

June 2017



# Fact page

## Task of the establishment

HMYOI Aylesbury is a closed young offender institution holding 18-21-year-old male prisoners serving from four years to life imprisonment.

## Prison status

Public

## Region

London and Thames Valley

## Number held

434

## Certified normal accommodation

437

## Operational capacity

444

## Date of last full inspection

1–12 June 2015

## Brief history

The prison was opened as a county gaol in 1847; in 1890 it became a women's prison. Two wings added in 1902 served initially as an 'inebriates centre', and in the 1930s as a girls' Borstal. In 1959, the prison was converted to house adult male prisoners, and in 1961 it changed again to house young male offenders aged between 17 and 21. In 1989, Aylesbury was designated as a long-term young offender institution. It holds the longest sentenced young adult males in the English prison system.

## Short description of residential units

- A, C to E wings - residential units
- B wing - smoke-free residential unit
- F wing - holds prisoners less able to cope on a mainstream wing and is an enabling environment
- G wing - working towards becoming an enabling environment
- Segregation unit

## Name of governor

Laura Sapwell

## Escort contractor

GeoAmey

## Health service provider

Care UK

Barnet, Enfield and Haringey Mental Health NHS Trust

## Learning and skills provider

Milton Keynes College

## Independent Monitoring Board chair

Colin Lambert



# 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 Her Majesty's Prison and Probation Service (HMPPS).

- **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 and the General Pharmaceutical Council (GPhC). 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 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 III respectively.
- A11 Findings from the survey of prisoners and a detailed description of the survey methodology can be found in Appendix IV 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 *The reception environment was good, but initial assessments of new arrivals did not focus enough on identifying vulnerabilities. Induction was poor. In our survey, almost a third of prisoners currently felt unsafe, and there had been a significant increase in violence. Violence reduction work was underdeveloped. Self-harm was high and the quality of case management documents was mixed. Security arrangements were generally adequate and there were concerted efforts to address a significant drug problem. The incentives and earned privileges (IEP) scheme was ineffective in behaviour management. Governance of use of force was poor. Prisoners were positive about their treatment in segregation but too many were there for long periods. Substance misuse services were good. **Outcomes for prisoners were poor against this healthy prison test.***

S2 *At the last inspection in June 2015 we found that outcomes for prisoners in Aylesbury were not sufficiently good against this healthy prison test. We made 17 recommendations in the area of safety. At this follow-up inspection we found that four of the recommendations had been achieved, three had been partially achieved and 10 had not been achieved.*

S3 Most prisoners had short journeys to Aylesbury, but many were delayed in vans outside reception over lunch time. The reception area was open and bright. However, reception staff had limited engagement with new arrivals, and assessment processes focused on processing them rather than identifying vulnerabilities. All prisoners received enhanced welfare checks during the first night in custody. There was no longer a formal general induction process. A third of those arriving in March 2017 had still not had an activities induction by the last week of April, and spent long periods locked in their cells as a result.

S4 In our survey, just under two-thirds of prisoners said they had felt unsafe at some time in the prison, and 29% felt unsafe currently. We met several prisoners who would not leave their cells, partly because they were afraid of being assaulted, and a number were in the segregation unit for the same reason. There had been a significant increase in prisoner violence against both staff and other prisoners, and some incidents were very serious. Investigations into violent incidents were not always completed, and there was little support for victims. The strategy for addressing violence had lapsed and a new strategy was still in development. More staff had been appointed for safer custody work, but most were routinely redeployed to other duties. Although there was a range of data to identify any patterns or themes, there was little action to address identified concerns.

S5 The prison had a safeguarding policy and good links with the local safeguarding adults board. Our concerns were mainly about weak internal arrangements to safeguard prisoners from violence and inadequate oversight of use of force.

S6 There had been no self-inflicted deaths, despite a challenging population, but levels of self-harm were high and had increased since the previous inspection. Assessment, care in custody and teamwork (ACCT) case management for prisoners at risk of suicide or self-harm did not consistently identify and manage risk or support prisoners. Staff entries in ACCT documents often lacked depth, and many care maps were inadequate. Case reviews were usually timely and had good attendance from the chaplaincy and in some cases the mental health team, although not all were appropriately multidisciplinary. Self-harm data were not used effectively to inform an overarching strategy to help reduce self-harm and support vulnerable prisoners. The Listener scheme (prisoners trained by the Samaritans to

provide confidential emotional support to fellow prisoners) was well established but there was evidence that prisoners had problems accessing Listeners.

- S7 Some aspects of security were disproportionate. Intelligence was dealt with promptly but security objectives were not always consistent with current risks, and communication to staff was not sufficiently good. The impact of gangs on violence in the prison was not yet fully understood, and a strategy to provide an appropriate response to gang issues had not been completed. Prisoners reported high availability of drugs and alcohol, the mandatory drug testing rate exceeded the target, and new psychoactive substances (NPS)<sup>2</sup> use had become a more serious problem. However, the prison was taking concerted action to address these issues through the drug supply reduction strategy and action plan, some active security measures, and coordinated work between health care, the drug and alcohol recovery team (DART) and the security department.
- S8 The IEP scheme did not incentivise positive behaviour and the regime for prisoners on basic remained inadequate. The large numbers on basic and high levels of antisocial behaviour indicated that the scheme was not effective in improving prisoners' behaviour.
- S9 The number of adjudications had increased significantly and was much higher than in comparable prisons. This reduced the impact and credibility of the system to manage discipline, and was close to being unmanageable as it took up so much staff time. The use of force had also increased significantly and was much higher than in comparable establishments, and batons were drawn more frequently. The governance of use of force was very poor. The number of outstanding documents was very high; a single officer had yet to complete 40 forms, and there were almost 500 outstanding. Scrutiny of use of force data to establish trends was poor.
- S10 Fewer prisoners were segregated than at the previous inspection, but the average length of stay had increased, resulting in a consistently full unit. Prisoners spoke positively of their treatment by segregation staff, but staff were often too busy to engage with them. Some prisoners were reluctant to leave the unit because they felt safer in the segregation than on the wings. Review boards had improved, but work on individual target setting and reintegration was underdeveloped.
- S11 DART continued to provide an age-appropriate and imaginative range of interventions. The well-managed and active peer support scheme was an example of good practice. Only two prisoners had required clinical substance misuse treatment in the previous 12 months. Specialist expertise and suitable arrangements provided good care to meet individual need. Support for those with complex needs was well coordinated.

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<sup>2</sup> New drugs that mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects.

## Respect

S12 *Parts of the prison were very dirty, some cells had large amounts of graffiti and a number of showers were in poor condition. Prisoners were more negative about relationships with staff than at the previous inspection. Most staff appeared too busy to engage consistently with the prisoners in their care. Equality and diversity work was weak. Faith provision was very good. The management of complaints had recently started to improve. Health services were good. The quality of food was reasonable* **Outcomes for prisoners were not sufficiently good against this healthy prison test.**

S13 *At the last inspection in June 2015 we found that outcomes for prisoners in Aylesbury were not sufficiently good against this healthy prison test. We made 28 recommendations in the area of respect. At this follow-up inspection we found that eight of the recommendations had been achieved, two had been partially achieved and 18 had not been achieved.*

S14 While some communal areas were reasonably clean, many units had ingrained dirt on floors and stairwells, and there was some broken flooring on landings. Many cells had large amounts of offensive graffiti and inadequately screened toilets. Some showers were in very poor condition and many prisoners had restricted access to them. Cell bells were not always answered promptly. There was no reliable way to check the timeliness of responses to applications or even if they had been dealt with at all.

S15 We observed some positive and respectful engagement between staff and prisoners. But some officers were dismissive or lacked confidence in their interpersonal skills and sometimes failed to challenge inappropriate behaviour. There appeared to be insufficient staff in many areas, and some staff seemed too busy to interact positively with prisoners or to supervise them adequately. In our survey, fewer than half of prisoners say they had a member of staff to turn to if they had a problem.

S16 As at the last inspection, our survey and prison data indicated that black and minority ethnic and Muslim prisoners experienced disadvantage across some key areas. Not enough had been done to investigate and address such findings. Development of equality provision was hampered by the frequent redeployment of the equality officer. Evidence of potential discrimination from equality monitoring data was not addressed robustly. Few discrimination incident reports were made, not all were responded to in writing and investigations were not sufficiently detailed. There were few consultation or support forums for prisoners with protected characteristics. There were efforts to respond to needs once identified; we saw reasonable support for prisoners with learning difficulties and disabilities, and work with foreign national prisoners was adequate.

S17 Provision for faith observance and pastoral support to prisoners were very good. The chaplaincy was visible around the prison, offered a range of services and classes, and played a valuable role in many areas of prison life.

S18 The management of complaints had improved, but only in recent months. Large numbers of complaints from the previous year had had no responses at all. The quality of responses was also improving but too many were inadequate. Prisoners had little confidence in complaints processes.

S19 There was no dedicated provision to assist prisoners with their legal problems. Legal visits still took place in the open visits room and so lacked confidentiality.

- S20 Health services were well led and there was an appropriate range of effective provision. Health care governance was good and overall staffing levels met need. Most prisoners we spoke to valued health care but were frustrated about poor notification of appointments, not being released from wings to attend clinics, and long waits in the health care waiting room. Incidents in the prison regularly delayed or prevented prisoner attendance at appointments, putting pressure on health services. Pharmacy services were reasonable, but supervision of medicine queues was inadequate. The dental service provided an appropriate range of treatments, but waiting times for routine treatment were too long at up to 11 weeks. Mental health services were well integrated and provided good support through a range of timely and clinically appropriate interventions.
- S21 The range and standard of food were reasonable. The main kitchen was at times very dirty, and some wing serveries and food trolleys were filthy. Arrangements for prisoners to buy items they needed were reasonable, but it could take nearly two weeks before some prisoners were able to receive their first orders.

## Purposeful activity

S22 *Time out of cell remained inadequate. Many prisoners were unemployed or under occupied. Management of learning and skills had improved. Attendance and behaviour at education and work were good but punctuality was poor. The quality of education and vocational training had improved and achievements were good. Facilities for library and PE provision were reasonable but access was poor. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S23 *At the last inspection in June 2015 we found that outcomes for prisoners in Aylesbury were poor against this healthy prison test. We made 18 recommendations in the area of purposeful activity. At this follow-up inspection we found that two of the recommendations had been achieved, eight had been partially achieved and eight had not been achieved.*

- S24 At roll checks during the working day, we found between 30% and 42% of the population locked in their cells. Just under a quarter of prisoners were unemployed. Most of those in employment had about six hours a day out of cell during the week, and the many unemployed prisoners subject to a basic regime were usually out of their cells for just under an hour. There was limited association at weekends and none in the evenings. There was still slippage in the core day, often because of incidents in the prison. Prisoners had only 30 minutes a day exercise in the open air.
- S25 Managers had made good progress in tackling some of the weaknesses we previously identified in learning and skills provision. Partnership working and contract management arrangements were effective. There were still too few places in learning and skills and work activities, but there were plans to improve capacity. Prison and college managers self-assessed the provision well and had a realistic overview of areas that required improvement.
- S26 Although there was good use of available activity spaces, many prisoners were not involved in purposeful activity. Some courses were not running and the temporary closure of a few workshops had reduced the capacity further. There was a range of educational, vocational and work options from entry level to level 2, but only a small number at level 3.
- S27 The education department provided an effective learning environment. The majority of sessions were well planned, and staff used a wide range of methods and resources to engage and motivate prisoners. Prisoners with additional learning needs were well supported. Staff

effectively developed prisoners' employability, English and maths skills. There was well-established and purposeful vocational training. Innovative partnerships, such as the coffee roasting and retail workshop, provided relevant skills in a well-equipped realistic work environment. Induction arrangements did not meet the needs of a significant minority of prisoners.

- S28 Attendance at education and training was good but punctuality was poor as a result of regime slippage. Prisoners' behaviour in education and training was good and staff challenged inappropriate language and behaviour well. Prisoners learned to develop constructive relationships and good social skills. Celebration events, which included family members, provided opportunities to acknowledge prisoner achievements publicly.
- S29 Achievement rates were high. Outcomes for prisoners on level 1 English and maths courses had improved and were now good. Prisoners developed good practical work skills. There were limited opportunities for prisoners to develop their skills at a higher level. The library was reasonably well stocked. However, access was limited and prisoners were not given sufficient time when they did visit it.
- S30 The gym was well equipped but also underused, especially during evenings and weekends. Fewer than a third of prisoners had been to the gym in the previous six months. The Duke of Edinburgh's Award scheme provided a good resource for a small and targeted group of prisoners.

## Resettlement

S31 *Lack of staff in the offender management unit (OMU) undermined risk assessment and rehabilitation work. Managers had responded to the challenges with some innovative new working practices, but few prisoners had an up-to-date sentence plan and contact with offender supervisors was limited. Public protection processes were hindered by the lack of up-to-date offender assessment system (OASys) risk assessments. Visits facilities were basic but adequate; visits were often delayed. There was insufficient work to support family ties. Prisoners had access to an appropriate range of offending behaviour programmes. The work of the Aylesbury Pathways Service was exemplary. **Outcomes for prisoners were not sufficiently good against this healthy prison test.***

S32 *At the last inspection in June 2015 we found that outcomes for prisoners in Aylesbury were reasonably good against this healthy prison test. We made 11 recommendations in the area of resettlement. At this follow-up inspection we found that none of the recommendations had been achieved, one had been partially achieved, nine had not been achieved and one was no longer relevant.*

- S33 Resettlement provision was appropriately targeted and the strategic approach was based on a needs analysis. However, understaffing of the OMU seriously undermined many aspects of work, including risk identification and management. In our survey, only 17% of prisoners said their offender supervisors were working with them to achieve sentence plan targets.
- S34 OMU staff were knowledgeable and capable, and had established effective links in the prison. Just under a third of prisoners did not have a current OASys assessment or sentence plan. Most outstanding assessments were the responsibility of community offender managers. The understaffed OMU had developed some innovative systems to manage the absence of an up-to-date OASys, including a useful risk and needs checklist that was completed in most cases. However, such systems could not replace the comprehensive and nationally approved assessment tool. Where completed, OASys documents were good quality and led to

- worthwhile outcomes, including completion of accredited programmes and effective release planning.
- S35 Internal public protection processes were robust. Multi-agency public protection arrangements (MAPPA) categories were identified quickly for new arrivals. Late identification of MAPPA levels was due to delays in information from external agencies, and there were effective systems to track, monitor and escalate issues. There was some good individual work for prisoners who posed the highest risk of harm. The OASys risk assessment backlog meant that not all risks were known. We identified two high risk of serious harm cases where there had been no assessment after many months, including one case where there were potential issues of serious organised crime.
- S36 There was no specific provision for prisoners serving indeterminate sentences. Around 30% of the population were over 21 and most were unable to progress to the adult estate. Despite considerable efforts to transfer prisoners, many were not accepted by other prisons. Recategorisation processes were good.
- S37 The prison released only around seven prisoners a month into the community. There were appropriate services to support them. There were effective arrangements for the management of accommodation, and to assist those with finance, benefit and debt problems. For those needing accommodation, there was good liaison with community offender managers and staff in approved premises. Prisoners could open bank accounts and obtain benefits advice before release.
- S38 The National Careers Service ensured that all relevant prisoners received interviews and skills actions plans. Guidance interviews concentrated well on the practical steps prisoners needed to take, including disclosure letters and CVs.
- S39 The primary health care team supported prisoners with health needs before their release, but was often only made aware of release plans at a late stage. Where appropriate, prisoners were given information about registering with a GP and a supply of medication. The mental health team linked with other prisons and local community mental health teams to support discharge planning.
- S40 Visits facilities were basic and we observed visitors experiencing long delays, despite arriving early after long journeys. The visits hall remained cramped. Facilities for closed visits were not suitable. There were insufficient family support interventions. Only one in five prisoners in our survey said they had received help to maintain family ties. Prisoner access to telephones was hindered by regime limitations.
- S41 The prison continued to provide a wide range of appropriate interventions, including accredited and non-accredited programmes. Prisoner access to them was generally timely and in line with targets to address offending and risky behaviour. The Aylesbury Pathways Service continued to be an example of good and effective practice. It gave some vulnerable and troubled prisoners opportunities to understand and then change behaviour, and to develop appropriate coping strategies, and was demonstrably reducing incidents of self-harm.

## Main concerns and recommendations

S42 Concern: There were increased and high levels of violence and fear of victimisation among prisoners. Violence reduction work was under-resourced and insufficiently strategic.

**Recommendation: Violent incidents should be substantially reduced as part of a comprehensive violence reduction strategy that includes systematic consultation with prisoners. The safer custody team should be adequately resourced to monitor and address violent behaviour and to support victims.**

S43 Concern: The use of force was much higher than in comparable establishments and governance was poor. The number of outstanding use of force documents was very high and accountability was poor. These and other concerns and trends had not been properly identified or addressed by the quarterly safer custody meeting to provide assurance of proportionality.

**Recommendation: Use of force should be justified, fully documented, and subject to quality assurance and rigorous scrutiny at regular use of force meetings.**

S44 Concern: Units had ingrained dirt, many cells had large amounts of offensive graffiti and inadequately screened toilets. Some showers were in very poor condition and many prisoners had restricted access to them.

**Recommendation: Communal areas and cells should be clean and free from graffiti, toilets should be properly screened and clean, showers should be maintained in good condition, and prisoners should be able to shower every day.**

S45 Concern: Equality and diversity work was underdeveloped. There was no systematic support for or regular consultation with prisoners with protected characteristics. Prisoners from a black and minority ethnic background and Muslim prisoners were particularly negative about their treatment. Evidence of potential discrimination from equality monitoring data was not addressed robustly.

**Recommendation: The needs of all prisoners with protected characteristics should be identified and addressed, including through regular consultation and support groups. Prompt management action should be taken to deal with evidence of potential discrimination.**

S46 Concern: Up to around 40% of prisoners were locked in cells during the working day and just under a quarter were unemployed. Many young men received less than an hour a day out of cell, contributing to frustration and poor behaviour. There was limited association at weekends and none in the evenings, and exercise was limited to 30 minutes. There was regular slippage in the core day.

**Recommendation: Prisoners should be unlocked and engaged in constructive activity during the working day. The regime should be predictable and equitable and include at least one hour in the open air.**

S47 Concern: A lack of staff in the OMU seriously undermined many aspects of work, including risk identification and management. Just under a third of prisoners did not have a current OASys assessment or sentence plan. Most outstanding assessments were the responsibility of community offender managers.

**Recommendation: Concerted action should be taken to reduce the OASys backlog, and there should be sufficient offender supervisors to work effectively with prisoners towards meeting sentence plan targets.**

# 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 journey times for prisoners continued to be relatively short, but there were delays in disembarking for those who arrived over the lunch period, when reception was closed. We observed courteous interactions between escort staff and prisoners, but the vehicles were grubby and covered in graffiti. Escort staff shared information about prisoners with reception officers, and the written escort records were up to date.

### Recommendation

- I.2** Escort vans should be clean and graffiti free.

## 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.3** Reception remained clean and bright, but there was no basic information for new arrivals in the holding rooms and the televisions did not work.
- I.4** In our survey, nearly two-thirds of prisoners said they had problems on their arrival, which was more than the comparator. Despite this, reception, first night and induction processes did not ensure that all needs were met or that new arrivals understood what would happen next. In our survey, only 23% of prisoners arriving with problems said they had received help, against 35% at the previous inspection.
- I.5** New arrivals could make a telephone call in reception. Searching was proportionate and respectful. All new arrivals had a health care assessment and a first night interview, but this was not carried out in private. Reception staff interaction with new arrivals focused on processing them rather than identifying and addressing vulnerabilities. A Listener (a prisoner trained by the Samaritans to provide confidential emotional support to fellow prisoners) worked as a reception orderly but had no formal role in the reception process.
- I.6** Nearly all new arrivals spent their first night on D wing where (despite graffiti in some cells) living conditions were generally reasonable. Most were able to have a shower, meal and speak to a peer worker before they were locked up for the evening. Night staff we spoke to were aware of new arrivals and made hourly checks on them throughout their first night.
- I.7** Only 34% of prisoners who had been through induction said it covered everything they needed to know. There was no formal prison induction programme. New arrivals had long delays in accessing education and gym induction. A third of those arriving in March 2017 had still not had an activities induction by the last week of April and spent long periods locked in

their cells as a result. Management oversight to ensure all prisoners received a useful and timely induction was inadequate.

## Recommendation

- 1.8 New arrivals on D wing should have a full induction programme and be allocated to activity promptly on completion of the induction. They should be out of their cells for 10 hours a day while on the unit.**

## 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.**

- 1.9** Violence against both staff and prisoners had increased since the last inspection. In the previous six months, there had been 38 assaults on staff, 133 on prisoners and 77 fights. A considerable number of assaults – 33 – were classed as serious, often involving multiple assailants and a single victim. The high levels of violence were reflected in our survey, where 62% of respondents said they had felt unsafe at some time and 29% felt unsafe at the time of inspection (see main recommendation S42). Many prisoners had gang affiliations (see paragraph 1.28), and 18% of prisoners reported being victimised as a result of gang issues, against the comparator of 9%. Nearly half said they had been victimised by staff. We observed several staff who were either dismissive to prisoners or who did not challenge poor behaviour (see paragraph 2.11).
- 1.10** There was no current policy to address violence. A proposed replacement strategy was not based on data, such as information from previous incidents, or prisoner and staff consultation. There was still no prison-wide approach to reducing violence (see paragraph 1.27). The work to tackle violence was overseen by the safer custody team, which included a designated violence reduction officer (VRO) and an intelligence analyst to focus on violent incidents and associated intelligence. However, key team members were routinely redeployed (see main recommendation S42).
- 1.11** All incidents of violence were reported through the intelligence report system. The VRO attempted to investigate known incidents and unexplained injuries, but did not have time to carry out all the investigations. Completed investigations demonstrated good inquiry, but sometimes lacked evidence of resulting actions.
- 1.12** Despite some good individual support from the VRO for victims of violence, there was no formal support for victims. Measures to protect prisoners from bullying and violence too often resulted in victims being segregated or locked up for long periods (see main recommendation S42). Some prisoners were subject to wing restrictions or not permitted to go to some activity areas, due to known associations. We also found a number of prisoners who were reluctant to leave their cells or wings, including some who refused to leave segregation, because they wanted to avoid further violence or confrontation.
- 1.13** F wing remained an 'enabling environment' housing prisoners on the Sex Offender Treatment Programme. In our survey, prisoners on F wing were more negative than those on other wings about victimisation by other prisoners. Those we spoke to said this had

happened before they moved to F wing, or as a result of flashpoints in areas such as health care (see paragraph 2.43)

- I.14 The safer custody team collated a range of data on violence and bullying that went to a quarterly safer custody meeting, which also discussed other key areas, such as self-harm, segregation and use of force. There was little evidence that the meeting had identified actions to address immediate concerns or inform a longer term strategy to reduce violent behaviour. (See main recommendation S42.)
- I.15 The safer custody team had introduced a weekly review to discuss current concerns and incidents, but this had only been in operation for two weeks. During the inspection, we were given several documents that commented that 'Aylesbury will always be a violent place', a phrase that was also repeated by some managers. This mindset needed to change to address the high levels of violence and provide appropriate inter-departmental support to the safer custody team.

