

Report on an unannounced inspection of

HMP Grendon

by HM Chief Inspector of Prisons

8–18 May 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

Grendon is a category B training prison in Buckinghamshire holding just over 200 adult men, all of whom were serving long determinate or life sentences. All were at the prison to undertake accredited therapy in one of five democratic therapeutic communities (TCs). Grendon is one of only two prisons in England and Wales dedicated specifically to this type of work. Democratic TCs provide prisoners with a range of therapy so they can understand and address their offending behaviour and live in a collaborative setting with their peers and staff. Prisoners are given a real say in the day-to-day running of the establishment, which aims to equip them with greater insight into their own behaviour and instil in them a greater sense of responsibility for others. This all happens within the context of the usual security imperatives of a category B prison. At our last visit to Grendon in August 2013 we described a safe, decent prison with an excellent focus on therapy work, but felt some aspects of purposeful activity needed to be stronger.

In our survey, prisoners at Grendon were much more positive than those held in other category B prisons across a range of indicators. Most men reported feeling safe and secure and far fewer men than at the last inspection felt victimised by staff. Incidents of violence remained infrequent. Verbal tensions were sometimes generated through the therapeutic process, but were generally dealt with through the treatment process with little need for recourse to formal procedures or interventions. The prison operated without a segregation unit and very few men were required to move to other prisons for security or disciplinary reasons. Security generally supported the therapeutic aims of the prison.

The physical fabric of the prison was somewhat shabby, and the automated night sanitation system was outdated and presented real challenges for the men held. However, as far as was possible, the impact of the system was offset by the respect men showed to their living environment, and the efforts staff made to ensure they had the wherewithal to live decent lives. Food provision was excellent. Relationships between staff and the men, and between prisoners and their peers, were outstanding and underpinned much that was positive about Grendon. Equality and diversity work had developed, and real efforts were made to ensure all men had equitable opportunities at the prison, regardless of any individual differences. Health care provision was strong.

Therapy was the main purposeful activity and consumed a significant proportion of the core day. Time out of cell was excellent and a huge range of extracurricular activities were offered, many of which aimed to support the therapeutic process. Learning, skills and work activities provision had improved, although still more focus was needed to ensure the benefits of work and any progress the men made in activities were recognised.

Men came to Grendon to undertake work that would help them understand and address their risk of harm to others, and nearly everything that happened at the prison was linked in some way to this key aim. Therapy was embedded throughout the regime, and prisoners and staff were expected to play their part in facilitating these aims. It was impressive that there was a whole prison approach to facilitating a rehabilitative culture and environment. Some aspects still needed attention, particularly the timeliness of post-therapy reports and moves to other prisons, but in most respects we considered Grendon to be doing what it set out to do. The focus on supporting relationships between the men held and their children, families and friends, and on how such support networks might assist in the management of their future risks, was impressive.

In conclusion, the strong picture we reported at our previous inspection had been enhanced, and outcomes were even better. Nearly all recommendations we made previously had been achieved, or significant progress made in doing so. Many men at the prison recognised the benefits of the opportunities offered and how they would help them live offending-free lives in the future. This was in no small part down to the strong, principled and focused leadership of the prison, which provided more junior staff and prisoners with role models, exemplifying the positive behaviour and thinking

expected of them. Not every prison can or needs to be a therapeutic community, but the values, principles and practice seen at Grendon could provide positive lessons and inspiration for other prisons. HM Prison and Probation Service should ensure this example is shared more widely for the benefit of others.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

June 2017

Fact page

Task of the establishment

HMP Grendon provides group therapy and structured community living in which prisoners are encouraged to have shared responsibility for day-to-day decision-making and problem-solving.

Prison status

Public

Region

London Thames Valley

Number held

211 (on 8 May 2017)

Certified normal accommodation

235

Operational capacity

233

Date of last full inspection

5–16 August 2013

Brief history

Opened in 1962, Grendon was initially used as an experimental psychiatric prison for prisoners with antisocial personality disorders. It developed into a series of discrete therapeutic communities (TCs), one of which was dedicated to sex offenders. In 2014, a TC plus (TC+) unit for prisoners with learning disabilities (who had previously been excluded from treatment) was opened, complementing similar provision at HMPs Dovegate and Gartree. Grendon has been one of the most researched forensic establishments in the world. Studies have shown lower levels of reoffending for men who stay longer than 18 months.

Grendon and the adjacent HMP Spring Hill, an open prison for adult men, were managed jointly by a single senior management team.

Short description of residential units

A wing – 40-bed TC for sex offenders only

B wing – 45-bed TC

C wing – 43-bed TC

D wing – 45-bed TC

F wing – 20-bed TC+ for men with mild learning disabilities

G wing – 40-bed assessment and induction unit

Name of governor/director

Dr Jamie Bennett

Escort contractor

GEOAmey

Health service provider

Care UK Clinical Services Limited – subcontracts to Barnet, Enfield and Haringey (BEH) Mental Health NHS Trust and Time for Teeth

Learning and skills providers

Milton Keynes College

Independent Monitoring Board chair

Robert Wondrak

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:

Safety	prisoners, particularly the most vulnerable, are held safely
Respect	prisoners are treated with respect for their human dignity
Purposeful activity	prisoners are able, and expected, to engage in activity that is likely to benefit them
Resettlement	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 HM 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, the General Pharmaceutical Council (GPhC) and HM Inspectorate of Probation. This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

This report

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

¹ 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** *Prisoners were positive about the escort experience. Reception staff were welcoming and the assessment and induction process had been enhanced since our last visit. The prison was safe and there was very little violence. Nearly all problems were dealt with through the therapeutic community. Some very good support was provided to men in crisis. The security team managed risks very well and supported the therapeutic aims of the prison. Formal disciplinary measures were used appropriately, but were rarely needed. Support for men with substance misuse issues was good. **Outcomes for prisoners were good against this healthy prison test.***
- S2** *At the last inspection in 2013 we found that outcomes for prisoners in Grendon were good against this healthy prison test. We made seven recommendations in the area of safety. At this follow-up inspection we found that four of the recommendations had been achieved and three had not been achieved.*
- S3** Prisoners were generally positive about escorts to the prison. Reception staff were welcoming, and support during prisoners' early days at the prison was good. The assessment and introduction to therapy was more extensive than previously and consisted of six weekly reviews and opportunities to experience therapeutic processes. Prisoners appreciated the induction process, which was largely peer-led.
- S4** Prisoners told us they felt safe and levels of violence were very low. Our survey results on safety were better than in comparator prisons and had improved since the last inspection in some key areas. Conflict and poor behaviour were managed very well through the therapeutic process and perpetrators and victims of antisocial behaviour received very good support. The governance of safer custody work was generally sound.
- S5** There had been three deaths in custody since the last inspection. The response to the single Prisons and Probation Ombudsman recommendation was appropriate, although not all action was sufficiently embedded. A small number of prisoners with complex needs accounted for most incidents of self-harm. Assessment, care in custody and teamwork case management documents for prisoners at risk of suicide or self-harm were generally reasonable and very good support was provided to prisoners through the therapeutic process. We were confident that excellent supportive relationships among prisoners and staff would ensure that adult safeguarding issues were identified and addressed appropriately.
- S6** Procedural security was generally proportionate and security arrangements were focused on maintaining a safe environment, while supporting the therapeutic regime. The management and use of intelligence was extremely good, and dynamic security arrangements were excellent and underpinned by professional relationships.
- S7** Nearly everyone was on the enhanced level of the incentives and earned privileges scheme, but it was mostly irrelevant because nearly all behaviour issues were successfully resolved in the therapeutic groups.
- S8** Formal disciplinary procedures were used rarely. The number of adjudications was very low and procedures were well managed. Use of force was extremely rare and only two incidents had taken place in the previous six months. Paperwork reassured us that force was only used

as a last resort and governance arrangements had improved and were good. Segregation was not used.

- S9 The prison's clear drug strategy informed practice. Inclusion, the substance misuse provider, was an effective partner in supporting the work of the therapeutic communities (TCs) through the delivery of tailored substance misuse support, mainly on a one-to-one basis. Peer representatives on every wing were involved in health promotion initiatives and provided men who needed it with ongoing support.

Respect

S10 *Despite night sanitation and shabby accommodation, living conditions were reasonable. Cleanliness was good, and men were provided with what they needed to live decently. All men had a single cell and responses to applications were excellent. Relationships at Grendon were outstanding. Equality and diversity work and faith provision were generally good. Complaints were well managed and legal rights services were adequate. Health care was good. Men were very positive about the food and the canteen list had recently been enhanced. **Outcomes for prisoners were good against this healthy prison test.***

S11 *At the last inspection in 2013 we found that outcomes for prisoners in Grendon were good against this healthy prison test. We made 13 recommendations in the area of respect.² At this follow-up inspection we found that 10 of the recommendations had been achieved, two had been partially achieved and one had not been achieved.*

- S12** Living conditions were generally adequate. Communal areas were mostly clean, although some carpets required replacing. Cells were clean and well decorated and we saw little graffiti and few offensive displays. All men had a single cell, but the lack of in-cell sanitation was undesirable and providing men with pots was not decent. A few showers needed refurbishment. The heating could not be regulated and many prisoners complained about being cold. The applications system worked very well and 90% of prisoners said they were dealt with fairly, which was higher than in other prisons.
- S13** Relationships among staff and prisoners in Grendon were outstanding and underpinned positive outcomes in the areas we inspected. Consultation arrangements were good.
- S14** Equality and diversity management had improved and we found that most prisoners' needs, including those of men with disabilities, were met. The national equalities monitoring tool aggregated data from Grendon and Spring Hill prisons, which compromised monitoring at Grendon. Nevertheless, there had been some good investigations. Regular discussion groups promoted an awareness of different aspects of diversity and prisoners had delivered a training session on unconscious bias for staff. Religious and cultural events were celebrated. Most alleged discrimination incidents were appropriately managed through the therapeutic process, but oversight of the discrimination incident reporting form process was weak. Provision for men with protected characteristics was generally good, but in our survey men with disabilities were still less positive than others.
- S15** Prisoners were positive about all aspects of faith provision. The chaplaincy was working to address some weaknesses. The multi-faith room was still not sufficient.

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

- S16 In our survey, 71% of respondents, against a comparator of 27%, said complaints were dealt with fairly. The number of complaints had declined since our last inspection. Quality assurance arrangements were good and involved the Independent Monitoring Board. Legal provision was adequate.
- S17 Health services were well-led and the range was appropriate. Most governance arrangements were effective, apart from those for dental services, and positive relationships had been established between the prison and health partners. Most prisoners were very positive about the support the health care department delivered. Waiting times for all clinics were short. Overall, medicines management was appropriate but officers did not supervise evening administration. The dentist offered an appropriate range of treatments and waiting times were in line with what would be expected in the community. The dentist chair needed to be repaired urgently to ensure it complied with infection prevention standards. Mental health services were structured to support the work of the TCs and were well integrated across the prison. Good individual support was provided through a range of appropriate interventions. We saw examples where men with complex needs received effective health care support.
- S18 In our survey, an impressive 93%, against a comparator of 29% said the food was good or very good. Wings had self-catering facilities so men could cook their own food. Kitchens were clean and well equipped. In our survey, prisoners were negative about the range of canteen products available, but a recent change had largely resolved the issue.

Purposeful activity

S19 *Time out of cell was very good, and an impressive range of extracurricular activities was offered. Therapy remained the main purposeful activity. Ofsted found that learning skills and work had improved and rated it as good overall. Leaders and managers had worked well to drive improvements, and partnership work was strong. The work allocation process was fair and equitable. There were sufficient activity places but many activities were mundane. The skills the prisoners developed were not sufficiently recognised and more vocational training was needed. Teaching and learning were good, and achievements were high for those on formal courses. Prisoners had good access to the library and gym and made good use of them. **Outcomes for prisoners were good against this healthy prison test.***

S20 *At the last inspection in 2013 we found that outcomes for prisoners in Grendon were reasonably good against this healthy prison test. We made 12 recommendations in the area of purposeful activity. At this follow-up inspection we found that eight of the recommendations had been achieved and four had been partially achieved.*

S21 Therapy remained the main purposeful activity. Time out of cell exceeded our expectations on weekdays and was reasonable at weekends. Arrangements for outside exercise and wing association facilities were good. Prisoners contributed to their community by taking on a wing representative job. The job was designed to support the therapeutic process by providing prisoners with the chance to practice skills such as, taking responsibility, supporting others or taking the lead. A good range of opportunities enabled prisoners to pass their free time constructively. They included discussion groups and an artist in residence, which helped ensure the prison was as much like normal community life as possible.

S22 In learning, skills and work, good links had been established with higher education institutions. The Milton Keynes College provision was good. The governance board

monitored the provision's development and quality effectively. The National Careers Service provision had been reintroduced and careers advice was offered during induction and on application. The self-assessment process was thorough, but the quality of work was not sufficiently taken into account.