## 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.16 There had been 255 incidents of self-harm in the previous six months. This was much higher than the 180 cases we found during a similar period at the last inspection, but a smaller number of prisoners with complex needs accounted for a large number of incidents. Since January 2017, 40% of all incidents involved four individual prisoners.
- I.17 Management structures to help reduce self-harm were not sufficiently developed, and there was little evidence that safer custody committee meetings supported progress. The analysis of relevant data was limited. Although some information about individual incidents was presented to the quarterly safer custody meeting, there was little evidence that it was used to identify patterns and trends that could inform an overarching plan to reduce self-harm and support prisoners in crisis. There was no action plan to identify and monitor necessary work, and limited discussion of wider issues.
- I.18 The quality of assessment, care in custody and teamwork (ACCT) case management for prisoners at risk of suicide or self-harm was not always robust enough. Care maps often lacked detail and were not updated adequately. Case reviews were timely but staff who knew the prisoner did not always attend them, although a member of the chaplaincy always came and mental health workers often attended. There was a lack of communication between case managers and residential staff. We saw examples where prisoners on open ACCTs had been put on to the basic regime without reference to ACCT documents or case reviews.
- I.19 The full-time suicide prevention coordinator was routinely required for other prison duties because of staff shortages, and was often unable to offer help or guidance to staff to support prisoners in crisis. We were concerned that distant staff-prisoner relationships and long periods of lock up for vulnerable prisoners also contributed to feelings of isolation and alienation that might have led to self-harming behaviour (see also paragraph 2.12). However, we also saw examples of staff who knew and cared about the personal circumstances of prisoners in crisis and actively helped them to deal with their problems.

- I.20** The Listener scheme had recently been established but Listeners felt under supported by staff, and their access to prisoners in need was often hampered by regime restrictions. In our survey, only 18% of respondents said that they were able to speak to a Listener if they needed to, against the comparator of 38%.

## Recommendations

- I.21** **Assessment, care in custody and teamwork (ACCT) case management documentation should demonstrate consistent care for prisoners at risk of self-harm. Support should include good quality individual care planning and multidisciplinary reviews.**
- I.22** **The prison should develop a prison-wide strategy to support prisoners and prevent self-harm that is based on evidence about the nature of incidents, patterns and trends. This should include purposeful activity and the full engagement with prisoners from prison officers and managers, particularly those working on residential units.**
- I.23** **The Listener scheme should be fully supported by staff, and prisoners should have 24-hour access.**

## 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.24** The prison had well-established links with the local safeguarding adults board and a formal safeguarding policy, although it did not always reflect practice at the establishment. Not all staff were aware of what to do if a prisoner reported current or historic abuse. We had significant concerns about many of the internal procedures to protect prisoners from harm and neglect, including first night and induction arrangements, case management of those at risk of self-harm and suicide and protection for victims of bullying and violence. (See sections on early days, violence reduction, and suicide and self-harm prevention.)

## Recommendation

- I.25** **All staff should be aware of the appropriate action to take if a prisoner reports current or historic abuse.**

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<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).

# 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.26** There had been 2,558 intelligence reports in the previous six months, which was a slight increase since 2015. Although there was a small backlog in processing intelligence reports, the head of security made a daily assessment of submitted intelligence to identify any immediate concerns.
- I.27** Appropriate security objectives were not always identified. For example, although violent incidents made up nearly a quarter of the intelligence reports received, the prevention of violence had not featured as a primary security objective in the past year. Parts of the intelligence assessment were often repeated from the previous month, and there was poor communication of security objectives to other departments.
- I.28** The establishment was aware of the various gang-related activities at Aylesbury, and the security team had developed a database to handle the complexities of gang management; prisoners had links to around 118 gangs. However, the database was mostly used retrospectively following an incident. There was no current gang strategy to understand the risks fully, and the security department was not sufficiently connected to the safer custody team. There were positive links to external agencies, such as the South East regional prison intelligence team. The police intelligence officer had appropriate time and support, but was hindered by limited IT access. The prison had an appropriate focus on extremism and the risks of radicalisation.
- I.29** Some security procedures remained disproportionate. For example, all prisoners were searched when they left their residential accommodation for activities. Although there had been some incidents on route to activities and in some activity areas, there had been little intelligence reporting on the issue. Search processes were often rushed and in some areas were no longer effective, and staff would have been better used on other priorities.
- I.30** The prison had re-established a designated drug strategy committee, which was chaired by the head of security. A detailed supply reduction action plan was reviewed and updated regularly, and the drug and alcohol recovery team (DART) and health staff now attended both drug strategy and security meetings. Despite better integration and communication between departments, in our survey 42% of prisoners said it was easy to get illegal drugs, against the comparator of 31%, and 22%, against 11%, reported easy alcohol availability. The random mandatory drug testing (MDT) positive rate averaged 6.8% against a target of 4.5% in the last six months, and the prison had carried out only 25 suspicion drug tests in that time. All the MDT positive results were for cannabis, but 44 prisoners in the previous six months had tested positive for the new psychoactive substance (NPS)<sup>4</sup> 'spice'. Intelligence reports, finds and the many incidents requiring medical attendance confirmed that NPS use had become increasingly prevalent and problematic.
- I.31** Security measures to disrupt supply of unauthorised articles, in particular drugs and mobile phones, had been improved following a significant number of finds. Between October 2016 and March 2017, there had been 59 drug finds and 226 finds of mobile phones. Supply route

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<sup>4</sup> NPS are new drugs that mimic the effects of illegal drugs such as cannabis, heroin or amphetamines and may have unpredictable and life-threatening effects.

disruption was good, and included additional netting to prevent 'throw overs' and increased joint working with the police.

## Recommendations

- I.32 Security objectives should reflect the current intelligence threat assessment and be communicated to staff appropriately.**
- I.33 Procedural security measures should be proportionate to the evidence of intelligence concerns and not unnecessarily restrict prisoner access to a full regime.**

## Incentives and earned privileges

### 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.34** In our survey, only 25% of prisoners felt they had been treated fairly by the IEP scheme. We found that the scheme operating at the time of the inspection was overly punitive and failed to promote positive behaviour.
- I.35** Around a third of the population was on the basic regime, higher than at the previous inspection and more than we usually see. The basic regime was inadequate, restricting prisoner access to visits and allowing only two showers a week, which was unacceptable (see paragraph 2.3). Prisoners on basic could attend work but there continued to be a lack of activity places (see paragraph 3.10). Those on basic and not in activity often had less than an hour a day out of their cell, giving little opportunity to demonstrate good behaviour. Once downgraded to basic for 28 days, any further warning resulted in an additional 28 days on basic. As a consequence, some prisoners spent long periods on the basic regime with implications for their well-being. Managers had recognised some of these deficiencies and a new scheme was due to be implemented in May 2017.

## Recommendation

- I.36 The incentives and earned privileges scheme should focus more on promoting good behaviour. Prisoners on the basic regime should have access to facilities that ensure decency and maintain family ties, and their period on basic should be reviewed after shorter intervals.**

## 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.37** There had been 3,699 adjudications in the previous six months, which was significantly higher than at the previous inspection and similar prisons. Over 51% of the charges were for new offences, and nearly 500 hearings had been dismissed or not proceeded with – often because timescales had been exceeded.
- I.38** The adjudications that we observed were fair and courteous, although in the documentation a high proportion of hearings indicated quite limited enquiry. Prisoners were often placed on adjudication for multiple charges for similar incidents, rather than for just the most serious charge involved. This increased the number of hearings and made the process more complex. The majority of adjudications were for disobeying a lawful order, unauthorised articles or acts of violence. Some of the lower level offences could have been dealt with by other means, such as under IEP, or simply discussing the issues with the prisoner.
- I.39** A useful range of data was collated as part of a wider segregation monitoring and review group (SMARG) report to the quarterly safer custody meeting. The volume of adjudication work impacted on staff time and was having a detrimental effect on several key areas (see paragraph I.47).

### Recommendation

- I.40 Managers should oversee the data collected on adjudications, and take action to improve the quality of enquiry and reduce the high number of hearings. Less serious offences should be dealt with through other means.**

### The use of force

- I.41** The use of force was very high; in the previous six months, there had been 436 recorded incidents, compared with 284 in 2015 and 191 in 2012.
- I.42** Most force was used in response to spontaneous incidents. Staff had drawn batons on 25 occasions and used them in 11 incidents. This represented a considerable increase compared to the previous inspection, when batons had been drawn eight times and used three times over a similar time period. In cases where there were a number of assailants attacking one prisoner, batons were drawn to protect the victim and gain initial control of the incident. However, in other footage we could not be fully satisfied that the use was proportionate to the threat.
- I.43** The governance of use of force was poor. Nearly 500 use of force documents were outstanding. One officer alone accounted for 40 from different incidents, yet there had been no challenge or follow up to ascertain why one person had been involved in such a high number of restraints. These concerns had not been properly identified by the quarterly safer custody meeting. The minutes did not indicate relevant actions to address the volume of force or to identify trends or concerns. For example, it was noted that the majority of force

was used on prisoners from a black or minority ethnic background, but this was not explored further and no action was taken. (See main recommendation S43.)

- I.44** Special accommodation had been used once, for just over three hours, in the previous 12 months following serious assaults by one prisoner on staff before a transfer. We were satisfied that the use was appropriate and proportionate, with good de-escalation of the incident.

## Segregation

- I.45** Segregation had been used on 165 occasions in the six months to March 2017, which was much lower than the previous inspection and at similar establishments. However, length of stays had increased with some prisoners requiring authorisation from the deputy director of custody for continued segregation. Prisoners were often refusing to leave segregation because of concerns for their safety on mainstream accommodation or to avoid further conflict if they had been perpetrators of violence (see paragraph I.10). These issues had led to a consistently full segregation unit. (See main recommendation S42.)
- I.46** The unit could hold up to 21 prisoners and was in a reasonable condition, although some areas were dirty. Several cells needed decoration and refurbishment. It was difficult for the prison to complete a programme to address this because the unit was constantly full. The regime, although basic, ensured daily access to showers and exercise, and there were plans to install telephone booths on each exercise yard. The regime for long-term prisoners was poor, and was limited to some in-cell activity packs and a meagre selection of books. Education staff still did not attend the unit, and we remained concerned about the psychological deterioration caused by long periods of segregation.
- I.47** In our survey, more prisoners than the comparator, 38% against 24%, said that staff in the segregation unit treated them well, and prisoners spoke positively about segregation staff. Although we observed some good staff interactions with prisoners, it was very difficult for them to work to help prisoners break the cycle of segregation due to the constant demands of other work, especially the high number of adjudications (see paragraph I.37). However, the segregation manager had developed a 'prisoner overview' to give visiting staff a synopsis of individual cases and risk, which was a useful development.
- I.48** Review boards had improved following the appointment of secretarial support, and attendance was good. Targets were set for prisoners, although we found evidence that these was not appropriately communicated to prisoners and were not always based on the individual. Reintegration planning required further development and greater staff support from other departments. While the SMARG report presented to the quarterly safer custody meeting contained a useful range of data (see paragraph I.37), it did not result in tangible actions to address the consistently high population.

## Recommendations

- I.49** **The regime for longer stay prisoners in the segregation unit should include purposeful activities to help prevent psychological deterioration.** (Repeated recommendation I.60)
- I.50** **There should be individual care and reintegration plans to manage prisoners effectively during long periods of segregation and to help prisoners return to normal location.** (Repeated recommendation I.61)

## Good practice

- I.51** *The segregation unit had introduced a prisoner overview sheet to provide visiting staff and professionals a synopsis of individual cases and risk.*

## 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.52** A drug strategy committee met monthly and there was good partnership working between the prison and substance misuse service providers, but the substance misuse strategy and accompanying action plan were not informed by an annual prisoner needs analysis to gauge current trends.
- I.53** An enthusiastic and experienced drug and alcohol recovery team (DART) continued to deliver a range of age-appropriate interventions. All new arrivals received individual induction and harm reduction advice. Assessments and recovery plans were comprehensive, and the service currently engaged with 92 prisoners. The team's premises offered a welcoming environment for one-to-one and groupwork in a workshop, although prisoner access could be affected by security and regime restrictions. The service also saw its users on the wings and in the health care centre.
- I.54** DART had developed a series of awareness raising workshops and workbooks, which included NPS and steroids. There were imaginative activities to engage and motivate the young age group, including arts work and making a music CD. Together with mental health nurses, the team facilitated mindfulness sessions. The more intensive 16-session recovery programme had run once in the past 12 months and was due to start again. A peer mentor scheme was well established and well managed.
- I.55** Clinical substance misuse services were provided by Care UK but need was very low; in the previous 12 months, only two prisoners had required opiate substitute treatment. There was clinical expertise and appropriate arrangements to provide care to meet individual need.
- I.56** Joint care planning and coordination between substance misuse and mental health service providers were evident in shared treatment plans and weekly multi-professional complex case meetings.

## Recommendation

- I.57** **There should be an annual substance misuse needs analysis to inform the drug and alcohol strategy and action plan, and to ensure that interventions are responsive to trends and emerging need.**



## 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** Living conditions across the prison were poor. The five older units, A, B, C, F and G wings, were worn and gloomy. Although some communal areas were reasonably clean, many had ingrained dirt on walls and on stairwells. There was broken flooring on landings and paint peeling from some cell doors. The showers on F and G wings were filthy, with mould and paint flaking from ceilings (see main recommendation S44). Across the prison, association equipment was generally in poor condition, and some displayed notices were not up to date.
- 2.2** As at the previous inspection, many cells in the older part of the prison designed to hold one prisoner held two and were cramped. Some cells were clean and reasonably well furnished, but many were dirty and there was much offensive graffiti on some cell walls and doors. D and E wings were dirty and rundown for relatively new buildings. Many cells, particularly on E wing, were dirty and some were inadequately furnished. As at the last inspection, rubbish behind the grilles over cell windows was common and often only dealt with once the cell was empty. Toilets in double cells were screened by a shower curtain, which was inadequate. Prisoners had to eat all their meals close to their toilets, which did not always have seats or lids (see main recommendation S44).
- 2.3** All prisoners could wear their own clothes. The wing laundries on D, E and F wings had been closed during our inspection, with arrangements for prisoners to have their clothes washed on the other wings pending use of the main prison laundry. However, most prisoners we spoke to were unaware of this and were washing and drying items in their cells. Prisoners had reasonable supplies of toiletries, but access to cell cleaning materials was poor and restricted regimes meant that many prisoners could not shower every day (see also paragraph 3.1). In our survey, only 28% of prisoners, against the comparator of 42%, said that it was easy to get cleaning materials, 29%, against 68%, that it was easy to get clean sheets and only a quarter, against 55%, that they could shower every day. (See main recommendation S44.)
- 2.4** In many cases, we saw emergency cell call bells left unanswered for too long, and sometimes for more than 10 minutes. In our survey, only 12% of respondents, against the comparator of 31%, said that their cell call bell was normally answered within five minutes.
- 2.5** Management of the general applications system was not fully effective and its implementation across the prison was disorganised. There was no reliable way of checking the promptness of responses or whether they had been dealt with at all. In our survey, only 41% of respondents who had made one said that applications were dealt with fairly and only 12% that they were dealt with quickly.
- 2.6** Arrangements for sending and receiving mail remained good. Prisoners could send two free letters a week, and family and friends could use the 'email a prisoner' scheme. Although the number of telephones was adequate, the lack of evening association limited prisoner access to telephones when their families or friends were available.

## Recommendations

- 2.7 Cells designed to hold one prisoner should not be used to hold two.** (Repeated recommendation 2.11)
- 2.8 Emergency cell call bells should be answered promptly and within five minutes.** (Repeated recommendation 2.13)
- 2.9 Applications should be tracked and followed up when not responded to.**

## 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.**

- 2.10** The relationships between staff and prisoners that we observed were often encouraging and respectful. We saw officers who engaged positively with prisoners and had an appropriate interest in their welfare, and awareness of their needs and personal circumstances. Responses from staff to demanding behaviour were usually not over-reactive or overly punitive, and we saw occasions where they dealt patiently with difficult situations in a calm and mature way. Most staff appeared resilient despite regular staff shortages.
- 2.11** However, there was also evidence of a smaller but significant group of staff who appeared disinterested and expressed low expectations of young prisoners, potentially reinforcing negative behaviours (see paragraph 1.15). Staffing levels on the units were often low. Some officers were dismissive or appeared too busy to fully engage with prisoners, and others seemed to lack confidence. Supervision on wings by residential officers was sometimes insufficient, and they did not always challenge inappropriate conduct from prisoners appropriately. This group of staff had a disproportionate impact on prisoner perceptions and was undermining a respectful culture. In our survey, only 57% of respondents said that most staff treated them with respect, and less than half (47%) said they had a member of staff they could turn to with a problem. There was also little evidence that the personal officer scheme was working effectively, and only 38% of prisoners who said they had one found them helpful.
- 2.12** Consultation with prisoners had stalled recently, and monthly meetings between managers and prisoner representatives had been cancelled since the beginning of 2017.

## Recommendation

- 2.13 Staffing levels should be sufficient and staff should actively engage with prisoners and help support them through their sentence. They should challenge inappropriate conduct, and behave fairly and consistently when responding to help prisoners meet their basic needs.**

## 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

- 2.14** Equality work was covered by the safer custody team and there was a dedicated equality officer. In practice, this officer was frequently redeployed to other duties. The equality policy needed updating, but there was a current equality strategy and an action plan had been developed since the previous inspection. This was reviewed quarterly, with evidence of progress on some actions.
- 2.15** The strategic quarterly equality meeting had been amalgamated with the safer custody meeting. It considered some useful equality-related data and information, including local equality monitoring that supplemented the national monitoring tool. However, this did not lead to clearly identifiable actions. There was not enough work to understand and address the reasons for prisoners' inequitable outcomes. (See main recommendation S45.)
- 2.16** Only eight discrimination incident reporting forms (DIRFs) had been submitted in the previous six months, which was lower than we usually see in similar prisons. The quality of response was variable, and in some cases there was little evidence of how the issue had been investigated and conclusions reached. There were no written responses. External quality assurance took place annually.
- 2.17** There were no support groups for prisoners from any minority groups, although wing-based consultation groups every two to three months included some discussion of equality and diversity issues. Each wing had a prisoner equality representative but they received no training for their role and had no opportunity to meet as a group or attend the quarterly safer custody meeting. Their role was not well known to prisoners. Although some diversity events had been celebrated, equality work had a low profile around the prison (see main recommendation S45).

### Recommendation

- 2.18 Investigations into discrimination incident reports should be thorough and fully documented, and lead to appropriate follow-up actions.**

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

## Protected characteristics

- 2.19** Around 62% of the population were from a black or minority ethnic background. In our survey, responses from these prisoners showed a disparity with white prisoners across a range of indicators. In some areas, prisoners from a black and minority ethnic background were more positive, such as feelings of safety and victimisation from other prisoners. However, they were more negative about issues such as relationships with staff, use of force and the IEP scheme, and access to medical professionals. The prison's data showed disproportionate outcomes for this group in relation to the basic and enhanced privilege levels. National monitoring data, although a few months old, showed ongoing higher use of adjudications for prisoners from a black or minority ethnic background. There was little evidence of investigation of these concerns. There was no specific forum for black and minority ethnic prisoners (see main recommendation S45). Small focus groups run by the Aylesbury Pathways Service (see paragraph 4.38) with service users from a black or minority ethnic background offered a model for further engagement.
- 2.20** There was no specific support for prisoners from a Gypsy, Romany or Traveller background. In our survey, 5% of prisoners identified as being from this group, but the prison was aware of only four such prisoners (see main recommendation S45).
- 2.21** Thirteen per cent of the population were foreign nationals. Home Office Immigration Enforcement staff visited the prison monthly, and all foreign nationals could ask to see them. However, there was no independent legal advice service. Prisoners in need of legal support were advised to consult the prisoner newspaper *Inside Time* to find a solicitor. Offender supervisors had facilitated telephone calls to legal advisers when the intention to deport was confirmed. There was information about a telephone interpreting service around the prison, although it was not often used. The library held a reasonable range of foreign language dictionaries, although there was little other reading material in foreign languages and not enough education support in English for speakers of other languages (see paragraph 3.16 and recommendation 3.17). All foreign prisoners could make a free monthly overseas telephone call, and during the inspection the prison confirmed that all eligible prisoners would be able to have this call without having to reapply each month.
- 2.22** A third of the population were Muslim. As we found at the previous inspection, Muslim prisoners were more negative in the survey in areas that dealt with relationships and interactions with staff. This required further investigation. (See main recommendation S45.)
- 2.23** There were 92 prisoners recorded as having a disability, which was a similar number to the 19% of prisoners who self-identified as having a disability in our survey. Most disabilities were learning needs or related to mental health. Personal emergency evacuation plans (PEEPs) were kept in wing offices for prisoners with particular needs in the event of an emergency. The names and locations of these prisoners were circulated to staff daily, although we met a member of night staff who did not know where to find the PEEP for his wing. Specific aids were provided to meet need, and there was one large adapted cell on a wing with a lift available. Support for prisoners with learning needs included input from a learning disability nurse, as well as good support in education.
- 2.24** Eight men were identified as gay or bisexual, which equated to about half of the 4% who said they were gay or bisexual in our survey. The equality officer met these prisoners individually to check on their well-being but there were no external support groups. One prisoner was considering transitioning to become a woman and was being managed in line with the prison's policy.

## 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.**

- 2.25** The facilities and provision for religious activities were good. The large chaplaincy included a number of volunteers and had a visible presence around the prison. There was a range of faith-based groups and classes, and chaplains monitored changes of religion. Access to group worship was overseen well. Prisoners who could not mix with certain individuals could attend services on alternate weeks until these issues were resolved. Prisoners unable to attend group services were seen individually by their chaplain.
- 2.26** Chaplaincy staff saw new arrivals promptly and gave them an informative induction booklet about the work of the team and the support available. Support included organising three family visits a year which could be attended by prisoners and their children, and offering one-to-one support to any prisoner in crisis. Chaplains attended all assessment, care in custody and teamwork (ACCT) reviews and could also provide a bereavement counsellor, as well as volunteer visitors. Chaplaincy staff visited prisoners in the segregation unit daily and were involved in all relevant prison meetings, and the managing chaplain attended a group that managed prisoners susceptible to radicalisation.

## 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.**

- 2.27** There had been 265 complaints in the previous six months, which was low for the type of establishment. The main reason for complaint was property, often about the loss of personal items following a transfer. Prisoners were negative about the complaints process in our survey and during the inspection. The prison's records showed that 12% of complaints submitted in 2016 had been closed without a response. Managers had not picked this up, although administration of the process had improved recently.
- 2.28** Responses to completed complaints varied from polite and helpful to abrupt or showing inadequate investigation of the issue. Ten per cent of complaints were subject to quality assurance.

### Recommendation

- 2.29** **Oversight and quality assurance of prisoner complaints should ensure that they are dealt with promptly and subject to appropriate investigation to enable a full and helpful response.**

## 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.**

**2.30** Legal visits continued to take place in the main visits hall, which compromised confidentiality. There were no dedicated trained staff to provide legal support for prisoners, and limited support from offender supervisors. The library had a reasonable supply of legal texts and up-to-date Prison Service orders, but prisoner access to the library was limited (see paragraph 3.25). In our survey, half the respondents said that staff had opened their legal mail when they were not present, against the comparator of 40%. Staff working in the post room logged any legal mail that was opened in error, which had happened three times in 2017 to date.

### Recommendation

**2.31 Prisoners should be able to have a private legal visit, and the prison should investigate the prisoner perception that their legally privileged mail is opened inappropriately by staff.**

## 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.**

**2.32** 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. The CQC found there were no breaches of the relevant regulations.

### Governance arrangements

**2.33** Care UK was the lead health provider, and Barnet, Enfield and Haringey Mental Health NHS Trust delivered secondary mental health services. A health needs analysis informed service provision appropriately. There were few serious incidents recorded, but systems were robust and we saw evidence of learning. A partnership board oversaw health delivery, and governance arrangements were transparent and effective. There was close integration and effective collaboration between all the health agencies. Although there were generally good relations with the prison, the pressures of the regime were significant. An average of 40 hours a month nursing time was spent attending emergency callouts, which affected the team's regular workload, but had not resulted in any clinic or appointment cancellations.

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

- 2.34** Prisoner health care representatives had clear roles and responsibilities, and met regularly to help shape health care practice. Clinical governance ensured that National Institute for Health and Care Excellence (NICE) guidance, audit and practice development were integrated into care arrangements. There was strong managerial and clinical leadership, and staff said they felt well supported and had good access to professional development. Health staff induction, supervision and appraisal arrangements were good.
- 2.35** The primary health care team was small, but staffing levels and skill mix were appropriate to meet need, and staff were confident and competent in dealing with patients. Only a small number of prisoners had long-term conditions. Those with the most serious conditions were well monitored and managed, but care planning was inconsistent. An electronic clinical record (SystemOne) was used, and entries in patient records were generally of a good standard. Individual clinical records were sampled regularly to assess quality and drive improvement, which was impressive.
- 2.36** There were systems to prevent communicable disease, and a recent desktop exercise had tested organisational ability to manage an unforeseen outbreak.
- 2.37** The health care environment was appropriate and subject to annual infection prevention audit, which demonstrated compliance. The response to medical emergencies followed protocol with appropriate access to emergency services. Clinical staff received appropriate life support training, and emergency resuscitation equipment held in the health care centre was appropriate and regularly checked. There were a few strategically located automated external defibrillators (AEDs), but too few prison staff had basic life support skills.
- 2.38** Information for prisoners about health care was good and available on all wings, and there was evidence that interpreting services were used. There were few formal health complaints, and little evidence of learning from trends or issues, but the complaints process was well advertised and complaints received had good consideration and response.
- 2.39** Nurses were active in encouraging prisoners to attend well-being clinics and used all contacts with health professionals to consider issues such as sexual health (including access to barrier protection), vaccinations, well-being and smoking cessation. One nurse had designed a medi-alert laminated card with details of allergies or long-term conditions that prisoners could carry with their prison ID. Health promotion activities were advertised in the health care building and on the wings, with dedicated clinics to link to these themes.

## Recommendation

- 2.40** **All prison staff should have up-to-date basic life support skills, including use of an emergency defibrillator.**

## Good practice

- 2.41** *Prisoners' individual clinical records were routinely sampled to assess quality and drive improvement.*
- 2.42** *The medi-alert laminated card was a novel and effective mechanism to bring rapid attention to a prisoner's allergies or underlying health condition.*

## Delivery of care (physical health)

- 2.43** Health screening of new arrivals was well managed, and early identification of risk ensured prompt access to ongoing support if required. Care UK facilitated a range of appropriate primary care services. Prisoners had good access to the GP and nurse practitioners, with patients seen within a few days for routine care. Health care practitioners, including the GP, maintained appropriate contact with prisoners in the segregation unit.
- 2.44** Prisoner applications to attend health care were collected daily and triaged effectively, but prisoners were not always notified of their appointments. Prisoner health representatives distributed health appointment slips daily, but some were not allowed to undertake this task, which added to the number of missed appointments. Shortage of prison staffing meant that prisoners were not always escorted to appointments, particularly if they were on a restricted regime or in segregation. Prisoners who were escorted to health care during morning movements could not always be escorted back until 11.30am, which meant they could be waiting in the health care centre for up to three hours. Some prisoners cited a fear of violence in the waiting room as a reason for missing appointments. Vulnerable prisoners, including those from F wing, waited with prison officers in the entrance to the health care centre, which was a public area observable by passing prisoners.
- 2.45** There were long waits to see the optician, and prisoners often failed to attend appointments. At the last optician's clinic, seven out of 11 patients did not attend, and one asked to leave health care before he was seen. One escort each weekday was allocated for external hospital appointments, which was sufficient to meet demand. However, in the last 12 months, 8% of the 331 escorts for planned and emergency hospital treatment had been unavailable.

## Recommendations

- 2.46 All prisoners should be able to attend internal and external health care appointments. Patients should be routinely notified in advance of all internal health care appointments.**
- 2.47 Prisoners should be collected from their appointments in the health care centre without delay.**
- 2.48 The significant level of patients who fail to attend planned appointments, including with the dentist, should be investigated and addressed, and non-attenders should be routinely followed up.**

## Pharmacy

- 2.49** Individually labelled medicines were dispensed from Sigma Pharmacy with prescribers using an agreed prison formulary. There was no dedicated pharmacy team. Most duties were undertaken by the nursing team, which meant there was no specialist monitoring of prescribing practice and no professional pharmacy advice available to patients.
- 2.50** Patients could receive in-possession medication based on a clear policy, and risk assessment took into account both patient and drug risk. Medicines were administered by nurses three times a day, at 8.30am, 11.30am and 4.30pm, from the health care department. Most supervised treatments took place in the morning and afternoon sessions only, and there was a very short window for prisoners to attend and receive medication. Prisoners receiving supervised medication congregated in the waiting room together with other patients attending health appointments. This resulted in a congested and noisy environment with

obvious risks for the trading of drugs. Officers did not supervise medication queues, which meant that patients had no confidentiality at the hatch.

- 2.51** Controlled drugs were mainly administered at lunchtime and patients brought into the treatment room, which improved supervision. The more vulnerable prisoners were escorted separately to receive their medication. Medicines for prisoners on the segregation unit were taken in a locked box and administered at the cell. A disused cell in the segregation unit had been identified as health facility, but this did not comply with infection prevention standards and was currently accessed through a standard cell key.
- 2.52** Only general sales list medications were held as stock. New prescriptions were available within two days, although prescriptions could be accessed on the day of prescribing in urgent cases. Movement and storage of medicines were secure. There was an appropriate range of standard operating policies and a reasonable range of patient group directions authorising appropriate health care professionals to provide simple remedies for common conditions.
- 2.53** The temperature in the pharmacy room and fridge temperatures were appropriately monitored, and medicine management activity was reported as part of the clinical governance arrangements, but in the absence of dedicated pharmacy support there was only limited oversight of trends and compliance issues.

## Recommendations

- 2.54 Pharmacy advice and support should be routinely available to prisoners.**
- 2.55 The health care waiting facility for prisoners receiving medication should be fully separated from patients waiting for appointments, and prison staff should supervise the medicine queue and the administration of medication.**
- 2.56 The health room in the segregation unit should comply with infection prevention standards.**

## Dentistry

- 2.57** Dentistry was provided by Time 4 Teeth with a weekly session offering a range of community-equivalent treatments. The dental waiting list was up to 11 weeks for routine appointments, which was too long. The dentist overbooked each session because of the recurring number of failures to attend. Since January 2017, 38% of booked dental appointments were not attended, and in the first two weeks of April, 29 out of 47 dental patients failed to attend - around a quarter were due to regime restrictions. (See recommendation 2.48.)
- 2.58** Individual oral health education was provided during consultations. The dental suite was clean, equipment maintained and instruments decontaminated in line with regulation, and there were safe arrangements to dispose waste materials.

## Recommendation

- 2.59 All prisoners should have timely access to dental assessment and treatment.**

## Delivery of care (mental health)

- 2.60** Mental health provision was delivered by several partners working in very close collaboration. Care UK employed a dedicated primary care nurse who had a caseload of 17 patients and was the first point of contact to screen all referrals. A multidisciplinary team meeting reviewed all referrals and determined caseload allocations. Barnet, Enfield and Haringey Mental Health NHS Trust provided secondary mental health services. A stepped care approach was used to facilitate self-help through to providing complex care using individual and group programmes. Some prisoners were also supported through joint care arrangements with the substance misuse team. Interventions were based on a risk rating system that determined priorities, and waits for urgent and routine support were short.
- 2.61** The secondary mental health team consisted of a senior nurse, psychiatrist, two mental health nurses and a learning disability nurse, and operated five days a week. The team supported 24 patients, including two under the care programme approach. The learning disability nurse supported 10 prisoners through health action plans and a range of easy-read materials. The provision was good, but there was no dedicated counselling service or psychology input. The Pathways Service also offered support for prisoners with longstanding behavioural and emotional problems (see paragraph 4.38).
- 2.62** Prisoners placed on an ACCT received input from primary care services. Two prisoners had been accepted as needing treatment in hospital under the Mental Health Act in the last 12 months; both had waited over four weeks before transfer. There was no mental health awareness training for prison wing staff, but plans for joint training with the prison included self-harm and mental health issues.

## Recommendations

- 2.63** **Prisoners should be able to access counselling services and specialist psychology input.**
- 2.64** **Prisoners requiring treatment in hospital under the Mental Health Act should be transferred within established NHS guidelines.**

## Good practice

- 2.65** *Prisoners with learning disabilities were supported through the provision of health action plans and access to a range of easy-read health materials.*

## Social care

- 2.66** Health care staff we spoke to were aware of how to make an adult safeguarding referral. The age profile of prisoners meant that there was little need for social care provision; there were protocols to address need, but these were not formally signed off. Prisoners with disabilities could access specialist advice and equipment where necessary (see paragraph 2.23).

## 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.**

- 2.67** Although the meals we sampled were reasonably good, in our survey, fewer than a quarter of respondents said the quality of food was good. There were food comments books on each wing and prisoners were surveyed about the food twice a year.
- 2.68** Prisoners selected lunch and dinner from a four-week rolling menu that offered a reasonable variety of healthy options. Menus included portions of fruit and vegetables every day. Meal times were reasonable.
- 2.69** We found serveries on house blocks that were filthy, and nearly all food trolleys were dirty. Wing servery workers did not always wear protective clothing, and supervision by staff was poor. Although the main kitchen was large and the equipment well maintained, floors were dirty, as were areas under fridges and on top of cookers. The prisoners' changing room was dirty and windows were broken. There were adequate chilled and frozen food storage facilities, with a separate area for halal products, but some of these areas were also grubby.
- 2.70** As at the last inspection, there was no opportunity for prisoners to prepare their own food or dine in association, and they ate in their cells alongside inadequately screened toilets that often did not have lids (see paragraph 2.2).

### Recommendations

- 2.71** **The kitchen should be clean and in a good state of repair, and wing serveries and food trolleys should be clean and well maintained.**
- 2.72** **Serveries should be properly supervised by staff, and servery workers should wear appropriate protective clothing.**
- 2.73** **Prisoners should be able to dine in association.** (Repeated recommendation 2.105)

## Purchases

### Expected outcomes:

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

- 2.74** In our survey, an average of just over a third of prisoners felt that the prison shop sold a wide enough range of goods to meet their needs. However, prisoners from a black and minority ethnic background were more negative than white prisoners, and only 27% against 45% said that the shop goods met their needs. The extent to which these issues were addressed following consultation was unclear.
- 2.75** New arrivals who missed the deadline to place a shop order were able to buy a reception pack (containing basic food and drinks, with an option for tobacco) but, depending on which day they arrived, it could take 12 days before they received their first full shop order. This was too long and increased the opportunities for debt and bullying.

- 2.76** Prisoners could shop from a reasonable range of catalogues, but had to pay an additional 50p administration charge. They could also order newspapers and magazines through a local newsagent.

### **Recommendations**

- 2.77** **New arrivals should be able to buy items from the prison shop within their first 24 hours.** (Repeated recommendation 2.112)
- 2.78** **Prisoners should not be charged an administration fee for catalogue orders.** (Repeated recommendation 2.113)

## 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** There had been little change since the last inspection to the time that prisoners could spend out of their cells. The published activity schedule had revised the core day to provide prisoners with work or education for at least part of the day, along with association time for domestic activities, such as showers and telephone calls. Some prisoners also had the opportunity to work or attend education full time (about eight hours a day on weekdays). During our inspection, we found that in practice the average time out of cell was about six hours a day for fully engaged prisoners, and often as little as two to three hours for the many prisoners – about a quarter of the population – who did not work or were on restricted regimes. This included a period of exercise in the open air that was restricted to 30 minutes.
- 3.2** As at the last inspection, unemployed prisoners on the basic level of the incentives and earned privileges (IEP) scheme received less than an hour a day out of cell. We found daily slippage in the regime, and observed that prisoners were routinely unlocked late and locked up early. Time out of cell at weekends was restricted to about two hours a day for most prisoners. At four separate roll checks taken when prisoners should have been unlocked, we found between 30% and 42% of the population locked in their cells (see main recommendation S46).

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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.**

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

### Management of learning and skills and work

- 3.4** Although managers had made good progress in improving the quality of education and training, the prison was still not able to ensure that sufficient prisoners attended activities when required. The head of reducing reoffending worked well with Milton Keynes College managers, and contract monitoring was effective and mutually supportive. Prisoner allocations to activities were effective, and college staff had reduced the number of class cancellations over the last year; these were now low. However, prison managers failed to ensure the effective management of purposeful activity, which reduced prisoner time in education and workshops and often led to teachers curtailing lesson. Punctuality was not good enough.
- 3.5** The retention and recruitment of college and prison teaching staff remained a major challenge, causing the end of some courses and the temporary closure of a few workshops. This further reduced prisoner access to provision.
- 3.6** The education and vocational training provided by Milton Keynes College was good. Because of the progress that had been made, improved outcomes for those who attended, and an enthusiastic and able teaching team, prison and college managers had a generally realistic overview of areas that required improvement. Quality assurance arrangements had been strengthened with a good range of measures, including a governor-led forum.
- 3.7** Managers were taking action to improve capacity, and create and expand additional training opportunities. Specialist staff had been recruited to develop distance and higher-level learning, and specifically target prisoners not engaging in learning. It was too early to assess these new developments. An innovative employer partnership project in coffee roasting and

<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>.

retailing was enabling learners to develop relevant skills for employment in a well-equipped, realistic work environment. This was a good model for future work-related developments.

## Recommendation

- 3.8 The prison should rapidly increase the activity places in learning and skills and ensure that all prisoners are constructively engaged in work, education or workshops. New vocational workshops should be opened and appropriately staffed.**

## Good practice

- 3.9** *An innovative employer partnership project in coffee roasting and retailing enabled prisoners to develop relevant skills for employment in a well-equipped, realistic work environment.*

## Provision of activities

- 3.10** There were insufficient purposeful full-time activity places in learning, skills and work to meet the needs of the population. Too many prisoners were unemployed and not benefiting from learning or work. However, the available places were used well. (See recommendation 3.8.)
- 3.11** The curriculum provided a range of educational and vocational options from entry level to level 2, with a small element at level 3. Options for prisoners included English and mathematics, barbering, laser printing, music technology, bicycle repair, radio production and bricklaying. Prisoners were not always able to pursue appropriate external accreditation through prison workshops. There were limited opportunities for prisoners to develop their skills and extend their studies at a higher level.
- 3.12** Prison and college managers reviewed the curriculum annually, cut the programmes which were less relevant and took steps to introduce fresh ideas. Curriculum planning took into account the need for long-term prisoners to progress in their learning when moving to an adult prison.

## Recommendation

- 3.13 There should be more opportunities for prisoner accreditation in vocational areas and industries.**

## Quality of provision

- 3.14** Prisoners attending education experienced good teaching and made progress in the well-resourced education department. The majority of sessions were well planned, and staff used a wide range of methods and resources to engage and motivate learners. Teachers developed prisoners' work-related, English and mathematical skills effectively, which helped them to make progress and gain personal satisfaction from attending learning and training.
- 3.15** Although classrooms in the main education department were clean and welcoming, the quality of vocational workshops was more variable. There were good displays, including learners' work, which reinforced expectations and promoted progression and the prisoner voice. Equality and diversity were well promoted through classroom activities and displays.

- 3.16** Prisoners with additional needs were supported well in education and achieved as well as their peers. The specific needs of prisoners for whom English was an additional language were not identified and met fully. Prisoner attendance at induction was poor, which meant that many prisoners did not receive a prompt assessment. For those who did attend, the sessions were insufficiently engaging.

### Recommendations

- 3.17** The specific needs of prisoners for whom English is an additional language should be identified and met.
- 3.18** The education induction arrangements should ensure that prisoners settle well into education and training.

### Personal development and behaviour

- 3.19** Poor punctuality, due to regime issues, affected prisoners' learning and progress. Their behaviour in education and training was good, and they learned to develop social skills and constructive relationships. Peer mentors provided thoughtful support and gained much from this responsibility. Prisoners responded well when staff challenged inappropriate language or behaviour.
- 3.20** Celebration events, which included family members, provided opportunities to acknowledge learners' achievements and progress. Prisoners' English and mathematical skills were promoted well across the curriculum, and they learned to use industry-related terms well.

### Recommendation

- 3.21** Managers should ensure that prisoners arrive at activities on time.

### Education and vocational achievements

- 3.22** Achievement rates were good and improving. The majority of prisoners in activities made good progress and achieved their qualifications. Achievement rates in level 1 English and mathematics had improved significantly and were now good. However, achievement rates for prisoners following these courses at entry level and level 2 required improvement.
- 3.23** Outcomes for prisoners following vocational courses had progressed, but required further improvement. Retention rates were good. Prisoners developed good practical skills on vocational courses and in training workshops, but too few gained a qualification. The more able prisoners were limited by the lack of appropriate qualifications for them to develop their education skills at a higher level.

### Recommendation

- 3.24** Low prisoner achievement rates on underperforming courses should be addressed effectively, and there should be more opportunities for prisoners to develop their skills and qualifications at a higher level.

## Library

- 3.25** The library was managed by Buckinghamshire County Council. It had been closed for a significant period during the previous year. Only about a quarter of prisoners used the facility, and prisoners from one residential block had no access because of prison staffing issues. Those prisoners who did visit the library were not given sufficient time there. The stock was reasonable, and included careers information, legal texts and Prison Service Instructions. Prisoners were able to make book requests. Previous courses, such as Storybook Dads (enabling prisoners to record a story for their children), no longer ran. Links between the education department and the library to support learning were inadequate.

## Recommendation

- 3.26 All prisoners should have access to the library, which should be effectively managed, staffed and fully operational, and the library service should reintroduce its former courses and programmes.**

## 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.**

- 3.27** The gym was well-equipped and operated safely, but it was underused, with very limited evening and weekend opening. Fewer than a third of prisoners had used the facility in the previous six months, according to prison data. The low staffing levels severely reduced the scope for additional health and fitness programmes, and had restricted links with external agencies. The Duke of Edinburgh's Award scheme operated for a small and targeted group, and helped broaden prisoners' outlook. The gym induction linked well with health care, but too few prisoners were inducted quickly.

## Recommendations

- 3.28 Staffing levels in the gym should be increased to enable the facility to be properly used.**
- 3.29 There should be continued efforts to introduce additional health and well-being opportunities for prisoners in the gym.**



# 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 resettlement strategy at Aylesbury focused appropriately on prisoner need, offending behaviour work and the development of other skills promoting desistance from offending. It coordinated the different strands of offender management, public protection and sentence progression.
- 4.2 The head of reducing reoffending was responsible for all interventions and resettlement pathway provision. All other resettlement functions, including public protection and offender management, were the responsibility of the head of the offender management unit (OMU). Quarterly reducing reoffending meetings coordinated work and relationships, and links between the two heads were effective.
- 4.3 The reduced staffing in the OMU was hampering effective assessment and planning for prisoners. At the time of the inspection, 29% of prisoners did not have a current assessment and, as a result, some risks were unknown. This was a concern as all but 16 prisoners were assigned to the National Probation Service and therefore likely to need high levels of intervention and risk management (see paragraph 4.10 and main recommendation S47). In addition, approximately a third of prisoners should have transferred to the adult prison estate but there had been difficulties in moving them, which slowed their sentence progression (see paragraph 4.17).
- 4.4 Prisoner perception of resettlement work had deteriorated since the last inspection. In our survey, the proportion of prisoners who felt their offender supervisor was supporting them was only 17%, against 32% last time, and 60%, against the comparator of 51%, said they had nobody to help them achieve their sentence plan targets.
- 4.5 Aylesbury was not a designated resettlement prison and had no community rehabilitation company<sup>9</sup> provision. However, around seven prisoners a month were released directly into the community, and received support from CF03, a government programme to reintegrate offenders and ex-offenders back into the community (see paragraph 4.21 and paragraph 4.28).

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<sup>9</sup> Since May 2015 rehabilitation services, both in custody and after release, have been organised through CRCs, which are responsible for work with medium- and low-risk offenders. The National Probation Service has maintained responsibility for high- and very high-risk offenders.