- S23 The prison had sufficient activity places for the prison population. The allocations process was fair and equitable. Much of the work was mundane, but generally appropriate. The quality of teaching, training and coaching was good. Tutors make good use of learner profiles to plan and manage the classes. Learning support was effective. However, in a small minority of cases, learners were not encouraged to work or study independently. Tutors provided learners with very good detailed written feedback that promoted progress.
- S24 Prisoners developed good personal, social and employability skills in taught sessions and relationships were mutually respectful. Staff emphasised effective health and safety practices in vocational training. Attendance was generally good, although erratic due primarily to requirements of the therapeutic regime. A few education classes had low numbers.
- S25 Achievement rates for learners who completed their courses were high. Prisoners made good progress in vocational training, English, maths and information and communication technology courses, and efforts were made to reintegrate learners into education. The standard of written and vocational training practical work was high, and mathematical rules were applied well in vocational contexts. Work was not always planned sufficiently well to ensure prisoners were challenged so they could acquire broader and higher level skills and knowledge. Work activities did not offer accredited training and plans to recognise and record prisoners' development in work had yet to be implemented.
- S26 Prisoners had good access to the library, which they used well. Literacy was also promoted well. The library's use was not monitored sufficiently to identify trends. A wide range of physical education facilities was offered, and access was good. The outdoor sports facility had yet to be reinstated. Links to the health care department were strong. Appropriate accredited courses were available and achievements were high.

Resettlement

S27 *Grendon met its core aim of providing therapy to men with serious offending behaviour. All men had a meaningful sentence plan, and there were regular discussions about the issues outlined in them. Nearly all men felt well supported. Public protection was well managed, and release planning for the small number of men released from the prison was appropriate. There were some delays in 'end-of-therapy' reports and ongoing challenges in organising moves to other prisons. Children and families work remained very good. A wide range of therapeutic interventions was offered, and many men felt they made good progress at the prison. **Outcomes for prisoners were good against this healthy prison test.***

S28 *At the last inspection in 2013 we found that outcomes for prisoners in Grendon were good against this healthy prison test. We made seven recommendations in the area of resettlement. At this follow-up inspection we found that five of the recommendations had been achieved, one had been partially achieved and one had not been achieved.*

S29 The focus across the whole prison was on reducing the risks of the men held and staff and prisoners worked well together to achieve this aim. The offender personality disorder strategy had led to better links with other establishments to facilitate progressive moves.

- S30 Offender management work was good overall. Teamwork was strong and support and supervision arrangements for the offender management unit (OMU) team had improved since our last inspection. Offender supervisors were allocated to wings, and men could see them regularly. In our survey, 89% of men said they had a named offender supervisor and most men had meaningful and positive contact with them. The cases we examined demonstrated good analysis and risk management. Sentence planning was excellent. Plans were detailed, comprehensive and involved men well. They understood their targets and were motivated to work with staff to change.
- S31 Public protection processes were sound and information was shared appropriately. Categorisation decisions were timely, justifiable and based on a good range of information. Twelve men had moved to lower category prisons in the previous six months. Around three quarters of men were serving an indeterminate sentence, and most felt they could make progress at Grendon.
- S32 The few men who were released received individual resettlement support through the OMU. Resettlement plans focused on building support networks and positive relationships alongside managing risks and meeting practical resettlement needs. Organising transfers was a challenge. Too many end-of-therapy reports were outstanding.
- S33 Support to help prisoners maintain contact and build relationships with their families was excellent. Provision for social visits met their needs and the visits hall was comfortable and the atmosphere welcoming. There were some particularly impressive family visits.
- S34 Men attended wing-based therapy sessions with staff and peers as part of the TC provision. They were designed to explore and change offending behaviour and included support to address previous trauma. Any tension or issues were dealt with democratically at wing community meetings. Each TC was accredited and continuation and completion rates were higher than predicted targets. Resources were generally sufficient. Creative core therapies were also available for men who had made sufficient progress. Victim awareness work was developing well and prisoners could initiate it. The prison had developed an innovative and effective intervention for gang members.

Section 1. Safety

Courts, escorts and transfers

Expected outcomes:

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

- I.1** In our survey, prisoners' perceptions of transfers, escorts and the reception were generally positive and better than the comparator. However, the prison reception was closed over lunchtime, which meant prisoners waited in vans for over an hour. Arrivals at other times were dealt with swiftly. The video link facility was used well to avoid unnecessary journeys and there had been no court appearances in the previous six months.

Recommendation

- I.2** Prisoners should not be kept waiting in vans on arrival.

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** The reception was generally clean, bright and welcoming. However, the toilets used by prisoners were heavily stained. The facility was dated, but only used for short periods and therefore adequate.
- I.4** Staff were welcoming, introduced themselves by their first names and did not strip-search prisoners routinely. Property was processed carefully and new arrivals went promptly to the enhanced assessment unit on G wing or to the therapeutic community 'plus' (TC+) unit on F wing (for those with mild learning disabilities) where cells were clean and well prepared. In our survey, 96% of prisoners, more than the comparator, said they felt safe on their first night at Grendon.
- I.5** The biggest issue for most prisoners was adjusting to an approach that was different from what they had experienced at other prisons. The enhanced assessment unit aimed to establish whether prisoners were suitable for therapy. The assessment process was now longer than previously, usually up to six months. It was more structured and prisoners could experience therapeutic processes and have six-weekly reviews. All new arrivals participated in a therapy awareness course before their first progress report and some completed a Thinking about Feelings course.
- I.6** Prisoners participated in two community meetings each week, a small group meeting and a business meeting, to help prisoners understand the therapy process and what was expected of them. Some prisoners told us they found the regime on G wing difficult. We felt it was because they found it challenging to take on more responsibility for themselves, learn about therapy and adjust to community living, rather than because they had insufficient opportunities to be purposefully occupied. Some men chose to return to their sending

prison and others were found unsuitable for therapy. The attrition rate from G wing had increased over time, although data suggested it was now falling again. (See also paragraph 2.20 and recommendation 2.28.)

- 1.7** Men appreciated the induction, which was largely peer-led. There had been some improvements in induction since our previous inspection, for example, prisoners could contact their families on arrival as part of the process. The formal induction took place over two evenings and covered appropriate subjects. Men were invited to give written consent so their next of kin could be informed in the event of a serious injury or illness.

Good practice

- 1.8** *Men were invited to provide their written consent to have their next of kin informed in the event of serious injury or illness, reinforcing the importance of family in the therapeutic process.*

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** Although many prisoners in Grendon had a history of serious violent offending, levels of violence at the prison were very low. There had been two assaults in the six months prior to the inspection, no fights and little bullying.
- 1.10** Most prisoners felt safe. In our survey, they were more positive about key safety questions than the comparator and only 11% of prisoners said they felt unsafe at the time of the inspection, less than the comparator (25%). Survey results had also improved in other areas, for example, fewer prisoners than the comparator and compared with the previous inspection reported being victimised by staff.
- 1.11** Responses from black and minority ethnic and gay and bisexual prisoners were similar to their respective counterparts on almost all questions in our survey concerning safety. However, prisoners with disabilities reported a poorer experience (see paragraph 2.24).
- 1.12** Prisoners played an active role in violence reduction. Men and staff dealt with disputes together through the therapeutic process. Conflict and poor behaviour were addressed effectively before they escalated into violence and very good support was provided to both victims and perpetrators. Groups agreed on behaviour targets and sanctions, which were monitored at further sessions.
- 1.13** Staff completed violence reduction documents, which outlined how perpetrators and victims of persistent bullying should be managed and supported. They were mostly intended for use with the small number of prisoners who were not in therapy. Those we reviewed were completed to a better standard than we usually see.
- 1.14** Although we were satisfied that reported incidents were routinely addressed during groups, they were not always effectively recorded in some wing logs. Nonetheless we found governance of violence reduction to be generally sound.