## 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.**

- 4.6** The work of the OMU and offender supervisors had been limited by further reductions in staffing, caused by difficulties in recruiting probation staff and high levels of cross-deployment of uniformed offender supervisors. The OMU should have had the equivalent of 5.6 probation staff, but had 2.7 to manage almost 450 cases. There should have been five uniformed offender supervisors but in practice they were rarely able to undertake the offender supervisor role. The governor had agreed to protect two uniformed officers from cross-deployment, but this had not yet been implemented. Although there were too few staff in the OMU to complete critical tasks, they were committed, knowledgeable and capable, had established effective links in the prison, and undertook good quality work.
- 4.7** The backlog of OASys (offender assessment system) assessments was 127, similar to the last inspection, and most outstanding assessments were the responsibility of community offender managers. As an interim measure, the OMU had developed a specific induction checklist to identify a range of risk and needs. This was effective in establishing multi-agency public protection arrangements (MAPPA) eligibility, child protection and harassment measures, and identifying some key sentence targets. The checklist resulted in quick and appropriate referrals to the psychology team for accredited programmes, and was updated to inform release planning and risk management meetings. Although useful, the checklist could not replace the nationally recognised OASys assessment. (See main recommendation S47.)
- 4.8** All new arrivals were allocated to an offender supervisor quickly. Offender supervisors focused their limited time on the start of sentence, pre-release or transfer, which meant that some risk behaviour following offending in the community (such as drug dealing) could not be challenged or reassessed. Although we saw some effective and good quality work, cases could not be effectively managed, which was a concern given the high risk population. (See main recommendation S47.)
- 4.9** Too few prisoners had a sentence plan (see main recommendation S47). Some we spoke to were not aware of their targets or what work was expected of them. Staff contact logs were good, and detailed the contact with individuals and offender managers. We looked at 12 cases in detail. Of these, two had no assessment at all. Both had received lengthy sentences for firearms offences, had been at the prison for many months and had poor behaviour; one was serving 16 years for offences that were financially driven and his behaviour in the prison demonstrated similar motivation. These prisoners were not effectively challenged. The quality of assessments and plans completed by offender supervisors was good, but those completed by community offender managers were variable. Release on temporary licence (ROTL) was not used as prisoners were not eligible.

### Public protection

- 4.10** Work to address and manage identified risk was good, including some individual risk reduction work, but as 29% of prisoners had not been assessed, some risks remained unknown.
- 4.11** Internal public protection processes were robust, and supported by the effective work of business administrators in identifying offences where there might be child protection or

harassment concerns. This resulted in quick action to monitor and review telephone and mail communication. This initial screening was then progressed by offender supervisors.

- 4.12** MAPPA categories were identified quickly for new arrivals. Where there was late identification of MAPPA levels, this was due to delays in information from external agencies, and there were effective systems to track, monitor and escalate issues. If a MAPPA level had not been confirmed before the prisoner's release, the OMU wrote a report for the offender manager and, where appropriate, approved premises staff to outline risks and suggest management measures.
- 4.13** Some prisoners arrived with very little information known about them. The prison did not have access to the national probation case management IT system (N-Delius), including basic but critical information that would have been available at the court stage. Access to this IT system was a national issue, and there were plans to roll this out.
- 4.14** Programmes designed to reduce risk of harm were used effectively. Prisoners were able to access interventions quickly, and effective post-programme reviews had been held. A number of prisoners had been involved in gangs and the prison was aware of the problem (see paragraph 1.28). There was some support for prisoners who wanted to move away from gang-related lifestyles from Project 507, which was working with approximately 25 individuals to reduce violence and change attitudes.

## Recommendations

- 4.15** **Community offender managers should ensure that MAPPA levels are set six months before the prisoner's release to ensure effective pre-release planning and to manage risk.** (Repeated recommendation 4.27)
- 4.16** **The offender management unit should have access to the national probation case management IT system (N-Delius) to provide basic and immediate risk information about prisoners.**

## Categorisation

- 4.17** Recategorisation processes were good. However, around 30% of the population were over 21 and most were unable to transfer quickly to an adult prison to progress their sentence. Despite considerable efforts to transfer prisoners to the adult estate, many prisoners were not accepted by other prisons.

## Recommendation

- 4.18** **Prisoners over 21 should be transferred promptly to prisons that meet their identified needs to progress their sentence.**

## Indeterminate sentence prisoners

- 4.19** Staffing levels had prevented offender supervisors from providing services to indeterminate sentence prisoners, who received no specific support. The prison was planning to introduce lifer days. This was an important area of work as 10% of the population had life or indeterminate sentences (41 with life sentences and three indeterminate sentence prisoners).

## Recommendation

- 4.20 The prison should understand and address the distinctive needs of indeterminate sentence prisoners.**

## 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.**

- 4.21** The prison released around seven prisoners a month to areas across the country - for the last 31 releases the OMU had to liaise with 26 resettlement areas. All release cases were prioritised and discussed at the interdepartmental risk meeting at six, three and one month before release. Planning was effective, and there were meetings with prisoners, offender managers and staff from some other departments to support effective release arrangements. We saw some good individual work with prisoners due to be released, and support from other agencies was well coordinated. CF03 provided support with relationships, life skills and motivation to engage with prison services for up to a year before release, and this could be continued after release (see paragraph 4.5). At the time of the inspection, 40 prisoners were accessing this voluntary service.

## Accommodation

- 4.22** Arrangements to identify appropriate accommodation were effective, and all of the last 31 prisoners released into the community had a suitable address to go to. The majority of prisoners were released to approved premises. Offender supervisors made timely and good contact with community offender managers to arrange placement and plan to manage risks. Due to the limited number of places available, notification of the placement sometimes came very close to release dates. This posed some difficulty for health staff who needed to coordinate health provision from prison to the community (see paragraph 4.26).

## Education, training and employment

- 4.23** The quality of the National Careers Service (NCS) provided by Adviza required improvement. The NCS contract had been strengthened to ensure that all relevant prisoners received interviews and a skills actions plan, and a previous backlog was practically eliminated. Guidance interviews concentrated well on the practical steps prisoners needed to take, including producing disclosure letters and CVs. Links with resettlement and other key areas of the prison required improvement. Managers' planning and monitoring of NCS activities did not focus sufficiently on outcomes.
- 4.24** There had been limited use of the virtual campus – which gives prisoners access to community education, training and employment opportunities via the internet. Managers had taken recent action to update and renew the resource, but it was too early to judge the results.

## Recommendation

- 4.25** Managers should monitor education, training and employment and National Careers Service arrangements more rigorously to ensure good outcomes for prisoners.

## Health care

- 4.26** The primary care team offered support to the small number of prisoners released directly from Aylesbury, providing information about registering with a GP and issuing a supply of medication or prescription if required. However, late notification of the proposed address on release could hinder the support available (see paragraph 4.22). The specialist mental health team linked appropriately with community networks and other providers to support prisoners with continuing needs before release or transfer to the adult estate.

## Drugs and alcohol

- 4.27** The drug and alcohol recovery team (DART) linked in well with the OMU, provided updates on prisoner progress, attended risk management boards, and contributed to sentence and transfer planning. Release preparation was detailed, included harm reduction and overdose prevention advice, and release plans were shared with offender supervisors. The service identified appropriate support in the community and was in contact with more than 30 drug intervention programmes (DIPs) due to the wide catchment area. Although few prisoners were released into the local community, some DIP workers came into the prison to see their clients before release.

## Finance, benefit and debt

- 4.28** Prisoners were able to open bank accounts and access support with financial management from the CF03 project (see paragraph 4.5). The Department for Works and Pensions provided advice and support on benefits.

## Children, families and contact with the outside world

- 4.29** Visits provision was not sufficiently good. Prisoners and visitors told us, and we observed, that visits regularly did not start on time. We saw visitors having delays of 45 minutes despite arriving early. This was concerning as only 24% of prisoners in our survey said that it was easy for their families to visit, and the prison's own data showed that 46% of prisoners were held more than 50 miles from their homes.
- 4.30** Facilities for visits were rudimentary; the visitors' centre was small but staff attempted to identify and support first-time visitors. Visitors were called to the hall in groups, which meant that some visitors received shorter visits than others, and some visitors arrived two hours before the visitors' centre opened to guarantee a full visit. The visits hall continued to be cramped with little privacy. There was a small play area for children and a basic refreshments bar staffed by the volunteers who ran the visitors' centre. Facilities for closed visits were in poor conditions.
- 4.31** The prison ran family days and a range of other events that enabled a small number of prisoners to see their families in a more suitable environment.

- 4.32** In our survey, only 21% of prisoners against the comparator of 32% said that a member of staff had helped them to maintain contact with family or friends. The prison no longer facilitated the Storybook Dads recording project (see paragraph 3.25), and the lack of relationship education courses was a gap in a prison holding young prisoners serving long sentences. The poor regime also prevented prisoners from phoning their families during the evening (see paragraphs 2.6 and 3.1).

## Recommendations

- 4.33** **Visits should start at the advertised time, and all prisoners should have access to the full advertised period.** (Repeated recommendation 4.43)
- 4.34** **Closed visits facilities should be refurbished.**
- 4.35** **Prisoners should be able to access support in building and maintaining family ties while at Aylesbury.** (Repeated recommendation 4.45)

## Attitudes, thinking and behaviour

- 4.36** A wide range of offending behaviour programmes continued to be delivered, including both accredited and non-accredited courses. Accredited programmes were delivered by the psychology team and others by a range of departments, including the chaplaincy and CF03, a commissioned service. A range of accredited programmes included the Sex Offender Treatment Programme (SOTP), the thinking skills programme (TSP) and Resolve (violence management course). Two new national programmes were due to replace SOTP.
- 4.37** Communications between the psychology and OMU teams were effective, enabling the appropriate targeting of programmes, and waiting lists were reviewed jointly. There was good work to understand the reasons why prisoners did not want to start programmes. Completion rates on courses were high and, where possible, offender supervisors worked to reinforce learning from courses.
- 4.38** The Aylesbury Pathways Service gave some vulnerable and troubled prisoners the chance to understand and change their behaviour, and to develop appropriate coping strategies. Prisoners were very positive about the support provided by the service. This was a jointly funded HMPPS-NHS venture delivered by prison and health staff, which was supporting 46 prisoners. The service offered highly effective psychological and social support, which was demonstrably reducing self-harm and was helping to address offending behaviour. All prisoners were screened for inclusion, and support was targeted at the most vulnerable. There was a waiting list of 25, and many more prisoners could have benefited from this excellent service if provision had been extended.

## Good practice

- 4.39** *The Aylesbury Pathways team provided highly effective support to some vulnerable and troubled prisoners. The service had demonstrably reduced self-harming behaviour and prisoners were very positive about the effect it had on their behaviour and lives.*

# 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 the governor

- 5.1** Violent incidents should be substantially reduced as part of a comprehensive violence reduction strategy that includes systematic consultation with prisoners. The safer custody team should be adequately resourced to monitor and address violent behaviour and to support victims. (S42)
- 5.2** Use of force should be justified, fully documented, and subject to quality assurance and rigorous scrutiny at regular use of force meetings. (S43)
- 5.3** Communal areas and cells should be clean and free from graffiti, toilets should be properly screened and clean, showers should be maintained in good condition, and prisoners should be able to shower every day. (S44)
- 5.4** The needs of all prisoners with protected characteristics should be identified and addressed, including through regular consultation and support groups. Prompt management action should be taken to deal with evidence of potential discrimination. (S45)
- 5.5** Prisoners should be unlocked and engaged in constructive activity during the working day. The regime should be predictable and equitable and include at least one hour in the open air. (S46)
- 5.6** Concerted action should be taken to reduce the OASys backlog, and there should be sufficient offender supervisors to work effectively with prisoners towards meeting sentence plan targets. (S47)

## Recommendations

### To HMPPS

- 5.7** Community offender managers should ensure that MAPPA levels are set six months before the prisoner's release to ensure effective pre-release planning and to manage risk. (4.15, repeated recommendation 4.27)
- 5.8** The offender management unit should have access to the national probation case management IT system (N-Delius) to provide basic and immediate risk information about prisoners. (4.16)
- 5.9** Prisoners over 21 should be transferred promptly to prisons that meet their identified needs to progress their sentence. (4.18)

## **Recommendation** **To Prisoner Escort and Custody Services**

**5.10** Escort vans should be clean and graffiti free. (1.2)

## **Recommendations** **To the governor**

### **Early days in custody**

**5.11** New arrivals on D wing should have a full induction programme and be allocated to activity promptly on completion of the induction. They should be out of their cells for 10 hours a day while on the unit. (1.8)

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

**5.12** Assessment, care in custody and teamwork (ACCT) case management documentation should demonstrate consistent care for prisoners at risk of self-harm. Support should include good quality individual care planning and multidisciplinary reviews. (1.21)

**5.13** The prison should develop a prison-wide strategy to support prisoners and prevent self-harm that is based on evidence about the nature of incidents, patterns and trends. This should include purposeful activity and the full engagement with prisoners from prison officers and managers, particularly those working on residential units. (1.22)

**5.14** The Listener scheme should be fully supported by staff, and prisoners should have 24-hour access. (1.23)

### **Safeguarding**

**5.15** All staff should be aware of the appropriate action to take if a prisoner reports current or historic abuse. (1.25)

### **Security**

**5.16** Security objectives should reflect the current intelligence threat assessment and be communicated to staff appropriately. (1.32)

**5.17** Procedural security measures should be proportionate to the evidence of intelligence concerns and not unnecessarily restrict prisoner access to a full regime. (1.33)

### **Incentives and earned privileges**

**5.18** The incentives and earned privileges scheme should focus more on promoting good behaviour. Prisoners on the basic regime should have access to facilities that ensure decency and maintain family ties, and their period on basic should be reviewed after shorter intervals. (1.36)

### **Discipline**

**5.19** Managers should oversee the data collected on adjudications, and take action to improve the quality of enquiry and reduce the high number of hearings. Less serious offences should be dealt with through other means. (1.40)

- 5.20** The regime for longer stay prisoners in the segregation unit should include purposeful activities to help prevent psychological deterioration. (1.49, repeated recommendation 1.60)
- 5.21** There should be individual care and reintegration plans to manage prisoners effectively during long periods of segregation and to help prisoners return to normal location. (1.50, repeated recommendation 1.61)

### Substance misuse

- 5.22** There should be an annual substance misuse needs analysis to inform the drug and alcohol strategy and action plan, and to ensure that interventions are responsive to trends and emerging need. (1.57)

### Residential units

- 5.23** Cells designed to hold one prisoner should not be used to hold two. (2.7, repeated recommendation 2.11)
- 5.24** Emergency cell call bells should be answered promptly and within five minutes. (2.8, repeated recommendation 2.13)
- 5.25** Applications should be tracked and followed up when not responded to. (2.9)

### Staff-prisoner relationships

- 5.26** Staffing levels should be sufficient and staff should actively engage with prisoners and help support them through their sentence. They should challenge inappropriate conduct, and behave fairly and consistently when responding to help prisoners meet their basic needs. (2.13)

### Equality and diversity

- 5.27** Investigations into discrimination incident reports should be thorough and fully documented, and lead to appropriate follow-up actions. (2.18)

### Complaints

- 5.28** Oversight and quality assurance of prisoner complaints should ensure that they are dealt with promptly and subject to appropriate investigation to enable a full and helpful response. (2.29)

### Legal rights

- 5.29** Prisoners should be able to have a private legal visit, and the prison should investigate the prisoner perception that their legally privileged mail is opened inappropriately by staff. (2.31)

### Health services

- 5.30** All prison staff should have up-to-date basic life support skills, including use of an emergency defibrillator. (2.40)

- 5.31** All prisoners should be able to attend internal and external health care appointments. Patients should be routinely notified in advance of all internal health care appointments. (2.46)
- 5.32** Prisoners should be collected from their appointments in the health care centre without delay. (2.47)
- 5.33** The significant level of patients who fail to attend planned appointments, including with the dentist, should be investigated and addressed, and non-attenders should be routinely followed up. (2.48)
- 5.34** Pharmacy advice and support should be routinely available to prisoners. (2.54)
- 5.35** The health care waiting facility for prisoners receiving medication should be fully separated from patients waiting for appointments, and prison staff should supervise the medicine queue and the administration of medication. (2.55)
- 5.36** The health room in the segregation unit should comply with infection prevention standards. (2.56)
- 5.37** All prisoners should have timely access to dental assessment and treatment. (2.59)
- 5.38** Prisoners should be able to access counselling services and specialist psychology input. (2.63)
- 5.39** Prisoners requiring treatment in hospital under the Mental Health Act should be transferred within established NHS guidelines. (2.64)

#### Catering

- 5.40** The kitchen should be clean and in a good state of repair, and wing serveries and food trolleys should be clean and well maintained. (2.71)
- 5.41** Serveries should be properly supervised by staff, and servery workers should wear appropriate protective clothing. (2.72)
- 5.42** Prisoners should be able to dine in association. (2.73, repeated recommendation 2.105)

#### Purchases

- 5.43** New arrivals should be able to buy items from the prison shop within their first 24 hours. (2.77, repeated recommendation 2.112)
- 5.44** Prisoners should not be charged an administration fee for catalogue orders. (2.78, repeated recommendation 2.113)

#### Learning and skills and work activities

- 5.45** The prison should rapidly increase the activity places in learning and skills and ensure that all prisoners are constructively engaged in work, education or workshops. New vocational workshops should be opened and appropriately staffed. (3.8)
- 5.46** There should be more opportunities for prisoner accreditation in vocational areas and industries. (3.13)

- 5.47** The specific needs of prisoners for whom English is an additional language should be identified and met. (3.17)
- 5.48** The education induction arrangements should ensure that prisoners settle well into education and training. (3.18)
- 5.49** Managers should ensure that prisoners arrive at activities on time. (3.21)
- 5.50** Low prisoner achievement rates on underperforming courses should be addressed effectively, and there should be more opportunities for prisoners to develop their skills and qualifications at a higher level. (3.24)
- 5.51** All prisoners should have access to the library, which should be effectively managed, staffed and fully operational, and the library service should reintroduce its former courses and programmes. (3.26)

### Physical education and healthy living

- 5.52** Staffing levels in the gym should be increased to enable the facility to be properly used. (3.28)
- 5.53** There should be continued efforts to introduce additional health and well-being opportunities for prisoners in the gym. (3.29)

### Strategic management of resettlement

#### Offender management and planning

- 5.54** The prison should understand and address the distinctive needs of indeterminate sentence prisoners. (4.20)

#### Reintegration planning

- 5.55** Managers should monitor education, training and employment and National Careers Service arrangements more rigorously to ensure good outcomes for prisoners. (4.25)
- 5.56** Visits should start at the advertised time, and all prisoners should have access to the full advertised period. (4.33, repeated recommendation 4.43)
- 5.57** Closed visits facilities should be refurbished. (4.34)
- 5.58** Prisoners should be able to access support in building and maintaining family ties while at Aylesbury. (4.35, repeated recommendation 4.45)

## Examples of good practice

- 5.59** The segregation unit had introduced a prisoner overview sheet to provide visiting staff and professionals a synopsis of individual cases and risk. (1.51)
- 5.60** Prisoners' individual clinical records were routinely sampled to assess quality and drive improvement. (2.41)

- 5.61** The medi-alert laminated card was a novel and effective mechanism to bring rapid attention to a prisoner's allergies or underlying health condition. (2.42)
- 5.62** Prisoners with learning disabilities were supported through the provision of health action plans and access to a range of easy-read health materials. (2.65)
- 5.63** An innovative employer partnership project in coffee roasting and retailing enabled prisoners to develop relevant skills for employment in a well-equipped, realistic work environment. (3.9)
- 5.64** The Aylesbury Pathways team provided highly effective support to some vulnerable and troubled prisoners. The service had demonstrably reduced self-harming behaviour and prisoners were very positive about the effect it had on their behaviour and lives. (4.39)

## Section 6. Appendices

### Appendix I: Inspection team

Hindpal Singh Bhui	Team leader
Ian Dickens	Inspector
Angela Johnson	Inspector
Yvonne McGuckian	Inspector
Angus Mulready-Jones	Inspector
Gordon Riach	Inspector
Kam Sarai	Inspector
Natalie-Ann Hall	Researcher
Jayne Price	Researcher
Alissa Redmond	Researcher
Emma Seymour	Researcher
Sigrid Engelen	Substance misuse inspector
Steve Eley	Health services inspector
Catriona Reeves	Care Quality Commission inspector
Tony Gallagher	Ofsted inspector
Sheila Campbell	Ofsted inspector
Keith Humphreys	Offender management inspector
Marie Steinbrecher	Observer



## 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 2015, prisoners' early days in custody were managed reasonably well, except for their induction. Safety remained a concern. The prison's strategy for managing the high levels of violence focused excessively on punitive measures that were not effective, and in some cases not decent. The use of adjudications and the basic regime was very high. Too many prisoners in crisis and at risk of self-harm were isolated with no access to purposeful activity. Security arrangements were adequate but too little was done to combat the high availability of drugs. Use of force was high but its governance was good and the cases we reviewed were proportionate. The use of segregation was high and the regime was poor. Substance misuse services were good. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

#### **Main recommendations**

The prison should reduce the number of violent incidents. The violence reduction strategy should be informed by consultation with prisoners, the safer custody team should monitor patterns of violence and take action where appropriate, and there should be an effective approach to dealing with perpetrators and supporting victims of bullying and violence. (S39)

##### **Not achieved**

At-risk prisoners on assessment, care in custody and teamwork (ACCT) case management should be set timely objectives in care plans, and should receive an enhanced risk assessment, approved at a senior level, before being located in the segregation unit. Prisoners on regimes restricted for security reasons and those in segregation should receive daily showers, exercise and telephone calls, and have access to a more productive regime built around individual care plans designed to engage and motivate them. (S40)

##### **Partially achieved**

Prisoners on the basic regime should be properly reviewed after shorter periods of time, and the prison's incentives and earned privileges scheme should focus more on promoting good behaviour. The basic regime should not withdraw access to provisions that ensure decency and maintain family ties, such as a daily shower, exercise and telephone calls. (S41)

##### **Not achieved**

#### **Recommendations**

New arrivals on D wing should have access to a full regime. (I.10)

##### **Not achieved**

A full induction programme should be delivered to all prisoners, and this should be checked through a tracking system. (I.11)

##### **Not achieved**

All staff should receive a refresher course in safer custody training. (1.27, repeated recommendation 1.31)

**Not achieved**

Prisoners in crisis should be provided with in-cell activities and encouraged to attend work or education. (1.28)

**Not achieved**

The prison should work with the local safeguarding adults board to introduce a safeguarding policy to ensure concerns about vulnerable adults are systematically addressed. (1.31)

**Achieved**

Procedural security measures should be proportionate and not unnecessarily restrict prisoner access to a full regime. (1.40)

**Not achieved**

Dynamic security should be strengthened, including improved supervision of prisoners. (1.41)

**Partially achieved**

Closed visits should be authorised only when there is significant risk justified by security intelligence of trafficking of unauthorised items through visits. (1.42, repeated recommendation 1.45)

**Achieved**

The prison should establish a drug supply reduction strategy and action plan to be overseen by the security committee or a drug strategy committee, with the active involvement of the drug and alcohol recovery team. (1.43)