- I.15** Attendance at the monthly safer custody committee meeting was inconsistent. The committee reviewed data on antisocial behaviour and considered other practical matters. The level of data analysis was appropriate. However, because data were also reviewed at security meetings and the committee was not directly involved in the governance of violence reduction work in the therapeutic process, the role of the committee lacked some clarity.
- I.16** There were prisoner safer custody representatives on each wing who provided their peers with additional support. Representatives met regularly with staff and felt well supported. Although the role was not sufficiently well defined, job descriptions were being drafted.

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.17** The prison was managing a particularly challenging population. There had been three deaths in custody since the last inspection, one of which had been self-inflicted. The prison had responded to the Prisons and Probation Ombudsman recommendation, but not all action had been fully embedded.
- I.18** Prison data suggested that 42% of prisoners had attempted suicide at some time and 37% had a history of other kinds of self-harm. Although in the six months prior to the inspection there had been 47 self-harm incidents, 41 involved two prisoners with particularly complex needs.
- I.19** In the six months prior to our inspection 26 assessment, care in custody and teamwork (ACCT) case management documents for prisoners at risk of suicide or self-harm had been opened. The documents were generally reasonably well completed. Care plans were generally good, but did not always record whether actions had been completed. Case reviews were sufficiently focused on risks, but not all were multidisciplinary and there was often insufficient continuity in case management. Staff's documented observations showed some detailed supportive interactions with prisoners. It was evident from documentation that very good support was also provided through the therapeutic process. In several cases the prison had gone to some lengths to manage a number of challenging prisoners rather than transferring them elsewhere, which was commendable.
- I.20** There was a gated cell, but not all staff were aware of the protocol for its use. The gated cell, along with the safer cell had not been fit for use for some months. There had been delays in the external contractor refurbishing these cells, which was unacceptable.
- I.21** The prison had no Listeners (prisoners trained by the Samaritans to provide confidential emotional support to fellow prisoners), but there were safer custody representatives on each wing who provided informal support and directed prisoners in crisis to sources of help. There was no access to such support at night and although there were Samaritans phones on each wing, not all of them were working. We were also concerned that night staff on some wings were not clear on how to gain entry to cells promptly at night.

Recommendation

- I.22 The prison should ensure that procedures to support prisoners at risk of self-harm at night are robust and well understood by staff.**

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.³

- I.23** We were satisfied that selection and assessment processes, together with the in-depth assessment and psychological testing of prisoners during their initial months in Grendon were sufficient to identify any safeguarding needs. We were also confident that excellent supportive relationships among prisoners and staff and the therapeutic process would have ensured that emerging adult safeguarding issues were identified and addressed appropriately.

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.24** Procedural security was generally proportionate but a few practices, such as random strip-searches following visits and hand-cuffing prisoners from vans to reception seemed excessive. As at our previous inspection the prison had good links with the local police, and local corruption prevention measures were well organised and thorough.
- I.25** Important elements of dynamic security were embedded and were a particular strength. Supervision in important areas, such as residential wings, education and workshops was relaxed but effective and the prison regime was purposeful and predictable.
- I.26** The security department was well managed and maintained a safe environment. The monthly security committee meeting was well attended, and the standing agenda included a thorough analysis of information reports (IRs) relating to security intelligence. Links between the security department and other key prison areas, particularly the therapeutic communities (TCs), offender management unit (OMU) and clinical support services, were particularly strong. Risk management systems were properly integrated and effective, and intelligence systems were well managed.
- I.27** The security department received about 100 IRs each month, which was similar to the last inspection and seemed reasonable. Most related to inappropriate prisoner behaviour that had already been dealt with through the TCs. Nevertheless, they were processed and the information disseminated across appropriate areas of the prison.

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

- I.28** The fortnightly meeting between security managers and wing therapists was an effective way of discussing issues arising in the TCs, sharing information and dealing with emerging concerns.
- I.29** The mandatory drug testing programme was in line with established standards and the local drug strategy. Testing targets were being met and tests took place throughout each month, including weekends. The testing suite was suitable and appropriately staffed. Records were legible and well maintained. No positive tests had been reported in the previous six months, except some that were consistent with prescribed medication. In our survey, only 1% of prisoners said they had developed a problem at the prison with diverted medication against 9% in comparator prisons.
- I.30** The availability of illicit drugs was low and only 13% of prisoners said it was easy to get illegal drugs compared with 38% in comparator prisons. The few finds had been dealt with appropriately. Information sharing between security, substance misuse and health care departments was good and there were routine spot checks of in-possession medication.

Recommendations

- I.31 Prisoners should only be strip-searched when there is sufficient intelligence to suggest it is necessary.**
- I.32 Hand-cuffing prisoners in the prison grounds should be justified by an individual risk assessment.**

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.33** As at our previous inspection, 98% of the population was on the enhanced level of the IEP scheme and no one was on the basic regime. We were told that no one had been on the basic level since the last inspection, if ever. All prisoners who were involved in therapy were on the enhanced level and poor behaviour was dealt with through therapeutic processes. Five prisoners were on the standard regime because they had recently arrived from other prisons on that level and were waiting to be promoted to the enhanced level when they moved from the assessment unit to a main TC. We could see no reason why the behaviour of these few prisoners who were all on G wing and attended daily therapeutic groups could not have been managed in the same way as the rest of the prison population.
- I.34** There was little evidence to indicate that the IEP scheme had any practical relevance in a prison where nearly all issues relating to behaviour were successfully resolved in the therapeutic groups.

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.35** Formal disciplinary procedures were used rarely. There had been only 18 adjudications in the six months prior to our inspection, far fewer than expected. Most charges were for threats or abusive language and many of the incidents took place following therapeutic sessions. None were for violent incidents.
- I.36** As at our previous inspection, adjudications were usually held in the prisoner's unit, with only the prisoner, the adjudicator and an officer present. However, where appropriate, witnesses were called. There were no adjudications during our inspection but all the written records we examined showed that hearings were conducted fairly and prisoners were given the opportunity to explain their version of events. Adjudicators ensured that prisoners understood each stage of the process and routinely offered them an opportunity to seek legal advice. Punishments were fair and consistent.

The use of force

- I.37** Use of force was extremely rare – only two spontaneous incidents in the six months prior to the inspection had occurred. The written records of both incidents were good and accounts from officers demonstrated that de-escalation techniques were used well. Force was used as a last resort and supervision was sufficient.
- I.38** Despite the small number of incidents, management and monitoring arrangements for the use of force had been appropriately prioritised and were good. A use of force committee met quarterly to oversee processes, particularly training, and to provide governance.