**Achieved**

Punishments following adjudications should be fair and proportionate. (1.49)

**Achieved**

The use of force should be reduced. (1.54)

**Not achieved**

The segregation unit should always be kept clean. (1.59)

**Not achieved**

The regime for longer stay prisoners in the segregation unit should include purposeful activities to help prevent psychological deterioration. (1.60)

**Not achieved** (recommendation repeated, 1.49)

There should be individual care and reintegration plans to manage prisoners effectively during long periods of segregation and to help prisoners return to normal location. (1.61)

**Partially achieved** (recommendation repeated, 1.50)

## Respect

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

*At the last inspection, in 2015, living conditions and access to facilities for many prisoners were poor. Staff-prisoner relationships were mostly reasonable, although the use of detached duty, high staff sickness and restricted regimes had affected some relationships. Arrangements for equality and diversity had improved but outcomes for some minority groups required investigation. The chaplaincy provided particularly good faith and pastoral support. Management of complaints was inadequate. Health services were reasonable overall. Prisoners remained positive about the prison food, although there were concerns about how and when it was served. Outcomes for prisoners were not sufficiently good against this healthy prison test.*

### Recommendations

Communal areas should be maintained to an acceptable standard, and prisoners expected to keep their cells and communal areas clean. (2.10, repeated recommendation 2.10)

**Not achieved**

Cells designed to hold one prisoner should not be used to hold two. (2.11, repeated recommendation 2.11)

**Not achieved** (recommendation repeated, 2.7)

Communal showers should be maintained in good condition and be well ventilated, and in-cell toilets should be descaled and properly screened. (2.12)

**Not achieved**

Emergency cell call bells should be answered within five minutes. (2.13, repeated recommendation 2.14)

**Not achieved** (repeated recommendation, 2.8)

Prisoners' negative perceptions about staff should be addressed, and staff who appear to be indifferent to prisoners should be required to take a more pro-social approach. (2.22, repeated recommendation 2.22)

**Not achieved**

Personal officer entries in prisoners' case notes should evidence good knowledge of the prisoners they are responsible for, and there should be regular management checks to assess the quality of staff record keeping and encourage meaningful staff engagement with prisoners. (2.23)

**Not achieved**

An equality action plan should be developed. (2.28)

**Achieved**

The equality policy should address all protected characteristics in equal depth. (2.29)

**Not achieved**

There should be prompt investigation into out-of-range results from equality monitoring and the necessary follow-up action taken. (2.30)

**Not achieved**

All prisoners should be made aware of discrimination incident reporting forms and there should be consultation to determine why so few are submitted. External quality assurance should be used to improve investigation of and follow-up action arising from discrimination complaints. (2.31)

**Not achieved**

There should be regular support groups/forums for prisoners from each protected characteristic. (2.39, repeated recommendation 2.37)

**Not achieved**

The prison should ensure that complaints are dealt with according to Prison Service orders and within the correct timescale. (2.47)

**Not achieved**

Legal visits provision should be improved, to ensure confidentiality and provide more opportunities for prisoners to speak to their legal adviser. (2.52, repeated recommendation 2.53)

**Not achieved**

There should be clear coordination and leadership across and between the different clinical services to ensure safe and consistent outcomes for prisoners. (2.64)

**Achieved**

Health staff from all providers should have clear arrangements for their line management, clinical supervision and training in core skills. (2.65)

**Achieved**

All health and prison staff should have up-to-date basic life support skills, including use of an emergency defibrillator. (2.66)

**Not achieved**

All new arrivals should have a secondary health assessment to ensure adequate identification of health needs, and prisoners on restricted movements, including those in the segregation unit, should have appropriate and prompt access to health services. (2.76)

**Achieved**

Clinical review of patients with long-term conditions should be timely. (2.77)

**Achieved**

All prisoners should be able to obtain their prescribed medicines, simple pain relief and antibiotics promptly as needed, including overnight and at weekends. (2.85)

**Partially achieved**

The in-possession medicines policy should be ratified and applied to ensure safe use and administration of medicines. (2.86)

**Achieved**

Prisoners should receive dental treatment in privacy and with confidentiality, except where a specific risk has been identified. (2.90)

**Achieved**

There should be administrative support for the mental health team. (2.97)

**Achieved**

Prisoners should collect their own food for all meals, lunch should not be served before noon and the evening meal before 5pm, and breakfast should be adequate and served on the day it is to be consumed. (2.104)

**Partially achieved**

Prisoners should be able to dine in association. (2.105, repeated recommendation 2.99)

**Not achieved** (repeated recommendation, 2.73)

Serveries should be kept clean and properly maintained, servery workers should be appropriately dressed, and correct utensils used to serve food. (2.106)

**Not achieved**

Prisoners who work in the kitchen should be able to achieve relevant qualifications. (2.107)

**Not achieved**

New arrivals should be able to buy items from the prison shop within their first 24 hours. (2.112)

**Not achieved** (recommendation repeated, 2.77)

Prisoners should not be charged an administration fee for catalogue orders. (2.113)

**Not achieved** (recommendation repeated, 2.78)

## Purposeful activity

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

*At the last inspection, in 2015, time out of cell was wholly inadequate for a young adult training prison. The severely restricted regime led to boredom, frustration and long periods of isolation for many. The provision of learning and work activity was poorly managed and equally concerning. Twenty-five per cent of the population were unemployed and only a third of those in employment were full time. Despite efforts to increase vocational training, this was regularly cancelled due to staff shortages. However, when vocational training did run, instructors were supportive and success rates were high. English and maths were not sufficiently integrated and achievements were low. Staff shortages and regime curtailment limited access to the library and gym for some prisoners. Outcomes for prisoners were poor against this healthy prison test.*

### Main recommendation

The prison should increase the quantity and quality of work and training opportunities available for prisoners and maximise the use of these to increase the number of prisoners involved in substantive purposeful activity. (S42, repeated recommendation S47).

**Partially achieved**

### Recommendations

The prison should operate a predictable and equitable regime that allows all prisoners to attend purposeful activity regularly and provides a reasonable amount of time out of cell. (3.5)

**Not achieved**

Prisoners should receive at least one hour's exercise in the open air every day. (3.6)

**Not achieved**

The prison should set clear targets and expectations for the quality of activities; managers should monitor these rigorously, analyse data effectively and take appropriate actions to ensure urgent improvements. (3.14, repeated recommendation 3.15)

**Partially achieved**

The prison should implement effective quality assurance arrangements, including monitoring the quality of learning sessions, to gain a better understanding of the quality of provision and to improve prisoners' experience. (3.15, repeated recommendation 3.16)

**Achieved**

The college should ensure that there are sufficient learning and skills staff to provide a wide range of high-quality activities. (3.16)

**Partially achieved**

The prison should develop a strategy to improve prisoners' skills in English and mathematics. (3.17)

**Partially achieved**

The prison should provide more activity places that take appropriate account of prisoners' prior education, aptitude and remaining time in custody. (3.23)

**Not achieved**

The learning, skills and work induction for new arrivals should be more effective and rigorous. (3.24)

**Not achieved**

The prison should establish vocationally relevant training in all areas, and urgently introduce appropriate training for wing cleaners and all workers involved in handling food. (3.25)

**Partially achieved**

The prison should improve the rigour and quality of target-setting in individual learning plans to identify short-term targets and measure achievement more frequently. (3.26)

**Partially achieved**

The prison should ensure that lessons start on time and that attendance is improved by minimising disruptions and cancellations. (3.31, repeated recommendation 3.36)

**Not achieved**

The prison should provide working cars in the motor vehicle workshop to enable prisoners to test their skills and confirm their learning. (3.32)

**Not achieved**

Teachers should make better use of the available information learning technology resources to make learning more engaging and interactive. (3.33)

**Partially achieved**

Prisoners who are withdrawn from activities should have alternative opportunities to return to learning, skills and work. (3.35)

**Achieved**

All prisoners should be able to visit the library at least once a week. (3.39)

**Not achieved**

The prison should introduce appropriate vocational training in the gym. (3.45)

**Not achieved**

The prison should provide adequate changing facilities, and plan to replace the cardiovascular equipment. (3.46)

**Partially 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 2015, strategic management of resettlement was now well integrated and the service provided was reasonable. However, the cross-deployment of uniformed offender supervisors and probation vacancies meant that not all prisoners had adequate contact, and some had no sentence plan. Public protection work remained good, although some management risk levels were identified too near to the prisoner's release. Resettlement pathway work was generally good but the visits provision remained poor. Offending behaviour work was good and highly regarded by participants, and there were some promising creative initiatives aimed at the most complex case. Outcomes for prisoners were reasonably good against this healthy prison test.*

### Recommendations

The prison should ensure that there are sufficient offender supervisors dedicated to offender management duties. (4.8)

**Not achieved**

Community rehabilitation companies (CRCs) responsible for the resettlement needs of prisoners to be released from Aylesbury should ensure they are delivering an appropriate service to such prisoners. (4.9)

**No longer relevant**

The backlog of OASys assessments should be reduced. (4.22)

**Not achieved**

All prisoners should have a sentence plan, be given the opportunity to discuss the objectives, and understand what they need to achieve while they are in custody. (4.23)

**Not achieved**

The frequency and quality of contact between offender supervisors and prisoners should be more focused on risk reduction, and fully recorded. (4.24)

**Partially achieved**

Community offender managers should ensure that MAPPA levels are set six months before the prisoner's release to ensure effective pre-release planning and to manage risk. (4.27)

**Not achieved** (recommendation repeated, 4.15)

Prisoners should be transferred quickly to appropriate prisons for progression or resettlement to ensure their needs are met. (4.33)

**Not achieved**

The prison should make better use of the virtual campus to promote and enhance prisoner learning. (4.36)

**Not achieved**

Visits should start at the advertised time, and all prisoners should have access to the full advertised period. (4.43)

**Not achieved** (recommendation repeated, 4.33)

Closed visits facilities should be screened from the main visits room and offer privacy. (4.44, repeated recommendation 4.45)

**Not achieved**

Prisoners should be able to access support in building and maintaining family ties while at Aylesbury. (4.45)

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

## Appendix III: Prison population profile

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

### Population breakdown by:

Status	18–20 yr olds	21 and over	%
Sentenced	260	123	87.6
Recall	9	3	2.7
<b>Total</b>	<b>269</b>	<b>126</b>	<b>90.3</b>

Sentence	18–20 yr olds	21 and over	%
12 months to less than 2 years	2		0.5
2 years to less than 4 years	10	6	3.6
4 years to less than 10 years	215	86	68.9
10 years and over (not life)	41	33	16.9
ISPP (indeterminate sentence for public protection)	1	2	0.7
Life	30	11	10.1
<b>Total</b>	<b>299</b>	<b>138</b>	<b>437</b>

Age	Number of prisoners	%
Under 21 years	299	68.4
21 years to 29 years	138	31.6
<b>Total</b>	<b>437</b>	<b>100</b>

Nationality	18–20 yr olds	21 and over	%
British	260	126	88.3
Foreign nationals	39	12	11.6
<b>Total</b>	<b>299</b>	<b>138</b>	<b>100</b>

Security category	18–20 yr olds	21 and over	%
Category B		35	8
Category C		75	17.2
Other	299	28	74.8
<b>Total</b>	<b>299</b>	<b>138</b>	<b>100</b>

<b>Ethnicity</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
White			
British	100	46	33.4
Irish		2	0.5
Gypsy/Irish Traveller	3	1	0.9
Mixed			
White and black Caribbean	14	4	4.1
White and black African	4	1	1.1
White and Asian	3	2	1.1
Other mixed	11	3	3.2
Asian or Asian British			
Indian	4	3	1.6
Pakistani	10	5	3.4
Bangladeshi	8	7	3.4
Other Asian	11	4	3.4
Black or black British			
Caribbean	52	22	16.9
African	37	22	13.5
Other black	20	9	6.6
Other ethnic group			
Arab	2		0.5
Other ethnic group	8	2	2.3
<b>Total</b>	<b>299</b>	<b>138</b>	<b>100</b>

<b>Religion</b>	<b>18–20 yr olds</b>	<b>21 and over</b>	<b>%</b>
Church of England	29	13	9.6
Roman Catholic	29	17	10.5
Other Christian denominations	72	23	21.7
Muslim	102	55	35.9
Sikh	1	1	0.5
Hindu	1	1	0.5
Buddhist	1	1	0.5
Other	1		0.2
No religion	63	27	20.6
<b>Total</b>	<b>299</b>	<b>138</b>	<b>100</b>

**Sentenced prisoners only**

<b>Length of stay</b>	<b>18–20 yr olds</b>		<b>21 and over</b>	
	<b>Number</b>	<b>%</b>	<b>Number</b>	<b>%</b>
Less than 1 month	20	4.6	1	0.2
1 month to 3 months	62	14.2	2	0.5
3 months to six months	46	10.5	10	2.3
Six months to 1 year	46	16.9	10	6.6
1 year to 2 years	83	19	59	13.5
2 years to 4 years	14	3.2	37	8.5
<b>Total</b>	<b>299</b>	<b>68.4</b>	<b>138</b>	<b>31.6</b>

## Appendix IV: Summary of prisoner questionnaires and interviews

### Prisoner survey methodology

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

### Sampling

The prisoner survey was conducted on a representative sample of the prison population. Using a robust statistical formula provided by a government department statistician we calculated the sample size required to ensure that our survey findings reflected the experiences of the entire population of the establishment<sup>10</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 4 April 2017, the young adult population at HMYOI Aylesbury was 436. Using the method described above, questionnaires were distributed to a sample of 182 young adults.

We received a total of 149 completed questionnaires, a response rate of 82%. This included one questionnaire completed via interview. Thirteen respondents refused to complete a questionnaire and 20 questionnaires were not returned.

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<sup>10</sup> 95% confidence interval with a sampling error of 7%. The formula assumes a 75% response rate (65% in open establishments) and we routinely 'oversample' to ensure we achieve the minimum number of responses required.

Wing/unit	Number of completed survey returns
A	25
B	24
C	20
D	18
E	21
F	21
G	11
Segregation unit	9

### Presentation of survey results and analyses

Over the following pages we present the survey results for HMYOI Aylesbury.

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>11</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 HMYOI Aylesbury in 2017 compared with responses from young adults surveyed in all other young adult training prisons. This comparator is based on all responses from young adult surveys carried out in three young adult training prisons since April 2014.
- The current survey responses from HMYOI Aylesbury in 2017 compared with the responses of young adults surveyed at HMYOI Aylesbury in 2015.
- A comparison within the 2017 survey between the responses of white young adults and those from a black and minority ethnic group.
- A comparison within the 2017 survey between those who are British nationals and those who are foreign nationals.
- A comparison within the 2017 survey between the responses of Muslim young adults and non-Muslim young adults.
- A comparison within the 2017 survey between the responses of young adults who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2017 survey between those who are aged 21 and under and those over 21.

<sup>11</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.

- A comparison within the 2017 survey between the responses of young adults for whom it was their first time in prison and young adults who had been in prison before.
- A comparison within the 2017 survey between the responses of prisoners on F wing (prisoners less able to cope on a mainstream wing) and the responses of prisoners on A, B, C, D, E and G wings.

## Survey summary

### Section I: About you

<b>Q1.2</b>	<b>How old are you?</b>	
	<i>Under 21</i>	97 (66%)
	<i>21 - 29</i>	51 (34%)
	<i>30 - 39</i>	0 (0%)
	<i>40 - 49</i>	0 (0%)
	<i>50 - 59</i>	0 (0%)
	<i>60 - 69</i>	0 (0%)
	<i>70 and over</i>	0 (0%)
<b>Q1.3</b>	<b>Are you sentenced?</b>	
	<i>Yes</i>	142 (96%)
	<i>Yes - on recall</i>	6 (4%)
	<i>No - awaiting trial</i>	0 (0%)
	<i>No - awaiting sentence</i>	0 (0%)
	<i>No - awaiting deportation</i>	0 (0%)
<b>Q1.4</b>	<b>How long is your sentence?</b>	
	<i>Not sentenced</i>	0 (0%)
	<i>Less than 6 months</i>	0 (0%)
	<i>6 months to less than 1 year</i>	3 (2%)
	<i>1 year to less than 2 years</i>	3 (2%)
	<i>2 years to less than 4 years</i>	16 (11%)
	<i>4 years to less than 10 years</i>	81 (55%)
	<i>10 years or more</i>	27 (18%)
	<i>IPP (indeterminate sentence for public protection)</i>	3 (2%)
	<i>Life</i>	15 (10%)
<b>Q1.5</b>	<b>Are you a foreign national (i.e. do not have UK citizenship)?</b>	
	<i>Yes</i>	16 (11%)
	<i>No</i>	132 (89%)
<b>Q1.6</b>	<b>Do you understand spoken English?</b>	
	<i>Yes</i>	147(100%)
	<i>No</i>	0 (0%)
<b>Q1.7</b>	<b>Do you understand written English?</b>	
	<i>Yes</i>	147(99%)
	<i>No</i>	1 (1%)

<b>Q1.8</b>	<b>What is your ethnic origin?</b>		
	<i>White - British (English/ Welsh/ Scottish/ Northern Irish)</i>	51 (34%)	<i>Asian or Asian British - Chinese</i> 0 (0%)
	<i>White - Irish</i>	4 (3%)	<i>Asian or Asian British - other</i> 2 (1%)
	<i>White - other</i>	9 (6%)	<i>Mixed race - white and black Caribbean</i> 10 (7%)
	<i>Black or black British - Caribbean</i>	22 (15%)	<i>Mixed race - white and black African</i> 3 (2%)
	<i>Black or black British - African</i>	26 (18%)	<i>Mixed race - white and Asian</i> 0 (0%)
	<i>Black or black British - other</i>	1 (1%)	<i>Mixed race - other</i> 1 (1%)
	<i>Asian or Asian British - Indian</i>	2 (1%)	<i>Arab</i> 0 (0%)
	<i>Asian or Asian British - Pakistani</i>	6 (4%)	<i>Other ethnic group</i> 3 (2%)
	<i>Asian or Asian British - Bangladeshi</i>	8 (5%)	
<b>Q1.9</b>	<b>Do you consider yourself to be Gypsy/ Romany/ Traveller?</b>		
	<i>Yes</i>		7 (5%)
	<i>No</i>		132 (95%)
<b>Q1.10</b>	<b>What is your religion?</b>		
	<i>None</i>	34 (23%)	<i>Hindu</i> 1 (1%)
	<i>Church of England</i>	21 (14%)	<i>Jewish</i> 1 (1%)
	<i>Catholic</i>	22 (15%)	<i>Muslim</i> 52 (35%)
	<i>Protestant</i>	1 (1%)	<i>Sikh</i> 0 (0%)
	<i>Other Christian denomination</i>	13 (9%)	<i>Other</i> 1 (1%)
	<i>Buddhist</i>	1 (1%)	
<b>Q1.11</b>	<b>How would you describe your sexual orientation?</b>		
	<i>Heterosexual/ Straight</i>		142 (96%)
	<i>Homosexual/Gay</i>		3 (2%)
	<i>Bisexual</i>		3 (2%)
<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>		28 (19%)
	<i>No</i>		118 (81%)
<b>Q1.13</b>	<b>Are you a veteran (ex-armed services)?</b>		
	<i>Yes</i>		0 (0%)
	<i>No</i>		147 (100%)
<b>Q1.14</b>	<b>Is this your first time in prison?</b>		
	<i>Yes</i>		105 (71%)
	<i>No</i>		42 (29%)
<b>Q1.15</b>	<b>Do you have children under the age of 18?</b>		
	<i>Yes</i>		24 (16%)
	<i>No</i>		123 (84%)

## 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>	49 (33%)
	<i>2 hours or longer</i>	89 (60%)
	<i>Don't remember</i>	10 (7%)

<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>	49 (34%)
	Yes	66 (45%)
	No	25 (17%)
	Don't remember	6 (4%)
<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>	49 (34%)
	Yes	9 (6%)
	No	80 (55%)
	Don't remember	8 (5%)
<b>Q2.4</b>	<b>On your most recent journey here, was the van clean?</b>	
	Yes	57 (39%)
	No	62 (42%)
	Don't remember	28 (19%)
<b>Q2.5</b>	<b>On your most recent journey here, did you feel safe?</b>	
	Yes	111 (76%)
	No	27 (18%)
	Don't remember	8 (5%)
<b>Q2.6</b>	<b>On your most recent journey here, how were you treated by the escort staff?</b>	
	<i>Very well</i>	28 (19%)
	<i>Well</i>	62 (42%)
	<i>Neither</i>	42 (29%)
	<i>Badly</i>	6 (4%)
	<i>Very badly</i>	3 (2%)
	Don't remember	6 (4%)
<b>Q2.7</b>	<b>Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)</b>	
	<i>Yes, someone told me</i>	66 (45%)
	<i>Yes, I received written information</i>	14 (9%)
	<i>No, I was not told anything</i>	68 (46%)
	Don't remember	2 (1%)
<b>Q2.8</b>	<b>When you first arrived here did your property arrive at the same time as you?</b>	
	Yes	127 (86%)
	No	15 (10%)
	Don't remember	5 (3%)

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

<b>Q3.1</b>	<b>How long were you in reception?</b>	
	<i>Less than 2 hours</i>	98 (66%)
	<i>2 hours or longer</i>	39 (26%)
	Don't remember	11 (7%)
<b>Q3.2</b>	<b>When you were searched, was this carried out in a respectful way?</b>	
	Yes	118 (80%)
	No	17 (11%)
	Don't remember	13 (9%)

<b>Q3.3</b>	<b>Overall, how were you treated in reception?</b>		
	<i>Very well</i>		33 (22%)
	<i>Well</i>		76 (52%)
	<i>Neither</i>		27 (18%)
	<i>Badly</i>		3 (2%)
	<i>Very badly</i>		5 (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>	35 (25%)	<i>Physical health</i> 7 (5%)
	<i>Housing problems</i>	15 (11%)	<i>Mental health</i> 19 (13%)
	<i>Contacting employers</i>	0 (0%)	<i>Needing protection from other prisoners</i> 16 (11%)
	<i>Contacting family</i>	29 (21%)	<i>Getting phone numbers</i> 21 (15%)
	<i>Childcare</i>	3 (2%)	<i>Other</i> 5 (4%)
	<i>Money worries</i>	22 (16%)	<i>Did not have any problems</i> 51 (36%)
	<i>Feeling depressed or suicidal</i>	22 (16%)	
<b>Q3.5</b>	<b>Did you receive any help/support from staff in dealing with these problems when you first arrived here?</b>		
	<i>Yes</i>		20 (14%)
	<i>No</i>		69 (49%)
	<i>Did not have any problems</i>		51 (36%)
<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>		121 (82%)
	<i>A shower</i>		35 (24%)
	<i>A free telephone call</i>		68 (46%)
	<i>Something to eat</i>		66 (45%)
	<i>PIN phone credit</i>		69 (47%)
	<i>Toiletries/ basic items</i>		78 (53%)
	<i>Did not receive anything</i>		9 (6%)
<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>		92 (63%)
	<i>Someone from health services</i>		93 (63%)
	<i>A Listener/Samaritans</i>		38 (26%)
	<i>Prison shop/ canteen</i>		30 (20%)
	<i>Did not have access to any of these</i>		28 (19%)
<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>		58 (40%)
	<i>What support was available for people feeling depressed or suicidal</i>		43 (30%)
	<i>How to make routine requests (applications)</i>		48 (33%)
	<i>Your entitlement to visits</i>		46 (32%)
	<i>Health services</i>		65 (45%)
	<i>Chaplaincy</i>		71 (49%)
	<i>Not offered any information</i>		42 (29%)

<b>Q3.9</b>	<b>Did you feel safe on your first night here?</b>	
	Yes	99 (67%)
	No	36 (24%)
	Don't remember	13 (9%)
<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	16 (11%)
	Within the first week	40 (28%)
	More than a week	70 (49%)
	Don't remember	18 (13%)
<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	16 (11%)
	Yes	43 (30%)
	No	63 (44%)
	Don't remember	21 (15%)
<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	20 (14%)
	Within the first week	23 (16%)
	More than a week	72 (50%)
	Don't remember	29 (20%)

#### 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?	9 (6%)	26 (18%)	29 (20%)	26 (18%)	29 (20%) 24 (17%)
	Attend legal visits?	11 (8%)	36 (26%)	35 (25%)	14 (10%)	14 (10%) 30 (21%)
	Get bail information?	6 (4%)	8 (6%)	27 (19%)	15 (11%)	23 (17%) 60 (43%)
<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					33 (23%)
	Yes					72 (50%)
	No					39 (27%)
<b>Q4.3</b>	<b>Can you get legal books in the library?</b>					
	Yes					30 (21%)
	No					26 (18%)
	Don't know					87 (61%)
<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?	66 (47%)	71 (51%)	2 (1%)		
	Are you normally able to have a shower every day?	35 (25%)	105 (74%)	1 (1%)		
	Do you normally receive clean sheets every week?	42 (29%)	98 (69%)	3 (2%)		
	Do you normally get cell cleaning materials every week?	40 (28%)	102 (71%)	1 (1%)		
	Is your cell call bell normally answered within five minutes?	17 (12%)	121 (85%)	5 (3%)		
	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	65 (46%)	75 (53%)	2 (1%)		
	If you need to, can you normally get your stored property?	24 (17%)	91 (65%)	24 (17%)		

<b>Q4.5</b>	<b>What is the food like here?</b>	
	<i>Very good</i>	3 (2%)
	<i>Good</i>	29 (20%)
	<i>Neither</i>	46 (32%)
	<i>Bad</i>	33 (23%)
	<i>Very bad</i>	31 (22%)
<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>	2 (1%)
	<i>Yes</i>	51 (35%)
	<i>No</i>	91 (63%)
<b>Q4.7</b>	<b>Can you speak to a Listener at any time, if you want to?</b>	
	<i>Yes</i>	26 (18%)
	<i>No</i>	49 (34%)
	<i>Don't know</i>	70 (48%)
<b>Q4.8</b>	<b>Are your religious beliefs respected?</b>	
	<i>Yes</i>	66 (46%)
	<i>No</i>	28 (20%)
	<i>Don't know/ N/A</i>	48 (34%)
<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>	83 (58%)
	<i>No</i>	19 (13%)
	<i>Don't know/ N/A</i>	40 (28%)
<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 (19%)
	<i>Very easy</i>	15 (10%)
	<i>Easy</i>	40 (28%)
	<i>Neither</i>	17 (12%)
	<i>Difficult</i>	10 (7%)
	<i>Very difficult</i>	14 (10%)
	<i>Don't know</i>	20 (14%)

### Section 5: Applications and complaints

<b>Q5.1</b>	<b>Is it easy to make an application?</b>	
	<i>Yes</i>	101 (71%)
	<i>No</i>	32 (22%)
	<i>Don't know</i>	10 (7%)
<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
	<i>Are applications dealt with fairly?</i>	18 (13%)    51 (36%)    73 (51%)
	<i>Are applications dealt with quickly (within seven days)?</i>	18 (13%)    15 (10%)    110 (77%)
<b>Q5.3</b>	<b>Is it easy to make a complaint?</b>	
	<i>Yes</i>	57 (40%)
	<i>No</i>	55 (38%)
	<i>Don't know</i>	31 (22%)

**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?	45 (32%)	14 (10%)	82 (58%)
Are complaints dealt with quickly (within seven days)?	45 (32%)	7 (5%)	87 (63%)

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

Yes	42 (30%)
No	96 (70%)

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

Don't know who they are	31 (22%)
Very easy	11 (8%)
Easy	14 (10%)
Neither	34 (25%)
Difficult	27 (20%)
Very difficult	21 (15%)

**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	3 (2%)
Yes	35 (25%)
No	92 (65%)
Don't know	11 (8%)

**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	3 (2%)
Yes	53 (38%)
No	75 (53%)
Don't know	10 (7%)

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

Yes	49 (35%)
No	93 (65%)

**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	86 (61%)
Very well	5 (4%)
Well	16 (11%)
Neither	12 (8%)
Badly	10 (7%)
Very badly	13 (9%)

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

Yes	79 (57%)
No	59 (43%)

<b>Q7.2</b>	<b>Is there a member of staff you can turn to for help if you have a problem?</b>	
	Yes	66 (47%)
	No	74 (53%)
<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	43 (30%)
	No	98 (70%)
<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>	32 (22%)
	<i>Rarely</i>	42 (29%)
	<i>Some of the time</i>	45 (31%)
	<i>Most of the time</i>	13 (9%)
	<i>All of the time</i>	3 (2%)
<b>Q7.5</b>	<b>When did you first meet your personal (named) officer?</b>	
	<i>I have not met him/her</i>	55 (39%)
	<i>In the first week</i>	29 (21%)
	<i>More than a week</i>	34 (24%)
	<i>Don't remember</i>	23 (16%)
<b>Q7.6</b>	<b>How helpful is your personal (named) officer?</b>	
	<i>Do not have a personal officer/ I have not met him/ her</i>	55 (39%)
	<i>Very helpful</i>	12 (9%)
	<i>Helpful</i>	20 (14%)
	<i>Neither</i>	22 (16%)
	<i>Not very helpful</i>	9 (6%)
	<i>Not at all helpful</i>	22 (16%)

### Section 8: Safety

<b>Q8.1</b>	<b>Have you ever felt unsafe here?</b>			
	Yes	86 (61%)		
	No	54 (39%)		
<b>Q8.2</b>	<b>Do you feel unsafe now?</b>			
	Yes	39 (29%)		
	No	95 (71%)		
<b>Q8.3</b>	<b>In which areas have you felt unsafe? (Please tick all that apply to you.)</b>			
	<i>Never felt unsafe</i>	54 (39%)	<i>At meal times</i>	17 (12%)
	<i>Everywhere</i>	30 (22%)	<i>At health services</i>	32 (23%)
	<i>Segregation unit</i>	20 (14%)	<i>Visits area</i>	38 (27%)
	<i>Association areas</i>	30 (22%)	<i>In wing showers</i>	24 (17%)
	<i>Reception area</i>	11 (8%)	<i>In gym showers</i>	9 (6%)
	<i>At the gym</i>	16 (12%)	<i>In corridors/stairwells</i>	26 (19%)
	<i>In an exercise yard</i>	29 (21%)	<i>On your landing/wing</i>	30 (22%)
	<i>At work</i>	23 (17%)	<i>In your cell</i>	13 (9%)
	<i>During movement</i>	44 (32%)	<i>At religious services</i>	14 (10%)
	<i>At education</i>	33 (24%)		

<b>Q8.4</b>	<b>Have you been victimised by other prisoners here?</b>	
	Yes	54 (38%)
	No	87 (62%)
<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>	30 (21%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	30 (21%)
	<i>Sexual abuse</i>	1 (1%)
	<i>Feeling threatened or intimidated</i>	31 (22%)
	<i>Having your canteen/property taken</i>	21 (15%)
	<i>Medication</i>	0 (0%)
	<i>Debt</i>	11 (8%)
	<i>Drugs</i>	10 (7%)
	<i>Your race or ethnic origin</i>	8 (6%)
	<i>Your religion/religious beliefs</i>	10 (7%)
	<i>Your nationality</i>	6 (4%)
	<i>You are from a different part of the country than others</i>	10 (7%)
	<i>You are from a traveller community</i>	1 (1%)
	<i>Your sexual orientation</i>	5 (4%)
	<i>Your age</i>	0 (0%)
	<i>You have a disability</i>	5 (4%)
	<i>You were new here</i>	19 (13%)
	<i>Your offence/ crime</i>	20 (14%)
	<i>Gang related issues</i>	26 (18%)
<b>Q8.6</b>	<b>Have you been victimised by staff here?</b>	
	Yes	68 (48%)
	No	74 (52%)
<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>	33 (23%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	20 (14%)
	<i>Sexual abuse</i>	1 (1%)
	<i>Feeling threatened or intimidated</i>	29 (20%)
	<i>Medication</i>	6 (4%)
	<i>Debt</i>	1 (1%)
	<i>Drugs</i>	1 (1%)
	<i>Your race or ethnic origin</i>	12 (8%)
	<i>Your religion/religious beliefs</i>	14 (10%)
	<i>Your nationality</i>	4 (3%)
	<i>You are from a different part of the country than others</i>	3 (2%)
	<i>You are from a traveller community</i>	1 (1%)
	<i>Your sexual orientation</i>	2 (1%)
	<i>Your age</i>	1 (1%)
	<i>You have a disability</i>	3 (2%)
	<i>You were new here</i>	15 (11%)
	<i>Your offence/ crime</i>	7 (5%)
	<i>Gang related issues</i>	7 (5%)
<b>Q8.8</b>	<b>If you have been victimised by prisoners or staff, did you report it?</b>	
	<i>Not been victimised</i>	52 (39%)
	Yes	24 (18%)
	No	57 (43%)

## Section 9: Health services

<b>Q9.1</b>	<b>How easy or difficult is it to see the following people?:</b>						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	The doctor	23 (16%)	11 (8%)	36 (26%)	18 (13%)	36 (26%)	17 (12%)
	The nurse	18 (13%)	21 (15%)	58 (41%)	13 (9%)	18 (13%)	13 (9%)
	The dentist	27 (19%)	3 (2%)	17 (12%)	14 (10%)	36 (26%)	44 (31%)
<b>Q9.2</b>	<b>What do you think of the quality of the health service from the following people?:</b>						
		<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
	The doctor	33 (23%)	10 (7%)	40 (28%)	25 (18%)	16 (11%)	18 (13%)
	The nurse	27 (19%)	27 (19%)	40 (28%)	22 (16%)	10 (7%)	15 (11%)
	The dentist	46 (33%)	11 (8%)	27 (19%)	27 (19%)	11 (8%)	18 (13%)
<b>Q9.3</b>	<b>What do you think of the overall quality of the health services here?</b>						
	<i>Not been</i>					21 (15%)	
	<i>Very good</i>					8 (6%)	
	<i>Good</i>					40 (29%)	
	<i>Neither</i>					28 (21%)	
	<i>Bad</i>					24 (18%)	
	<i>Very bad</i>					15 (11%)	
<b>Q9.4</b>	<b>Are you currently taking medication?</b>						
	Yes					23 (16%)	
	No					119 (84%)	
<b>Q9.5</b>	<b>If you are taking medication, are you allowed to keep some/ all of it in your own cell?</b>						
	<i>Not taking medication</i>					119 (84%)	
	<i>Yes, all my meds</i>					8 (6%)	
	<i>Yes, some of my meds</i>					7 (5%)	
	<i>No</i>					8 (6%)	
<b>Q9.6</b>	<b>Do you have any emotional or mental health problems?</b>						
	Yes					46 (33%)	
	No					93 (67%)	
<b>Q9.7</b>	<b>Are you being helped/ supported by anyone in this prison (e.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)?</b>						
	<i>Do not have any emotional or mental health problems</i>					93 (67%)	
	Yes					21 (15%)	
	No					24 (17%)	

## Section 10: Drugs and alcohol

<b>Q10.1</b>	<b>Did you have a problem with drugs when you came into this prison?</b>	
	Yes	25 (18%)
	No	117 (82%)
<b>Q10.2</b>	<b>Did you have a problem with alcohol when you came into this prison?</b>	
	Yes	16 (11%)
	No	125 (89%)

<b>Q10.3</b>	<b>Is it easy or difficult to get illegal drugs in this prison?</b>	
	Very easy	50 (35%)
	Easy	10 (7%)
	Neither	9 (6%)
	Difficult	3 (2%)
	Very difficult	9 (6%)
	Don't know	61 (43%)
<b>Q10.4</b>	<b>Is it easy or difficult to get alcohol in this prison?</b>	
	Very easy	15 (11%)
	Easy	16 (11%)
	Neither	11 (8%)
	Difficult	6 (4%)
	Very difficult	17 (12%)
	Don't know	76 (54%)
<b>Q10.5</b>	<b>Have you developed a problem with illegal drugs since you have been in this prison?</b>	
	Yes	15 (11%)
	No	127 (89%)
<b>Q10.6</b>	<b>Have you developed a problem with diverted medication since you have been in this prison?</b>	
	Yes	3 (2%)
	No	138 (98%)
<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>	109 (80%)
	Yes	23 (17%)
	No	5 (4%)
<b>Q10.8</b>	<b>Have you received any support or help (for example substance misuse teams) for your alcohol problem, while in this prison?</b>	
	<i>Did not / do not have an alcohol problem</i>	125 (89%)
	Yes	14 (10%)
	No	1 (1%)
<b>Q10.9</b>	<b>Was the support or help you received, while in this prison, helpful?</b>	
	<i>Did not have a problem/ did not receive help</i>	110 (80%)
	Yes	21 (15%)
	No	6 (4%)

### 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	10 (7%)	5 (4%)	28 (20%)	24 (17%)	41 (29%)	32 (23%)
	Vocational or skills training	25 (18%)	4 (3%)	33 (24%)	36 (26%)	25 (18%)	17 (12%)
	Education (including basic skills)	17 (12%)	16 (11%)	44 (31%)	32 (23%)	17 (12%)	14 (10%)
	Offending behaviour programmes	29 (21%)	7 (5%)	30 (21%)	34 (24%)	19 (14%)	21 (15%)

<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>				50 (36%)
	Prison job				59 (42%)
	Vocational or skills training				14 (10%)
	Education (including basic skills)				31 (22%)
	Offending behaviour programmes				15 (11%)
<b>Q11.3</b>	<b>If you have been involved in any of the following, while in this prison, do you think they will help you on release?</b>				
		<i>Not been involved</i>	Yes	No	Don't know
	Prison job	24 (19%)	53 (42%)	36 (29%)	13 (10%)
	Vocational or skills training	37 (32%)	43 (37%)	19 (16%)	17 (15%)
	Education (including basic skills)	21 (16%)	66 (51%)	32 (25%)	10 (8%)
	Offending behaviour programmes	33 (26%)	58 (46%)	20 (16%)	15 (12%)
<b>Q11.4</b>	<b>How often do you usually go to the library?</b>				
	<i>Don't want to go</i>				13 (9%)
	Never				65 (46%)
	Less than once a week				30 (21%)
	About once a week				29 (21%)
	More than once a week				3 (2%)
<b>Q11.5</b>	<b>Does the library have a wide enough range of materials to meet your needs?</b>				
	<i>Don't use it</i>				45 (32%)
	Yes				40 (29%)
	No				55 (39%)
<b>Q11.6</b>	<b>How many times do you usually go to the gym each week?</b>				
	<i>Don't want to go</i>				21 (15%)
	0				38 (27%)
	1 to 2				68 (48%)
	3 to 5				14 (10%)
	More than 5				1 (1%)
<b>Q11.7</b>	<b>How many times do you usually go outside for exercise each week?</b>				
	<i>Don't want to go</i>				12 (8%)
	0				5 (3%)
	1 to 2				17 (12%)
	3 to 5				30 (21%)
	More than 5				79 (55%)
<b>Q11.8</b>	<b>How many times do you usually have association each week?</b>				
	<i>Don't want to go</i>				8 (6%)
	0				4 (3%)
	1 to 2				40 (28%)
	3 to 5				66 (47%)
	More than 5				23 (16%)

**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>	56 (39%)
<i>2 to less than 4 hours</i>	27 (19%)
<i>4 to less than 6 hours</i>	28 (20%)
<i>6 to less than 8 hours</i>	14 (10%)
<i>8 to less than 10 hours</i>	3 (2%)
<i>10 hours or more</i>	4 (3%)
<i>Don't know</i>	10 (7%)

**Section 12: Contact with family and friends****Q12.1 Have staff supported you and helped you to maintain contact with your family/friends while in this prison?**

Yes	30 (21%)
No	112 (79%)

**Q12.2 Have you had any problems with sending or receiving mail (letters or parcels)?**

Yes	95 (67%)
No	46 (33%)

**Q12.3 Have you had any problems getting access to the telephones?**

Yes	56 (40%)
No	84 (60%)

**Q12.4 How easy or difficult is it for your family and friends to get here?**

<i>I don't get visits</i>	12 (8%)
<i>Very easy</i>	5 (3%)
<i>Easy</i>	29 (20%)
<i>Neither</i>	20 (14%)
<i>Difficult</i>	24 (17%)
<i>Very difficult</i>	53 (37%)
<i>Don't know</i>	0 (0%)

**Section 13: Preparation for release****Q13.1 Do you have a named offender manager (home probation officer) in the probation service?**

<i>Not sentenced</i>	0 (0%)
Yes	104 (75%)
No	34 (25%)

**Q13.2 What type of contact have you had with your offender manager since being in prison? (Please tick all that apply to you.)**

<i>Not sentenced/ NA</i>	34 (25%)
<i>No contact</i>	51 (38%)
<i>Letter</i>	20 (15%)
<i>Phone</i>	20 (15%)
<i>Visit</i>	22 (16%)

**Q13.3 Do you have a named offender supervisor in this prison?**

Yes	81 (59%)
No	56 (41%)

<b>Q13.4</b>	<b>Do you have a sentence plan?</b>	
	<i>Not sentenced</i>	0 (0%)
	Yes	86 (62%)
	No	52 (38%)
<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>	52 (37%)
	<i>Very involved</i>	17 (12%)
	<i>Involved</i>	19 (14%)
	<i>Neither</i>	10 (7%)
	<i>Not very involved</i>	19 (14%)
	<i>Not at all involved</i>	23 (16%)
<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>	52 (39%)
	<i>Nobody</i>	50 (37%)
	<i>Offender supervisor</i>	14 (10%)
	<i>Offender manager</i>	13 (10%)
	<i>Named/ personal officer</i>	4 (3%)
	<i>Staff from other departments</i>	18 (13%)
<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>	52 (38%)
	Yes	54 (39%)
	No	21 (15%)
	<i>Don't know</i>	11 (8%)
<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>	52 (37%)
	Yes	30 (22%)
	No	28 (20%)
	<i>Don't know</i>	29 (21%)
<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>	52 (37%)
	Yes	18 (13%)
	No	39 (28%)
	<i>Don't know</i>	32 (23%)
<b>Q13.10</b>	<b>Do you have a needs based custody plan?</b>	
	Yes	5 (4%)
	No	49 (36%)
	<i>Don't know</i>	82 (60%)
<b>Q13.11</b>	<b>Do you feel that any member of staff has helped you to prepare for your release?</b>	
	Yes	17 (12%)
	No	122 (88%)

**Q13.12 Do you know of anyone in this prison who can help you with the following on release? (Please tick all that apply to you.)**

	<i>Do not need help</i>	<i>Yes</i>	<i>No</i>
Employment	28 (21%)	25 (18%)	83 (61%)
Accommodation	31 (24%)	23 (18%)	76 (58%)
Benefits	29 (23%)	16 (13%)	82 (65%)
Finances	27 (22%)	16 (13%)	80 (65%)
Education	34 (27%)	26 (21%)	66 (52%)
Drugs and alcohol	40 (32%)	29 (23%)	57 (45%)

**Q13.13 Have you done anything, or has anything happened to you here, that you think will make you less likely to offend in the future?**

<i>Not sentenced</i>	0 (0%)
<i>Yes</i>	68 (51%)
<i>No</i>	66 (49%)

## Main comparator and comparator to last time



### Prisoner survey responses HMYOI Aylesbury 2017

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

Key to tables		HMYOI Aylesbury 2017	Young Adult Training Prisons Comparator	HMYOI Aylesbury 2017	HMYOI Aylesbury 2015
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		<b>149</b>	<b>512</b>	<b>149</b>	<b>188</b>
<b>SECTION 1: General information</b>					
1.2	Are you under 21 years of age?	66%	68%	66%	70%
1.3	Are you sentenced?	100%	100%	100%	100%
1.3	Are you on recall?	4%	7%	4%	4%
1.4	Is your sentence less than 12 months?	2%	8%	2%	0%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	2%	3%	2%	5%
1.5	Are you a foreign national?	11%	10%	11%	12%
1.6	Do you understand spoken English?	100%	99%	100%	100%
1.7	Do you understand written English?	99%	99%	99%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	57%	39%	57%	60%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	5%	5%	2%
1.1	Are you Muslim?	35%	22%	35%	31%
1.11	Are you homosexual/gay or bisexual?	4%	4%	4%	4%
1.12	Do you consider yourself to have a disability?	19%	16%	19%	17%
1.13	Are you a veteran (ex-armed services)?	0%	2%	0%	2%
1.14	Is this your first time in prison?	72%	58%	72%	67%
1.15	Do you have any children under the age of 18?	16%	23%	16%	17%
<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?	60%	58%	60%	61%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	68%	72%	68%	66%
2.3	Were you offered a toilet break?	9%	11%	9%	11%
2.4	Was the van clean?	39%	41%	39%	44%
2.5	Did you feel safe?	76%	79%	76%	74%
2.6	Were you treated well/very well by the escort staff?	61%	62%	61%	61%
2.7	Before you arrived here were you told that you were coming here?	45%	52%	45%	53%
2.7	Before you arrived here did you receive any written information about coming here?	9%	7%	9%	15%
2.8	When you first arrived here did your property arrive at the same time as you?	86%	84%	86%	86%