Segregation

- I.39** Grendon did not have a segregation unit and in the previous six months, no one had been segregated on a residential wing. Poor behaviour was usually resolved during therapeutic meetings, or for prisoners not engaged in therapy, through IEP procedures. In cases of extremely poor behaviour, prisoners could be transferred to a segregation unit in a nearby prison.

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.40** A clear, whole prison drug strategy had been established since our last inspection. The drug strategy group met regularly and had developed an action plan, which informed practice and promoted appropriate partnership working. Inclusion, the provider of psychosocial support, assessed all prisoners on arrival and offered them the opportunity to access support if

required. Prisoners could be referred by prison or wing-based therapy staff or could refer themselves at any point during their stay.

- I.41** A small team of skilled practitioners provided support for men with substance misuse problems. The service was well integrated into the work of the TCs and much of Inclusion's work involved enabling men to participate in group therapeutic processes. Forty-two prisoners were undertaking structured one-to-one work, which complemented wing therapy sessions and TC networks.
- I.42** Peer representatives supported other prisoners who had disclosed an identified need. They also led many of the health promotion initiatives and actively developed information about harm reduction practices, including a DVD produced by prisoners.
- I.43** Prisoners had to be drug free before arriving at Grendon, which meant no clinical interventions were available in the prison. Men we spoke to supported the approach and we felt it was appropriate. Information-sharing protocols had been developed beyond standard medical confidentiality arrangements. They were appropriate and prisoners we spoke to understood how and when they were applied. The prison had recently gone smoke-free and Inclusion was continuing to offer support to men to cope with the new arrangements.
- I.44** Prisoners and staff spoke highly of the Inclusion team. In our survey, 96% of prisoners against the comparator of 73% said the support they had received for a drug or alcohol problem had been helpful. Care plans were good and we found evidence of detailed one-to-one work, appropriate co-ordination of care and effective information-sharing with other stakeholders including with OMU staff.

Good practice

- I.45** *The harm reduction initiatives developed by peer representatives ensured that prisoners played a prominent role in delivering health promotion messages.*

Section 2. Respect

Residential units

Expected outcomes:

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

- 2.1 The prison grounds were well kept. Internal communal areas were clean and well decorated, although carpets in some areas required replacement. To help create an informal atmosphere, features such as pot plants, pictures and fish tanks had been introduced. There were large, clean, comfortable rooms where therapy meetings were held.
- 2.2 There were six residential wings. Given their age, living conditions were generally adequate. All prisoners had their own cell. Cells were clean and well decorated and we saw little graffiti and few offensive displays. However, many prisoners complained that the heating could not be regulated and the prison had recently been very cold.
- 2.3 Most prisoners did not have in-cell sanitation. They had to rely on a computer operated system to let them out individually at night to use toilet and washing facilities. Many prisoners told us it was not a significant problem. However, some of those on landings with the most number of cells told us they could wait in a queue for up to an hour, with access further limited when the system was periodically switched off to check the roll. Each prisoner had a 'pot' in case they needed to relieve themselves before they were let out of their cell, which was not decent.
- 2.4 Although generally well ventilated, some communal showers needed refurbishment. Not all toilets were working and some prisoners complained of long delays before the external contractor repaired toilets and other equipment (see also paragraph 1.20).
- 2.5 Each wing had a small laundry and a kitchen area with simple self-catering equipment. The dining rooms in each unit were clean and well decorated. Kettles were available on the landings.
- 2.6 There were reasonable supplies of prison clothing, although new prisoners could wait some weeks for it to be provided. Men could obtain personal hygiene items and said the provision of general cleaning material and clean sheets was good.
- 2.7 The application system worked very well and 98% of prisoners said it was easy to make an application while 90% of prisoners said they were dealt with fairly, higher than in comparator prisons (78% and 48% respectively).

Recommendation

- 2.8 **The facilities should be maintained in good condition and any repairs and refurbishment completed promptly.**

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.

- 2.9** Relationships between staff and prisoners, and between prisoners and their peers were outstanding and underpinned good outcomes across all areas we inspected. Officers were each assigned to a small therapy group on their wing and through the therapy process developed a deep understanding of the needs of the prisoners in their care.
- 2.10** In our survey, prisoners were more positive about their relationships with staff than those in comparator prisons: 94% said most staff treated them with respect and 96% said there was a member of staff they could turn to for help if they had a problem. Relationships between prisoners and their peers were also strong. Prisoners learned to be respectful of each other's needs, support others and challenge inappropriate behaviour constructively.
- 2.11** The community was democratic because everyone had a voice. This meant prisoners could challenge staff's behaviour during therapy or informally when they were on duty, in the same way as staff could challenge prisoners. Prisoners and staff alike found this approach demanding, but staff we spoke to were committed to the therapeutic process and were aware of the need for them to model pro-social behaviour (which benefits the community) and felt well supported. Oversight of group and community meetings was good. The arrangements had helped create an atmosphere of mutual respect in which a well-ordered and productive community could develop.
- 2.12** As part of the therapeutic process, prisoners were given a real say in the day-to-day running of their communities. There were also good inter-wing consultation arrangements, with regular meetings, which were generally purposeful. (See also section on attitudes, thinking and behaviour.)

Good practice

- 2.13** *The therapeutic process allowed prisoners and staff to reflect on and challenge each other's behaviour, helping to create an atmosphere of mutual respect.*

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 characteristic⁴ 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 and diversity management had improved. The governor chaired the quarterly equality and diversity committee, which included prisoners. Attendance at committee meetings had improved and the prison now responded more promptly to required action. The equality and diversity action team scrutinised the equalities monitoring tool (EMT) and had conducted good investigations into potential adverse outcomes in complaints and adjudications, which had been shared with prisoners. The EMT included data for both Grendon and the adjacent HMP Spring Hill, which had a very different population profile, and it was not therefore very accurate. This meant staff could have been wasting time on unnecessary investigations or failing to recognise areas that needed further scrutiny.
- 2.15** The strategy for preventing discrimination at Grendon involved staff and prisoners identifying and responding to the needs of individuals within their therapeutic community (TC). Each wing had a prisoner diversity representative who was responsible for promoting awareness of equality within their TC and a team of eight peer equality mentors (PEMs) worked with the equalities team to raise awareness and identify needs across the prison. They coordinated a weekly discussion forum, which considered each of the protected characteristics in turn, and helped organise events such as Black History Month, Gypsy, Romany and Traveller Month, religious festivals and various visiting speakers. The catering team often supported these events well. During our inspection, the PEMs delivered a training session on unconscious bias to prison staff.
- 2.16** The discrimination incident reporting form (DIRF) process had been used by prisoners on 22 occasions in the previous six months, but two prisoners accounted for nine of them. Prisoners were encouraged to discuss and resolve discrimination incidents in therapy, wherever possible. However, 10 of the DIRFs had not received a formal response. We saw evidence that incidents were indeed discussed in therapy, but concluded that if a prisoner chose to use the formal DIRF process, a formal written response should be provided.