## Main comparator and comparator to last time

### Key to tables

		HMYOI Aylesbury 2017	Young Adult Training Prisons Comparator	HMYOI Aylesbury 2017	HMYOI Aylesbury 2015
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	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 3: Reception, first night and induction</b>					
3.1	Were you in reception for less than 2 hours?	66%	71%	66%	67%
3.2	When you were searched in reception, was this carried out in a respectful way?	80%	82%	80%	78%
3.3	Were you treated well/very well in reception?	74%	66%	74%	70%
	When you first arrived:				
3.4	Did you have any problems?	64%	56%	64%	58%
3.4	Did you have any problems with loss of property?	25%	18%	25%	23%
3.4	Did you have any housing problems?	11%	7%	11%	5%
3.4	Did you have any problems contacting employers?	0%	1%	0%	1%
3.4	Did you have any problems contacting family?	21%	19%	21%	21%
3.4	Did you have any problems ensuring dependants were being looked after?	2%	1%	2%	1%
3.4	Did you have any money worries?	16%	12%	16%	10%
3.4	Did you have any problems with feeling depressed or suicidal?	16%	14%	16%	11%
3.4	Did you have any physical health problems?	5%	4%	5%	5%
3.4	Did you have any mental health problems?	14%	15%	14%	15%
3.4	Did you have any problems with needing protection from other prisoners?	11%	10%	11%	10%
3.4	Did you have problems accessing phone numbers?	15%	15%	15%	17%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	23%	28%	23%	35%
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	82%	66%	82%	77%
3.6	A shower?	24%	34%	24%	28%
3.6	A free telephone call?	46%	75%	46%	46%
3.6	Something to eat?	45%	46%	45%	45%
3.6	PIN phone credit?	47%	45%	47%	53%
3.6	Toiletries/ basic items?	53%	49%	53%	46%

## Key to tables

## Main comparator and comparator to last time

Key to tables		HMYOI Aylesbury 2017	Young Adult Training Prisons Comparator	HMYOI Aylesbury 2017	HMYOI Aylesbury 2015
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	Any percentage highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 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?	63%	60%	63%	74%
3.7	Someone from health services?	63%	65%	63%	64%
3.7	A Listener/Samaritans?	26%	23%	26%	23%
3.7	Prison shop/ canteen?	20%	28%	20%	19%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	40%	43%	40%	41%
3.8	Support was available for people feeling depressed or suicidal?	30%	32%	30%	33%
3.8	How to make routine requests?	33%	36%	33%	32%
3.8	Your entitlement to visits?	32%	37%	32%	34%
3.8	Health services?	45%	45%	45%	53%
3.8	The chaplaincy?	49%	46%	49%	54%
3.9	Did you feel safe on your first night here?	67%	71%	67%	66%
3.10	Have you been on an induction course?	89%	87%	89%	79%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	34%	46%	34%	38%
3.12	Did you receive an education (skills for life) assessment?	86%	83%	86%	81%
<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?	25%	27%	25%	27%
4.1	Attend legal visits?	34%	39%	34%	33%
4.1	Get bail information?	10%	12%	10%	9%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	50%	40%	50%	44%
4.3	Can you get legal books in the library?	21%	28%	21%	25%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	47%	52%	47%	51%
4.4	Are you normally able to have a shower every day?	25%	55%	25%	50%
4.4	Do you normally receive clean sheets every week?	29%	68%	29%	52%
4.4	Do you normally get cell cleaning materials every week?	28%	42%	28%	41%
4.4	Is your cell call bell normally answered within five minutes?	12%	31%	12%	28%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	46%	56%	46%	56%
4.4	Can you normally get your stored property, if you need to?	17%	25%	17%	17%
4.5	Is the food in this prison good/very good?	23%	20%	23%	34%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	35%	41%	35%	41%
4.7	Are you able to speak to a Listener at any time, if you want to?	18%	38%	18%	38%
4.8	Are your religious beliefs respected?	46%	50%	46%	56%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	58%	56%	58%	73%
4.10	Is it easy/very easy to attend religious services?	38%	43%	38%	48%

## Main comparator and comparator to last time

### Key to tables

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	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 5: Applications and complaints</b>					
5.1	Is it easy to make an application?	71%	72%	71%	78%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	41%	49%	41%	51%
5.2	Do you feel applications are dealt with quickly (within seven days)?	12%	27%	12%	18%
5.3	Is it easy to make a complaint?	40%	50%	40%	42%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	15%	31%	15%	24%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	8%	26%	8%	18%
5.5	Have you ever been prevented from making a complaint when you wanted to?	30%	24%	30%	28%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	18%	16%	18%	18%
<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?	25%	40%	25%	37%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	38%	43%	38%	38%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	35%	22%	35%	32%
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?	38%	24%	38%	30%
<b>SECTION 7: Relationships with staff</b>					
7.1	Do most staff, in this prison, treat you with respect?	57%	65%	57%	64%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	47%	63%	47%	61%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	31%	25%	31%	22%
7.4	Do staff normally speak to you most of the time/all of the time during association?	11%	24%	11%	14%
7.5	Do you have a personal officer?	61%	67%	61%	67%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	38%	52%	38%	41%

## Main comparator and comparator to last time

### Key to tables

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<b>SECTION 8: Safety</b>					
8.1	Have you ever felt unsafe here?	62%	48%	62%	52%
8.2	Do you feel unsafe now?	29%	23%	29%	23%
8.4	Have you been victimised by other prisoners here?	38%	34%	38%	31%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	21%	18%	21%	15%
8.5	Hit, kicked or assaulted you?	21%	16%	21%	19%
8.5	Sexually abused you?	1%	1%	1%	1%
8.5	Threatened or intimidated you?	22%	21%	22%	18%
8.5	Taken your canteen/property?	15%	12%	15%	11%
8.5	Victimised you because of medication?	0%	1%	0%	2%
8.5	Victimised you because of debt?	8%	8%	8%	8%
8.5	Victimised you because of drugs?	7%	5%	7%	7%
8.5	Victimised you because of your race or ethnic origin?	6%	3%	6%	5%
8.5	Victimised you because of your religion/religious beliefs?	7%	5%	7%	3%
8.5	Victimised you because of your nationality?	4%	4%	4%	5%
8.5	Victimised you because you were from a different part of the country?	7%	8%	7%	6%
8.5	Victimised you because you are from a Traveller community?	1%	1%	1%	1%
8.5	Victimised you because of your sexual orientation?	4%	3%	4%	3%
8.5	Victimised you because of your age?	0%	1%	0%	1%
8.5	Victimised you because you have a disability?	4%	4%	4%	3%
8.5	Victimised you because you were new here?	14%	10%	14%	11%
8.5	Victimised you because of your offence/crime?	14%	10%	14%	11%
8.5	Victimised you because of gang related issues?	18%	9%	18%	9%

## Main comparator and comparator to last time

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	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 8: Safety continued</b>					
8.6	Have you been victimised by staff here?	48%	33%	48%	34%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	23%	16%	23%	17%
8.7	Hit, kicked or assaulted you?	14%	7%	14%	13%
8.7	Sexually abused you?	1%	1%	1%	1%
8.7	Threatened or intimidated you?	20%	13%	20%	15%
8.7	Victimised you because of medication?	4%	2%	4%	1%
8.7	Victimised you because of debt?	1%	2%	1%	3%
8.7	Victimised you because of drugs?	1%	2%	1%	3%
8.7	Victimised you because of your race or ethnic origin?	8%	6%	8%	9%
8.7	Victimised you because of your religion/religious beliefs?	10%	6%	10%	8%
8.7	Victimised you because of your nationality?	3%	4%	3%	7%
8.7	Victimised you because you were from a different part of the country?	2%	5%	2%	3%
8.7	Victimised you because you are from a Traveller community?	1%	1%	1%	0%
8.7	Victimised you because of your sexual orientation?	1%	2%	1%	1%
8.7	Victimised you because of your age?	1%	3%	1%	2%
8.7	Victimised you because you have a disability?	2%	4%	2%	2%
8.7	Victimised you because you were new here?	11%	6%	11%	7%
8.7	Victimised you because of your offence/crime?	5%	5%	5%	7%
8.7	Victimised you because of gang related issues?	5%	3%	5%	4%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	30%	36%	30%	35%

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<b>SECTION 9: Health services</b>					
9.1	Is it easy/very easy to see the doctor?	33%	41%	33%	38%
9.1	Is it easy/very easy to see the nurse?	56%	55%	56%	64%
9.1	Is it easy/very easy to see the dentist?	14%	20%	14%	20%
	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?	46%	57%	46%	50%
9.2	The nurse?	59%	64%	59%	72%
9.2	The dentist?	40%	46%	40%	45%
9.3	The overall quality of health services?	42%	50%	42%	52%
9.4	Are you currently taking medication?	16%	26%	16%	19%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	66%	65%	66%	62%
9.6	Do you have any emotional well being or mental health problems?	33%	35%	33%	26%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	47%	49%	47%	66%
<b>SECTION 10: Drugs and alcohol</b>					
10.1	Did you have a problem with drugs when you came into this prison?	18%	27%	18%	21%
10.2	Did you have a problem with alcohol when you came into this prison?	11%	16%	11%	12%
10.3	Is it easy/very easy to get illegal drugs in this prison?	42%	31%	42%	39%
10.4	Is it easy/very easy to get alcohol in this prison?	22%	11%	22%	13%
10.5	Have you developed a problem with drugs since you have been in this prison?	11%	12%	11%	10%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	2%	4%	2%	2%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	82%	59%	82%	75%
10.8	Have you received any support or help with your alcohol problem while in this prison?	93%	60%	93%	80%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	78%	68%	78%	88%

## Main comparator and comparator to last time

### Key to tables

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<b>SECTION 11: Activities</b>					
Is it very easy/ easy to get into the following activities:					
11.1	A prison job?	24%	29%	24%	15%
11.1	Vocational or skills training?	26%	33%	26%	20%
11.1	Education (including basic skills)?	43%	53%	43%	38%
11.1	Offending behaviour programmes?	26%	27%	26%	29%
Are you currently involved in any of the following activities:					
11.2	A prison job?	43%	40%	43%	40%
11.2	Vocational or skills training?	10%	11%	10%	13%
11.2	Education (including basic skills)?	22%	24%	22%	21%
11.2	Offending behaviour programmes?	11%	9%	11%	21%
11.3	Have you had a job while in this prison?	81%	72%	81%	70%
For those who have had a prison job while in this prison:					
11.3	Do you feel the job will help you on release?	52%	47%	52%	55%
11.3	Have you been involved in vocational or skills training while in this prison?	68%	65%	68%	60%
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?	55%	52%	55%	57%
11.3	Have you been involved in education while in this prison?	84%	79%	84%	71%
For those who have been involved in education while in this prison:					
11.3	Do you feel the education will help you on release?	61%	54%	61%	64%
11.3	Have you been involved in offending behaviour programmes while in this prison?	74%	65%	74%	69%
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?	62%	51%	62%	70%
11.4	Do you go to the library at least once a week?	23%	30%	23%	37%
11.5	Does the library have a wide enough range of materials to meet your needs?	29%	38%	29%	42%
11.6	Do you go to the gym three or more times a week?	11%	16%	11%	10%
11.7	Do you go outside for exercise three or more times a week?	76%	55%	76%	77%
11.8	Do you go on association more than five times each week?	16%	47%	16%	39%
11.9	Do you spend ten or more hours out of your cell on a weekday?	3%	3%	3%	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?	21%	32%	21%	29%
12.2	Have you had any problems with sending or receiving mail?	67%	51%	67%	49%
12.3	Have you had any problems getting access to the telephones?	40%	40%	40%	38%
12.4	Is it easy/ very easy for your friends and family to get here?	24%	22%	24%	23%

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### Key to tables

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<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?	75%	77%	75%	84%
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	50%	44%	50%	45%
13.2	Contact by letter?	20%	23%	20%	23%
13.2	Contact by phone?	20%	20%	20%	16%
13.2	Contact by visit?	22%	29%	22%	30%
13.3	Do you have a named offender supervisor in this prison?	59%	76%	59%	77%
For those who are sentenced:					
13.4	Do you have a sentence plan?	62%	61%	62%	65%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	41%	46%	41%	51%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	60%	49%	60%	51%
13.6	Offender supervisor?	17%	36%	17%	32%
13.6	Offender manager?	16%	28%	16%	19%
13.6	Named/ personal officer?	5%	15%	5%	12%
13.6	Staff from other departments?	22%	19%	22%	23%
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	63%	64%	63%	64%
13.8	Are there plans for you to achieve any of your targets in another prison?	35%	22%	35%	28%
13.9	Are there plans for you to achieve any of your targets in the community?	20%	27%	20%	20%
13.10	Do you have a needs based custody plan?	4%	5%	4%	9%
13.11	Do you feel that any member of staff has helped you to prepare for release?	12%	17%	12%	13%
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?	23%	32%	23%	27%
13.12	Accommodation?	23%	32%	23%	25%
13.12	Benefits?	16%	26%	16%	16%
13.12	Finances?	17%	22%	17%	17%
13.12	Education?	28%	33%	28%	29%
13.12	Drugs and alcohol?	34%	36%	34%	35%
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%	48%	51%	60%

## Diversity analysis



### Key question responses (ethnicity, foreign national and religion) HMYOI Aylesbury 2017

**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>84</b>	<b>64</b>	<b>16</b>	<b>132</b>	<b>52</b>	<b>95</b>
1.3	Are you sentenced?	100%	100%	100%	100%	100%	100%
1.5	Are you a foreign national?	14%	6%			12%	10%
1.6	Do you understand spoken English?	100%	100%	100%	100%	100%	100%
1.7	Do you understand written English?	100%	98%	100%	99%	100%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)			75%	55%	86%	41%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	11%	8%	5%	0%	8%
1.1	Are you Muslim?	54%	11%	38%	35%		
1.12	Do you consider yourself to have a disability?	9%	34%	19%	19%	15%	21%
1.13	Are you a veteran (ex-armed services)?	0%	0%	0%	0%	0%	0%
1.14	Is this your first time in prison?	64%	81%	50%	74%	71%	72%
2.6	Were you treated well/very well by the escort staff?	57%	67%	52%	62%	55%	64%
2.7	Before you arrived here were you told that you were coming here?	48%	41%	50%	44%	48%	43%
3.2	When you were searched in reception, was this carried out in a respectful way?	81%	78%	87%	79%	75%	83%
3.3	Were you treated well/very well in reception?	68%	83%	62%	76%	65%	80%
3.4	Did you have any problems when you first arrived?	61%	68%	63%	64%	61%	65%
3.7	Did you have access to someone from health care when you first arrived here?	56%	73%	87%	60%	56%	68%
3.9	Did you feel safe on your first night here?	75%	56%	68%	67%	73%	64%
3.10	Have you been on an induction course?	92%	84%	93%	88%	94%	87%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	21%	29%	26%	25%	26%	24%

## Diversity analysis

### Key to tables

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	Any percentage highlighted in blue is significantly worse						
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	Percentages which are not highlighted show there is no significant difference						
4.4	Are you normally offered enough clean, suitable clothes for the week?	42%	54%	29%	50%	40%	52%
4.4	Are you normally able to have a shower every day?	21%	30%	32%	24%	20%	27%
4.4	Is your cell call bell normally answered within five minutes?	14%	10%	37%	9%	10%	13%
4.5	Is the food in this prison good/very good?	19%	27%	34%	21%	18%	25%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	27%	45%	34%	36%	30%	39%
4.7	Are you able to speak to a Listener at any time, if you want to?	15%	22%	13%	19%	14%	21%
4.8	Do you feel your religious beliefs are respected?	51%	41%	50%	46%	57%	40%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	53%	66%	38%	61%	58%	58%
5.1	Is it easy to make an application?	65%	78%	62%	72%	63%	76%
5.3	Is it easy to make a complaint?	40%	40%	41%	40%	39%	40%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	17%	35%	7%	27%	15%	31%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	33%	43%	27%	39%	29%	43%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	42%	25%	55%	32%	51%	26%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	53%	62%	55%	57%	46%	64%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	39%	57%	45%	48%	32%	54%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	9%	14%	7%	12%	6%	14%
7.4	Do you have a personal officer?	59%	64%	62%	61%	47%	68%
8.1	Have you ever felt unsafe here?	55%	69%	66%	61%	58%	63%
8.2	Do you feel unsafe now?	24%	35%	41%	28%	25%	30%
8.3	Have you been victimised by other prisoners?	33%	45%	32%	39%	28%	43%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	13%	34%	13%	23%	14%	26%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	7%	5%	6%	6%	8%	5%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	8%	7%	6%	7%	10%	6%
8.5	Have you been victimised because of your nationality? (By prisoners)	5%	3%	13%	3%	10%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	0%	8%	0%	4%	0%	5%

## Diversity analysis

### Key to tables

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Any percentage highlighted in orange shows a significant difference in prisoners' background details							
Percentages which are not highlighted show there is no significant difference							
		Black and minority ethnic prisoners	White prisoners	Foreign national prisoners	British prisoners	Muslim prisoners	Non-Muslim prisoners
8.6	Have you been victimised by a member of staff?	46%	51%	45%	49%	54%	44%
8.7	Have you ever felt threatened or intimidated by staff here?	15%	27%	19%	21%	18%	21%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	10%	7%	6%	9%	14%	6%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	11%	8%	6%	10%	18%	6%
8.7	Have you been victimised because of your nationality? (By staff)	4%	2%	6%	2%	4%	2%
8.7	Have you been victimised because you have a disability? (By staff)	0%	5%	6%	2%	0%	3%
9.1	Is it easy/very easy to see the doctor?	19%	52%	19%	35%	20%	40%
9.1	Is it easy/ very easy to see the nurse?	47%	68%	55%	56%	52%	59%
9.4	Are you currently taking medication?	7%	28%	13%	17%	12%	18%
9.6	Do you feel you have any emotional well being/mental health issues?	17%	52%	34%	33%	24%	38%
10.3	Is it easy/very easy to get illegal drugs in this prison?	31%	55%	26%	44%	32%	47%
11.2	Are you currently working in the prison?	39%	47%	19%	46%	36%	47%
11.2	Are you currently undertaking vocational or skills training?	8%	12%	6%	11%	4%	13%
11.2	Are you currently in education (including basic skills)?	21%	23%	19%	23%	16%	26%
11.2	Are you currently taking part in an offending behaviour programme?	10%	12%	6%	11%	11%	11%
11.4	Do you go to the library at least once a week?	22%	24%	38%	21%	18%	25%
11.6	Do you go to the gym three or more times a week?	13%	8%	19%	10%	10%	11%
11.7	Do you go outside for exercise three or more times a week?	83%	67%	68%	77%	88%	69%
11.8	On average, do you go on association more than five times each week?	16%	17%	6%	18%	16%	17%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	4%	2%	0%	3%	4%	2%
12.2	Have you had any problems sending or receiving mail?	69%	65%	55%	69%	72%	64%
12.3	Have you had any problems getting access to the telephones?	37%	42%	21%	42%	29%	45%

## Diversity Analysis



### Key question responses (disability) HMYOI Aylesbury 2017

**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	<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>28</b>	<b>118</b>
1.3	Are you sentenced?	100%	100%
1.5	Are you a foreign national?	11%	11%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	99%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	25%	65%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	16%	3%
1.1	Are you Muslim?	29%	37%
1.12	Do you consider yourself to have a disability?	-	-
1.13	Are you a veteran (ex-armed services)?	0%	0%
1.14	Is this your first time in prison?	71%	72%
2.6	Were you treated well/very well by the escort staff?	65%	60%
2.7	Before you arrived here were you told that you were coming here?	43%	45%
3.2	When you were searched in reception, was this carried out in a respectful way?	68%	83%
3.3	Were you treated well/very well in reception?	82%	73%
3.4	Did you have any problems when you first arrived?	75%	60%
3.7	Did you have access to someone from health care when you first arrived here?	65%	63%
3.9	Did you feel safe on your first night here?	65%	68%
3.10	Have you been on an induction course?	85%	90%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	15%	28%

## 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 offered enough clean, suitable clothes for the week?	56%	45%
4.4	Are you normally able to have a shower every day?	39%	21%
4.4	Is your cell call bell normally answered within five minutes?	7%	13%
4.5	Is the food in this prison good/very good?	28%	20%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	35%	35%
4.7	Are you able to speak to a Listener at any time, if you want to?	32%	15%
4.8	Do you feel your religious beliefs are respected?	48%	46%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	72%	55%
5.1	Is it easy to make an application?	72%	70%
5.3	Is it easy to make a complaint?	57%	35%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	22%	25%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	32%	38%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	39%	34%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	67%	55%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	43%	48%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	11%	12%
7.4	Do you have a personal officer?	50%	63%
8.1	Have you ever felt unsafe here?	72%	59%
8.2	Do you feel unsafe now?	46%	25%
8.3	Have you been victimised by other prisoners?	43%	37%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	22%	22%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	4%	6%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	8%
8.5	Have you been victimised because of your nationality? (By prisoners)	0%	6%
8.5	Have you been victimised because of your age? (By prisoners)	0%	0%
8.5	Have you been victimised because you have a disability? (By prisoners)	18%	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		
8.6	Have you been victimised by a member of staff?	57%	46%
8.7	Have you ever felt threatened or intimidated by staff here?	35%	17%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	11%	8%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	15%	9%
8.7	Have you been victimised because of your nationality? (By staff)	7%	2%
8.7	Have you been victimised because of your age? (By staff)	4%	0%
8.7	Have you been victimised because you have a disability? (By staff)	11%	0%
9.1	Is it easy/very easy to see the doctor?	50%	30%
9.1	Is it easy/ very easy to see the nurse?	61%	55%
9.4	Are you currently taking medication?	37%	12%
9.6	Do you feel you have any emotional well being/mental health issues?	78%	22%
10.3	Is it easy/very easy to get illegal drugs in this prison?	48%	40%
11.2	Are you currently working in the prison?	32%	46%
11.2	Are you currently undertaking vocational or skills training?	7%	11%
11.2	Are you currently in education (including basic skills)?	15%	24%
11.2	Are you currently taking part in an offending behaviour programme?	7%	12%
11.4	Do you go to the library at least once a week?	18%	25%
11.6	Do you go to the gym three or more times a week?	11%	11%
11.7	Do you go outside for exercise three or more times a week?	68%	79%
11.8	On average, do you go on association more than five times each week?	15%	17%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	0%	4%
12.2	Have you had any problems sending or receiving mail?	72%	67%
12.3	Have you had any problems getting access to the telephones?	46%	38%