Recommendations

- 2.17 The EMT should disaggregate data for HMPs Grendon and Spring Hill.**
- 2.18 All DIRFs should receive a formal written response explaining how the incident has been investigated and resolved.**

⁴ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

Good practice

- 2.19** *PEMs at Grendon had delivered training on unconscious bias to prison staff, which helped them recognise the potential for unintentional discrimination. They also regularly helped to organise external speakers, which promoted awareness of equality issues.*

Protected characteristics

- 2.20** At our previous inspection in 2013, our survey showed black and minority ethnic prisoners responded less positively than their white counterparts in some areas, whereas at this inspection there were no such differences. Eighteen percent of the population was from a minority ethnic group, fewer than at our previous inspection and fewer than we would expect in a typical category B prison. However, there was no up-to-date data on the attrition rate for black and minority ethnic men, either from G wing, or from the main therapeutic units.
- 2.21** There were seven foreign national men, all of whom were given phone credit for a five-minute call home every month, regardless of whether they had had a visit. It was a requirement of therapy that men had a good grasp of spoken English, although a telephone interpretation service was available. Several men were from Gypsy, Romany and Traveller communities, and they felt their culture and traditions were broadly respected.
- 2.22** Religious groups could celebrate up to four festivals a year, which included a meal provided by the kitchen. They were well publicised and men could bring another prisoner to the celebration as a guest. In addition, chaplains ran a drop-in session in the chapel every Friday afternoon when prisoners could seek support or chat. (See also section on faith and religious activity.)
- 2.23** At our previous inspection, we had concerns that the needs of prisoners with disabilities were not being met. At this inspection, despite some negativity in our survey we found no evidence of poorer outcomes for this group. During induction, prisoners were asked about any needs they had relating to a disability. The prison had identified a similar number of men with disabilities as inspectors had. About a third of men said they had a mental illness, while a similar proportion reported a learning disability. A specially trained nurse supported this latter group (see paragraph 2.67). A few men had personal emergency evacuation plans (PEEP) and named prisoners would have provided assistance in the event of an incident, but not all night staff knew who had a PEEP.
- 2.24** Some prisoners on the therapeutic community 'plus' (TC+) unit compared themselves unfavourably to others or reported perceptions that staff compared them unfavourably to the 'main' population, although we found no evidence to support this.
- 2.25** The local strategy for managing transgender prisoners focused on understanding and meeting the needs of individuals within the context of therapy. These complex issues were managed at an appropriately senior level by a multidisciplinary team.
- 2.26** In our survey 13% of respondents identified as gay or bisexual, more than in comparator prisons. We found that both prisoners and staff understood and respected men's sexual orientation and many prisoners told us it was safe to disclose their sexuality. (See also paragraph 2.31).
- 2.27** Eight men were over 60 years of age and none were over 70. A health care assistant supported this group (see paragraph 2.71), and the regime contained many appropriate activities. Retired men still had to pay for their television.

Recommendation

- 2.28 Managers should routinely monitor the proportion of black and minority ethnic men in the population and their attrition rate from assessment and therapy.**

Good practice

- 2.29** *Prisoners could invite another prisoner as a guest to celebrate their religious festival and share a meal, which promoted community and an understanding of different religions and traditions.*

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.

- 2.30** The Muslim managing chaplain had been in post for just over a year. Shortly after his arrival, a critical audit from HM Prison and Probation Service prompted a number of changes. This meant that chaplains were no longer allocated to the individual therapeutic communities (TC) in the same way as at our previous inspection.
- 2.31** Despite this, in our survey, overall perceptions about all aspects of faith provision were positive and similar to our previous inspection. However, some gay and bisexual men did not feel that their religious beliefs were respected. We did not find a clear explanation for this, but it required further investigation.
- 2.32** The chaplaincy was broadly representative of the prison population, but a long-standing vacancy for a Roman Catholic chaplain had proved difficult to fill. Community volunteers were covering the role in the interim. Prolonged security clearance processes delayed the appointment of some sessional chaplains.
- 2.33** Prisoners of most faiths could attend a worship session and a study session every week. The chapel was adequate, but the multi-faith room was too small. Inspectors have been recommending the room should be improved since 2004. We were told funding had now been allocated, but the position remained the same. Muslim prisoners accepted the situation.
- 2.34** Chaplains participated in key internal meetings, including those on managing extremist behaviour, but they struggled to attend assessment, care in custody and teamwork (ACCT) case management reviews for prisoners at risk of suicide or self-harm as they were not given reliable information about when they would take place.
- 2.35** The chaplaincy did not have enough prison visitors to meet the demand and one prisoner had been waiting more than six months for a visit. A recruitment event was planned for the autumn.

Recommendation

- 2.36 The multi-faith room should be extended and provide suitable facilities for Muslim prisoners. (Repeated recommendation 2.33)**

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.

- 2.37** In our survey, 71% of men, against a comparator of 27%, said complaints were dealt with fairly. Men were encouraged to resolve issues at community and inter-wing meetings before resorting to formal complaints.
- 2.38** Complaint boxes were available on every wing and emptied daily. In the six months prior to our inspection, 211 complaints had been submitted, fewer than we would have expected and fewer than at our previous inspection. Responses were mostly comprehensive and answered within reasonable timescales.
- 2.39** Men knew how to appeal when they were dissatisfied and guidance was displayed on wings. We saw evidence of men being directed to the Prisons and Probation Ombudsmen once local avenues of appeal had been exhausted. There were examples of successful appeals against re-categorisation decisions.
- 2.40** Quality assurance arrangements were good and involved the Independent Monitoring Board. The equality and diversity action team analysed complaints data to determine any issues for men with protected characteristics. Action was taken where any disproportionate patterns were identified.

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.

- 2.41** The few prisoners requiring assistance with legal matters could seek help from residential staff. Lists of solicitors were available in the library as was a good range of legal texts. Legal visits were offered two mornings a week, but were not held in sufficient privacy.

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.

- 2.42** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁵ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. One area has been identified that requires improvement with a

⁵ 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>.

subsequent notice issued by the CQC, which has been detailed within Appendix III of this report.

Governance arrangements

- 2.43** Health providers' governance structures, including the management of adverse incidents, were well integrated and promoted learning. A health needs assessment informed service delivery. A Buckinghamshire cluster health and social care partnership board was active and clinical governance structures were generally effective, although inspectors had concerns about the governance of dental equipment (see paragraph 2.64 and recommendation 2.65) and some aspects of pharmacy services (see section on the pharmacy).
- 2.44** A recently re-established health care forum, involving prisoner representatives from each wing, enabled patients to raise issues about health care. In our survey, prisoners were more satisfied with the overall quality of health care than the comparator.
- 2.45** The service was well managed and clear clinical leadership drove up standards. Staffing was a concern – there were three vacancies in what was a small team. A registered general nurse had been recruited to the primary care team and a member of the mental health in-reach team had just completed the nurse prescribing course. The skills mix of staff was appropriate and met the needs of the patients. Regular agency staff were used and practitioners, who worked across Grendon and Springhill, had the flexibility to deliver a responsive and effective service. Access to training, managerial support and clinical supervision was good.
- 2.46** Policies and contingency arrangements were in place for the prevention and management of communicable diseases. In addition to arrangements to ensure medical confidentiality, a further information-sharing protocol had been developed with HMP Grendon, reflecting the processes adopted by the TCs.
- 2.47** Free-flow movement (allowing prisoners to move about the prison unescorted) enabled prisoners to attend clinics easily. Clinical rooms in the health care centre were appropriately equipped and infection prevention was effective. Health care staff were appropriately trained in life support and emergency equipment that was regularly checked was available. Sufficient prison staff were trained as first aiders and access to external automated defibrillators (AEDs) was good, except on F wing. Ambulances were called promptly in medical emergencies and response times were appropriate. The health interactions we observed were good and clinical records were appropriate.
- 2.48** Written information about health services was available throughout the prison. Health promotion was supported through a 'well-being' approach, which sought to empower patients to maintain good health. The health care centre displayed relevant contemporary health promotion material, and the well-being approach was coordinated with other departments, such as the gym. Systems were in place for identifying and managing communicable diseases through joint working with community specialists. Barrier protection was available from health services staff.
- 2.49** The prison had been smoke free since February 2017 and men were provided with good support to prepare for it. There was some confusion about the options available to new prisoners and some men did not understand the treatment available to them. There also appeared to have been some unmet needs. The head of health care had established a 'post smoke free forum' to outline what additional support prisoners might continue to require.

Recommendation

2.50 F wing should have ready access to an AED.

Delivery of care (physical health)

- 2.51** Health care services were provided seven days a week from 8am to 7pm Monday to Thursday, from 8am to 6.30pm on Friday and between 9.15am and 5pm at weekends. Prisoners' health needs were identified effectively at reception. An appropriate range of services was provided and prisoners requested services by written application. Patient waiting times were short and non-attendance rates were monitored and followed up. External health care appointments were well managed and rarely cancelled.
- 2.52** Daily nurse triage clinics took place for acutely unwell patients and general sickness. In the afternoon, nurse-led clinics monitored those with long-term health conditions. The shortage of permanent nursing staff had limited the number of clinics that could be provided and affected the quality of care planning. However, this was offset by responsive joint working between regular GPs and nurses and the involvement of patients in decision-making, which were evident in clinical records and we saw examples of effective care.
- 2.53** Prisoners had good access to GP support and clinics were available three times a week as well as an additional clinic every two weeks alternating between HMP Grendon and HMP Spring Hill. Extra GP appointments were provided at times of peak demand. Out-of-hours' services were provided by NHS 111 emergency services. Access to external hospital appointments was adequate.

Pharmacy

- 2.54** Sigma Pharmacy dispensed individually labelled medicines and an agreed formulary (medications used to inform prescribing) was used. New prescriptions were generally available on the following day, although urgent prescriptions could be obtained on the same day if required. Medicines, including controlled drugs, were moved and stored securely but unused medicines were not reconciled or disposed of in line with the agreed operating policy, which meant they risked not being appropriately accounted for. There was a range of standard operating policies but they needed updating. The in-possession policy was inadequate because it offered little guidance to prescribers and professionals administering medicines.
- 2.55** Only general sales list medications were held in stock and there was a reasonable range of patient group directions, enabling nurses to offer simple medication for some common conditions. Medicines were administered three times a day at 8.15am, 12.30pm and 5.30pm from a central point in the health care department. There were a small number of supervised treatments. Controlled drugs were administered mainly in the morning when prison staff were present, and there was no significant evidence that the trading of prescribed drugs was a concern.
- 2.56** Administration took place where a degree of confidentiality was provided. However, several potentially tradable drugs were prescribed and prisoners did on occasion need to pass through the area to go to the reception. In addition, officers did not supervise the evening administration round, which created unnecessary risks although there was very little evidence that prescribed drugs were being misused.

- 2.57** Most prisoners received medication in possession and were subject to a risk assessment. However, the risk assessment did not reflect patient or drug concerns.
- 2.58** Checks were in place – room and fridge temperatures were appropriately monitored. There was no dedicated pharmacy team and most duties were undertaken by nurses, which meant there was no specialist local monitoring of medicine management practice and patients did not receive any advice. However, prescribing practice was reported as part of Care UK's clinical governance arrangements. Managers had discovered some compliance issues, but they did not check for them systematically.

Recommendations

- 2.59** **The in-possession policy and in-possession risk assessment arrangements should be updated to ensure they provide prescribers and nurses administering medication with current guidance.**
- 2.60** **Medicine queues should be managed to ensure consistent patient confidentiality, and prison staff should supervise all medication administration.**
- 2.61** **Pharmacy advice and support should be routinely available to patients and specialist oversight of medicine management arrangements should be provided.**

Dentistry

- 2.62** A full range of NHS-equivalent dental services was available through twice-weekly dental sessions. Access to emergency treatment was appropriate. A good range of oral health advice and information was provided. Dental records included patient treatment plans, updated medical histories and consent. Prisoners were complimentary about the standard of care and treatment offered.
- 2.63** Dental facilities included an equipped surgery and a separate decontamination area. Infection control audits were completed every six months, however not all dentistry equipment was monitored or maintained appropriately.
- 2.64** During the inspection, we found equipment faults that posed a risk to the safety and effectiveness of the service. However, action was ongoing to ensure dental equipment was being operated safely.

Recommendation

- 2.65** **Effective governance processes should be developed to monitor the quality and safety of dental services and all dental equipment should comply with infection prevention standards. Procedures should not compromise patient safety.**

Delivery of care (mental health)

- 2.66** A dedicated primary care nurse acted as the first point of contact for referrals. The practitioner had 32 patients on their caseload and there was a short three-week wait for an assessment. Counselling and person-centred support were the main interventions used, although some men had received support for over 18 months and it was unclear how the service's effectiveness was evaluated.