## Diversity Analysis



### Key question responses (under 21) HMYOI Aylesbury 2017

**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	<b>Prisoners under the age of 21</b>	<b>Prisoners aged 21 and over</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>97</b>	<b>51</b>
1.3	Are you sentenced?	<b>100%</b>	<b>100%</b>
1.5	Are you a foreign national?	12%	8%
1.6	Do you understand spoken English?	<b>100%</b>	<b>100%</b>
1.7	Do you understand written English?	<b>100%</b>	<b>98%</b>
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	59%	<b>53%</b>
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	5%	6%
1.1	Are you Muslim?	37%	<b>33%</b>
1.12	Do you consider yourself to have a disability?	21%	<b>16%</b>
1.13	Are you a veteran (ex-armed services)?	0%	0%
1.14	Is this your first time in prison?	74%	<b>67%</b>
2.6	Were you treated well/very well by the escort staff?	59%	<b>65%</b>
2.7	Before you arrived here were you told that you were coming here?	43%	<b>47%</b>
3.2	When you were searched in reception, was this carried out in a respectful way?	79%	<b>81%</b>
3.3	Were you treated well/very well in reception?	75%	<b>73%</b>
3.4	Did you have any problems when you first arrived?	65%	<b>61%</b>
3.7	Did you have access to someone from health care when you first arrived here?	63%	<b>65%</b>
3.9	Did you feel safe on your first night here?	67%	<b>67%</b>
3.10	Have you been on an induction course?	<b>88%</b>	<b>90%</b>
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	24%	<b>26%</b>

## Diversity Analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Prisoners under the age of 21	Prisoners aged 21 and over
	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?	47%	48%
4.4	Are you normally able to have a shower every day?	25%	25%
4.4	Is your cell call bell normally answered within five minutes?	14%	8%
4.5	Is the food in this prison good/very good?	21%	26%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	36%	34%
4.7	Are you able to speak to a Listener at any time, if you want to?	15%	24%
4.8	Do you feel your religious beliefs are respected?	44%	51%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	54%	66%
5.1	Is it easy to make an application?	70%	72%
5.3	Is it easy to make a complaint?	38%	43%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	19%	36%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	37%	40%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	38%	29%
7.1	Do <b>most</b> staff, in this prison, treat you with respect?	53%	66%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	40%	60%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	10%	14%
7.4	Do you have a personal officer?	58%	67%
8.1	Have you ever felt unsafe here?	61%	61%
8.2	Do you feel unsafe now?	30%	28%
8.3	Have you been victimised by other prisoners?	36%	43%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	19%	29%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	4%	8%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	3%	15%
8.5	Have you been victimised because of your nationality? (By prisoners)	4%	4%
8.5	Have you been victimised because of your age? (By prisoners)	0%	0%
8.5	Have you been victimised because you have a disability? (By prisoners)	2%	6%

## Diversity Analysis

### Key to tables

	Any percentage highlighted in green is significantly better	Prisoners under the age of 21	Prisoners aged 21 and over
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.6	Have you been victimised by a member of staff?	43%	57%
8.7	Have you ever felt threatened or intimidated by staff here?	18%	25%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	8%	10%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	10%	10%
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)	1%	0%
8.7	Have you been victimised because you have a disability? (By staff)	2%	2%
9.1	Is it easy/very easy to see the doctor?	33%	35%
9.1	Is it easy/ very easy to see the nurse?	49%	69%
9.4	Are you currently taking medication?	14%	21%
9.6	Do you feel you have any emotional well being/mental health issues?	34%	32%
10.3	Is it easy/very easy to get illegal drugs in this prison?	35%	55%
11.2	Are you currently working in the prison?	35%	57%
11.2	Are you currently undertaking vocational or skills training?	12%	7%
11.2	Are you currently in education (including basic skills)?	21%	25%
11.2	Are you currently taking part in an offending behaviour programme?	10%	13%
11.4	Do you go to the library at least once a week?	21%	27%
11.6	Do you go to the gym three or more times a week?	5%	21%
11.7	Do you go outside for exercise three or more times a week?	74%	81%
11.8	On average, do you go on association more than five times each week?	17%	16%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	4%	0%
12.2	Have you had any problems sending or receiving mail?	69%	64%
12.3	Have you had any problems getting access to the telephones?	32%	55%



## Key question responses (first time in prison) HMYOI Aylesbury 2017

**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	Young adults for whom it was their first time in prison	Young adults who had been in prison before
	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>105</b>	<b>42</b>
<b>SECTION 1: General information</b>			
1.2	Are you under 21 years of age?	<b>68%</b>	<b>59%</b>
1.3	Are you sentenced?	<b>100%</b>	<b>100%</b>
1.3	Are you on recall?	<b>1%</b>	<b>12%</b>
1.4	Is your sentence less than 12 months?	<b>2%</b>	<b>2%</b>
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	<b>2%</b>	<b>2%</b>
1.5	Are you a foreign national?	<b>8%</b>	<b>19%</b>
1.6	Do you understand spoken English?	<b>100%</b>	<b>100%</b>
1.7	Do you understand written English?	<b>99%</b>	<b>100%</b>
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	<b>52%</b>	<b>72%</b>
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	<b>7%</b>	<b>0%</b>
1.1	Are you Muslim?	<b>35%</b>	<b>36%</b>
1.11	Are you homosexual/gay or bisexual?	<b>6%</b>	<b>0%</b>
1.12	Do you consider yourself to have a disability?	<b>18%</b>	<b>19%</b>
1.13	Are you a veteran (ex-armed services)?	<b>0%</b>	<b>0%</b>
1.15	Do you have any children under the age of 18?	<b>7%</b>	<b>38%</b>
<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?	<b>60%</b>	<b>59%</b>
2.5	Did you feel safe?	<b>79%</b>	<b>68%</b>
2.6	Were you treated well/very well by the escort staff?	<b>59%</b>	<b>66%</b>
2.7	Before you arrived here were you told that you were coming here?	<b>44%</b>	<b>46%</b>
2.8	When you first arrived here did your property arrive at the same time as you?	<b>87%</b>	<b>85%</b>

**Key to tables**

	Any percentage highlighted in green is significantly better	Young adults for whom it was their first time in prison	Young adults who had been in prison before
	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 3: Reception, first night and induction</b>			
3.1	Were you in reception for less than 2 hours?	64%	72%
3.2	When you were searched in reception, was this carried out in a respectful way?	78%	83%
3.3	Were you treated well/very well in reception?	74%	74%
	When you first arrived:		
3.4	Did you have any problems?	66%	61%
3.4	Did you have any problems with loss of property?	23%	29%
3.4	Did you have any housing problems?	9%	15%
3.4	Did you have any problems contacting employers?	0%	0%
3.4	Did you have any problems contacting family?	19%	24%
3.4	Did you have any problems ensuring dependants were being looked after?	1%	5%
3.4	Did you have any money worries?	12%	24%
3.4	Did you have any problems with feeling depressed or suicidal?	18%	10%
3.4	Did you have any physical health problems?	5%	5%
3.4	Did you have any mental health problems?	15%	10%
3.4	Did you have any problems with needing protection from other prisoners?	11%	13%
3.4	Did you have problems accessing phone numbers?	12%	22%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	81%	83%
3.6	A shower?	19%	33%
3.6	A free telephone call?	42%	55%
3.6	Something to eat?	37%	62%
3.6	PIN phone credit?	44%	52%
3.6	Toiletries/ basic items?	52%	57%

## Key to tables

	Any percentage highlighted in green is significantly better	Young adults for whom it was their first time in prison	Young adults who had been in prison before
	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 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?	64%	59%
3.7	Someone from health services?	61%	69%
3.7	A Listener/Samaritans?	29%	19%
3.7	Prison shop/ canteen?	19%	21%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	37%	48%
3.8	Support was available for people feeling depressed or suicidal?	28%	33%
3.8	How to make routine requests?	29%	43%
3.8	Your entitlement to visits?	29%	38%
3.8	Health services?	41%	55%
3.8	The chaplaincy?	48%	53%
3.9	Did you feel safe on your first night here?	62%	79%
3.10	Have you been on an induction course?	91%	83%
3.12	Did you receive an education (skills for life) assessment?	87%	83%
<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?	21%	32%
4.1	Attend legal visits?	35%	30%
4.1	Get bail information?	10%	8%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	53%	44%
4.3	Can you get legal books in the library?	22%	20%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	50%	44%
4.4	Are you normally able to have a shower every day?	21%	36%
4.4	Do you normally receive clean sheets every week?	24%	45%
4.4	Do you normally get cell cleaning materials every week?	26%	33%
4.4	Is your cell call bell normally answered within five minutes?	12%	13%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	48%	40%
4.4	Can you normally get your stored property, if you need to?	18%	16%
4.5	Is the food in this prison good/very good?	23%	23%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	36%	36%
4.7	Are you able to speak to a Listener at any time, if you want to?	16%	22%
4.8	Are your religious beliefs are respected?	43%	56%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	53%	71%
4.10	Is it easy/very easy to attend religious services?	33%	54%

**Key to tables**

	Any percentage highlighted in green is significantly better	Young adults for whom it was their first time in prison	Young adults who had been in prison before
	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 5: Applications and complaints</b>			
5.1	Is it easy to make an application?	75%	59%
5.3	Is it easy to make a complaint?	39%	40%
5.5	Have you ever been prevented from making a complaint when you wanted to?	34%	22%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	14%	27%
<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?	26%	21%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	41%	30%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	31%	42%
<b>SECTION 7: Relationships with staff</b>			
7.1	Do most staff, in this prison, treat you with respect?	55%	62%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	47%	49%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	27%	41%
7.4	Do staff normally speak to you most of the time/all of the time during association?	12%	10%
7.5	Do you have a personal officer?	60%	66%

### Key to tables

	Any percentage highlighted in green is significantly better	Young adults for whom it was their first time in prison	Young adults who had been in prison before
	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?	60%	68%
8.2	Do you feel unsafe now?	29%	31%
8.4	Have you been victimised by other prisoners here?	41%	33%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	25%	13%
8.5	Hit, kicked or assaulted you?	21%	23%
8.5	Sexually abused you?	1%	0%
8.5	Threatened or intimidated you?	24%	18%
8.5	Taken your canteen/property?	13%	20%
8.5	Victimised you because of medication?	0%	0%
8.5	Victimised you because of debt?	9%	5%
8.5	Victimised you because of drugs?	7%	8%
8.5	Victimised you because of your race or ethnic origin?	6%	5%
8.5	Victimised you because of your religion/religious beliefs?	9%	3%
8.5	Victimised you because of your nationality?	4%	5%
8.5	Victimised you because you were from a different part of the country?	7%	8%
8.5	Victimised you because you are from a traveller community?	1%	0%
8.5	Victimised you because of your sexual orientation?	4%	3%
8.5	Victimised you because of your age?	0%	0%
8.5	Victimised you because you have a disability?	3%	5%
8.5	Victimised you because you were new here?	16%	8%
8.5	Victimised you because of your offence/crime?	16%	10%
8.5	Victimised you because of gang related issues?	19%	18%

## Key to tables

	Any percentage highlighted in green is significantly better	Young adults for whom it was their first time in prison	Young adults who had been in prison before
	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 continued</b>			
8.6	Have you been victimised by staff here?	50%	44%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	26%	16%
8.7	Hit, kicked or assaulted you?	13%	18%
8.7	Sexually abused you?	1%	0%
8.7	Threatened or intimidated you?	21%	20%
8.7	Victimised you because of medication?	5%	3%
8.7	Victimised you because of debt?	1%	0%
8.7	Victimised you because of drugs?	1%	0%
8.7	Victimised you because of your race or ethnic origin?	9%	8%
8.7	Victimised you because of your religion/religious beliefs?	11%	8%
8.7	Victimised you because of your nationality?	2%	5%
8.7	Victimised you because you were from a different part of the country?	3%	0%
8.7	Victimised you because you are from a traveller community?	1%	0%
8.7	Victimised you because of your sexual orientation?	2%	0%
8.7	Victimised you because of your age?	1%	0%
8.7	Victimised you because you have a disability?	3%	0%
8.7	Victimised you because you were new here?	10%	13%
8.7	Victimised you because of your offence/crime?	6%	3%
8.7	Victimised you because of gang related issues?	4%	8%
<b>SECTION 9: Health services</b>			
9.1	Is it easy/very easy to see the doctor?	37%	25%
9.1	Is it easy/very easy to see the nurse?	57%	54%
9.1	Is it easy/very easy to see the dentist?	15%	13%
9.4	Are you currently taking medication?	17%	16%
9.6	Do you have any emotional well being or mental health problems?	31%	38%
<b>SECTION 10: Drugs and alcohol</b>			
10.1	Did you have a problem with drugs when you came into this prison?	14%	29%
10.2	Did you have a problem with alcohol when you came into this prison?	9%	19%
10.3	Is it easy/very easy to get illegal drugs in this prison?	43%	37%
10.4	Is it easy/very easy to get alcohol in this prison?	23%	19%
10.5	Have you developed a problem with drugs since you have been in this prison?	8%	19%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	1%	5%

### Key to tables

	Any percentage highlighted in green is significantly better	Young adults for whom it was their first time in prison	Young adults who had been in prison before
	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 11: Activities</b>			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	26%	19%
11.1	Vocational or skills training?	28%	21%
11.1	Education (including basic skills)?	42%	43%
11.1	Offending Behaviour Programmes?	27%	21%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	48%	30%
11.2	Vocational or skills training?	11%	8%
11.2	Education (including basic skills)?	24%	17%
11.2	Offending Behaviour Programmes?	9%	17%
11.4	Do you go to the library at least once a week?	22%	27%
11.5	Does the library have a wide enough range of materials to meet your needs?	28%	31%
11.6	Do you go to the gym three or more times a week?	11%	11%
11.7	Do you go outside for exercise three or more times a week?	73%	84%
11.8	Do you go on association more than five times each week?	18%	14%
11.9	Do you spend ten or more hours out of your cell on a weekday?	3%	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?	20%	26%
12.2	Have you had any problems with sending or receiving mail?	71%	56%
12.3	Have you had any problems getting access to the telephones?	43%	31%
12.4	Is it easy/ very easy for your friends and family to get here?	26%	19%
<b>SECTION 13: Preparation for release</b>			
13.3	Do you have a named offender supervisor in this prison?	60%	59%
13.10	Do you have a needs based custody plan?	3%	6%
13.11	Do you feel that any member of staff has helped you to prepare for release?	13%	11%



## Prisoner survey responses HMYOI Aylesbury 2017

**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

		F wing (holding prisoners less able to cope on a mainstream)	All other wings
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>Number of completed questionnaires returned</b>		<b>21</b>	<b>119</b>
<b>SECTION 1: General information</b>			
1.2	Are you under 21 years of age?	48%	68%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	5%	4%
1.4	Is your sentence less than 12 months?	5%	1%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	5%	1%
1.5	Are you a foreign national?	0%	13%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	95%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	19%	62%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	15%	4%
1.1	Are you Muslim?	5%	40%
1.11	Are you homosexual/gay or bisexual?	24%	1%
1.12	Do you consider yourself to have a disability?	29%	16%
1.13	Are you a veteran (ex-armed services)?	0%	0%
1.14	Is this your first time in prison?	86%	69%
1.15	Do you have any children under the age of 18?	15%	17%
<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?	71%	57%
2.5	Did you feel safe?	80%	76%
2.6	Were you treated well/very well by the escort staff?	71%	59%
2.7	Before you arrived here were you told that you were coming here?	34%	44%
2.8	When you first arrived here did your property arrive at the same time as you?	81%	87%

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<b>SECTION 3: Reception, first night and induction</b>			
3.1	Were you in reception for less than 2 hours?	81%	63%
3.2	When you were searched in reception, was this carried out in a respectful way?	90%	77%
3.3	Were you treated well/very well in reception?	85%	71%
	When you first arrived:		
3.4	Did you have any problems?	75%	60%
3.4	Did you have any problems with loss of property?	15%	26%
3.4	Did you have any housing problems?	10%	12%
3.4	Did you have any problems contacting employers?	0%	0%
3.4	Did you have any problems contacting family?	20%	20%
3.4	Did you have any problems ensuring dependants were being looked after?	0%	3%
3.4	Did you have any money worries?	10%	16%
3.4	Did you have any problems with feeling depressed or suicidal?	50%	9%
3.4	Did you have any physical health problems?	5%	6%
3.4	Did you have any mental health problems?	36%	9%
3.4	Did you have any problems with needing protection from other prisoners?	36%	8%
3.4	Did you have problems accessing phone numbers?	10%	15%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	90%	79%
3.6	A shower?	29%	23%
3.6	A free telephone call?	38%	44%
3.6	Something to eat?	38%	46%
3.6	PIN phone credit?	48%	47%
3.6	Toiletries/ basic items?	66%	50%

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<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?	57%	65%
3.7	Someone from health services?	57%	63%
3.7	A Listener/Samaritans?	29%	26%
3.7	Prison shop/ canteen?	24%	19%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	38%	40%
3.8	Support was available for people feeling depressed or suicidal?	57%	26%
3.8	How to make routine requests?	43%	33%
3.8	Your entitlement to visits?	34%	33%
3.8	Health services?	48%	46%
3.8	The chaplaincy?	57%	49%
3.9	Did you feel safe on your first night here?	48%	70%
3.10	Have you been on an induction course?	81%	90%
3.12	Did you receive an education (skills for life) assessment?	90%	87%
<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?	19%	24%
4.1	Attend legal visits?	43%	30%
4.1	Get bail information?	15%	9%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	60%	46%
4.3	Can you get legal books in the library?	32%	20%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	90%	40%
4.4	Are you normally able to have a shower every day?	38%	20%
4.4	Do you normally receive clean sheets every week?	66%	22%
4.4	Do you normally get cell cleaning materials every week?	34%	25%
4.4	Is your cell call bell normally answered within five minutes?	15%	11%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	38%	49%
4.4	Can you normally get your stored property, if you need to?	48%	11%
4.5	Is the food in this prison good/very good?	38%	19%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	57%	33%
4.7	Are you able to speak to a Listener at any time, if you want to?	29%	17%
4.8	Are your religious beliefs are respected?	48%	46%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	80%	53%
4.10	Is it easy/very easy to attend religious services?	40%	40%

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<b>SECTION 5: Applications and complaints</b>			
5.1	Is it easy to make an application?	90%	67%
5.3	Is it easy to make a complaint?	48%	38%
5.5	Have you ever been prevented from making a complaint when you wanted to?	34%	29%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	24%	16%
<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?	34%	24%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	38%	37%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	24%	32%
<b>SECTION 7: Relationships with staff</b>			
7.1	Do most staff, in this prison, treat you with respect?	62%	55%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	66%	46%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	57%	26%
7.4	Do staff normally speak to you most of the time/all of the time during association?	10%	12%
7.5	Do you have a personal officer?	95%	57%

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<b>SECTION 8: Safety</b>			
8.1	Have you ever felt unsafe here?	90%	58%
8.2	Do you feel unsafe now?	31%	30%
8.4	Have you been victimised by other prisoners here?	71%	32%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	57%	16%
8.5	Hit, kicked or assaulted you?	48%	18%
8.5	Sexually abused you?	5%	0%
8.5	Threatened or intimidated you?	53%	18%
8.5	Taken your canteen/property?	19%	15%
8.5	Victimised you because of medication?	0%	0%
8.5	Victimised you because of debt?	15%	7%
8.5	Victimised you because of drugs?	10%	7%
8.5	Victimised you because of your race or ethnic origin?	5%	6%
8.5	Victimised you because of your religion/religious beliefs?	19%	6%
8.5	Victimised you because of your nationality?	0%	6%
8.5	Victimised you because you were from a different part of the country?	0%	9%
8.5	Victimised you because you are from a traveller community?	0%	1%
8.5	Victimised you because of your sexual orientation?	15%	2%
8.5	Victimised you because of your age?	0%	0%
8.5	Victimised you because you have a disability?	15%	2%
8.5	Victimised you because you were new here?	34%	11%
8.5	Victimised you because of your offence/crime?	53%	8%
8.5	Victimised you because of gang related issues?	15%	19%

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	Percentages which are not highlighted show there is no significant difference		
<b>SECTION 8: Safety continued</b>			
8.6	Have you been victimised by staff here?	53%	47%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	29%	20%
8.7	Hit, kicked or assaulted you?	0%	16%
8.7	Sexually abused you?	0%	1%
8.7	Threatened or intimidated you?	24%	19%
8.7	Victimised you because of medication?	10%	2%
8.7	Victimised you because of debt?	0%	1%
8.7	Victimised you because of drugs?	0%	1%
8.7	Victimised you because of your race or ethnic origin?	0%	9%
8.7	Victimised you because of your religion/religious beliefs?	5%	10%
8.7	Victimised you because of your nationality?	0%	3%
8.7	Victimised you because you were from a different part of the country?	0%	3%
8.7	Victimised you because you are from a traveller community?	0%	1%
8.7	Victimised you because of your sexual orientation?	5%	1%
8.7	Victimised you because of your age?	0%	1%
8.7	Victimised you because you have a disability?	5%	2%
8.7	Victimised you because you were new here?	10%	12%
8.7	Victimised you because of your offence/crime?	15%	4%
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?	38%	33%
9.1	Is it easy/very easy to see the nurse?	71%	55%
9.1	Is it easy/very easy to see the dentist?	15%	14%
9.4	Are you currently taking medication?	24%	14%
9.6	Do you have any emotional well being or mental health problems?	66%	26%
<b>SECTION 10: Drugs and alcohol</b>			
10.1	Did you have a problem with drugs when you came into this prison?	38%	14%
10.2	Did you have a problem with alcohol when you came into this prison?	34%	8%
10.3	Is it easy/very easy to get illegal drugs in this prison?	86%	34%
10.4	Is it easy/very easy to get alcohol in this prison?	57%	14%
10.5	Have you developed a problem with drugs since you have been in this prison?	24%	9%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	10%	1%

### Key to tables

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	Percentages which are not highlighted show there is no significant difference		
<b>SECTION 11: Activities</b>			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	34%	23%
11.1	Vocational or skills training?	24%	29%
11.1	Education (including basic skills)?	53%	43%
11.1	Offending Behaviour Programmes?	57%	22%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	66%	40%
11.2	Vocational or skills training?	0%	13%
11.2	Education (including basic skills)?	0%	28%
11.2	Offending Behaviour Programmes?	10%	11%
11.4	Do you go to the library at least once a week?	50%	20%
11.5	Does the library have a wide enough range of materials to meet your needs?	50%	26%
11.6	Do you go to the gym three or more times a week?	0%	13%
11.7	Do you go outside for exercise three or more times a week?	57%	79%
11.8	Do you go on association more than five times each week?	15%	18%
11.9	Do you spend ten or more hours out of your cell on a weekday?	5%	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?	43%	18%
12.2	Have you had any problems with sending or receiving mail?	71%	67%
12.3	Have you had any problems getting access to the telephones?	66%	34%
12.4	Is it easy/ very easy for your friends and family to get here?	24%	23%
<b>SECTION 13: Preparation for release</b>			
13.3	Do you have a named offender supervisor in this prison?	84%	55%
13.10	Do you have a needs based custody plan?	10%	3%
13.11	Do you feel that any member of staff has helped you to prepare for release?	29%	9%