- 2.67** Secondary mental health services were delivered using a stepped care approach (mental health services that address low level anxiety and depression through to severe and enduring needs). The selection criteria for Grendon meant that few men experienced acute mental ill-health and most work was designed to enable men to participate effectively with wing-based therapy. Services were delivered by a small team of nurses who also covered HMP Spring Hill, supported by sessional input from a psychiatrist. Interventions focused on creating coping strategies using supported self-help and individual psychosocial support. In addition, dedicated staff were integrated into the TCs, a nurse supported the induction wing and a learning disability nurse provided specialist support on F wing. These roles had been successful and further such joint appointments were planned.
- 2.68** A total of 22 prisoners were receiving support, of whom seven were managed under the care programme approach (CPA) (mental health services for individuals diagnosed with a mental illness). Many of the men under the CPA did not meet the usual threshold of complexity arising from severe and enduring ill-health, but support was appropriate and the cross-over of work between the secondary and primary health teams was flexible and clear partnership working took place. A multidisciplinary clinical team meeting reviewed all referrals and determined caseload allocations. In addition, a multi-agency meeting led by wing therapy staff ensured that communication and oversight of mental health was effective and in line with information-sharing protocols agreed by prisoners. We judged the provision to be good with no evidence of unmet needs, but dedicated psychology input would have enhanced the service.
- 2.69** Prisoners placed on an ACCT, triggered an initial review and input from mental health services. Two prisoners had been accepted as requiring hospital treatment under the Mental Health Act in the previous 12 months, both of whom had waited excessive periods prior to transfer, although support at the prison had been good. Prison staff received bespoke mental health training, which supported their contribution to the TCs.

Recommendation

- 2.70** **Prisoners requiring treatment in hospital under the Mental Health Act should be transferred within established NHS guidelines.**

Social care

- 2.71** A health care assistant took the lead on supporting older prisoners. Health care staff we spoke to knew how to make an adult safeguarding referral. Arrangements to support men with social care needs had been established with the local authority, but none of the men had required a formal care package. Disabled prisoners could access specialist advice and equipment where necessary and F wing provided specific therapeutic services for men with significant learning disabilities.

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.

- 2.72** In our survey 93% of men, against a comparator of 29%, said the food was good or very good. Prepared food was brought down from the main kitchen each day and cooked in wing kitchens known as 'pods'. It seemed likely that cooking the food onsite contributed to men's positive perceptions of the food, as the daily budget was the same as in most other prisons.
- 2.73** Elected menu representatives in each community collated weekly menu choices. Menus were varied, healthy options were available and different dietary requirements were appropriately catered for. Breakfast packs were issued on the morning they were to be eaten, except at weekends when they were handed out the night before. However, we observed some evening meals being served before 5pm, which was too early. The kitchen supplied speciality meals when cultural and religious festivals were celebrated.
- 2.74** Men could cook their own food in microwaves and toasters and on stand-alone grills and had access to fridges, which were on each wing. Prisoners could use the facilities all day long when they were unlocked. Men could eat together at every meal time.
- 2.75** The main kitchen and wing pods were clean and well equipped. Each wing employed pod workers who received training and wore appropriate protective clothing.
- 2.76** Consultation arrangements were good. Each wing had a food comment book, which was reviewed by catering staff. The catering manager attended inter-wing meetings. Regular food surveys were completed and analysed and relevant action taken.

Recommendation

- 2.77 Meals should not be served before 12 noon and 5pm during the week.** (Repeated recommendation 2.93)

Good practice

- 2.78** *Wing pods ensured the food provided was fresh and hot and men were involved in its preparation on the wings, a significant factor in the overwhelmingly positive view of the food provided.*

Purchases

Expected outcomes:

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

- 2.79** In our survey, prisoners were more negative than the comparator and compared with our previous inspection about the range of goods available. However, in the week before our inspection, a longer product list was introduced and men told us they were broadly content with the new arrangements. The introduction of the new list had been delayed, which meant there had been a period when prisoners had not been able to influence the contents of the

list through the usual consultation arrangements. The process for distributing canteen orders, which was largely prisoner-led, and for correcting any errors was good.

- 2.80** A wide range of catalogues was available, but some orders, particularly those processed by the canteen provider often took a long time, and prisoners still had to pay a handling fee for each order. Prisoners could order newspapers and magazines.

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.⁶

- 3.1** In a therapeutic community (TC), time out of cell is fundamental to the whole approach because interactions between prisoners and their peers and with staff helped to build community, challenge behaviour and support change. At Grendon, weekday time out of cell had improved since our previous inspection and exceeded our expectations at 11.5 hours for most and 9.5 hours for men not in therapy. Time out of cell of 7.75 hours at weekends was reasonable.
- 3.2** The provision of therapy was the primary function of the regime (see paragraph 4.41) and other activities, including education and work, were secondary. At Grendon, the whole regime was purposeful. Prisoners and staff spent much time involved in conversation, both formal and informal, and staff used a therapeutic approach with prisoners (see paragraph 2.11) which meant there was a near-constant focus on supporting change.
- 3.3** Prisoners were encouraged to get involved in a wide variety of activities. Most of the formal therapy took place in the morning. In the afternoon, men took part in activities. The community also allocated each man a wing representative job, through which he contributed to the TC and developed skills such as taking responsibility, listening, supporting others or taking the lead. For example, the gym 'rep' maintained attendance lists and notice boards, while the wing chairman led regular wing meetings.
- 3.4** The regime also offered many extracurricular activities, mostly during the evenings to ensure life inside Grendon reflected normal community life as much as possible. They included regular visiting speakers, discussion forums and wing competitions, as well as chaplaincy groups and gym and library activities. An artist in residence provided prisoners with support so they could express themselves and the work they produced was exhibited. Many prisoners used their time in their cell constructively. Some men cared for budgerigars, others completed craft activities, and a significant number pursued higher education qualifications. (See also paragraph 4.44.)
- 3.5** Wing association rooms were spacious and well equipped with pool tables and other table games. The exercise yard used by the main wings was large, had a pleasant outlook and was available for use every day. G wing prisoners used a separate small, but attractive, yard during the week and could only use the main yard at weekends. The prison had begun to offer an additional summer exercise period on the grassed areas in between the wings during the evenings, but it was often cancelled because of staff shortages.

Good practice

- 3.6** *The wide range of extracurricular activities at Grendon helped make the prison environment as much like normal community life as possible.*

⁶ 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.

3.7 Ofsted⁷ made the following assessments about the learning and skills and work provision:

Overall effectiveness of learning and skills and work: Good

Achievements of prisoners engaged in learning and skills and work: Good

Quality of learning and skills and work provision, including the quality of teaching, training, learning and assessment: Good

Personal development and behaviour: Good

Leadership and management of learning and skills and work: Good

Management of learning and skills and work

3.8 Good partnership working with higher education institutions supported prisoners to succeed. For example, Oxford Brookes University students provided learners with useful mentoring support.

3.9 The quality of the education and training provision provided by Milton Keynes College was good. College managers had taken decisive action to limit the impact on learners of staff vacancies while newly recruited tutors awaited security clearance. The college made good use of assessment through direct observation to improve the quality of taught sessions. The prison's quality assurance process for practical and theory training in physical education (PE) required improvement.

3.10 The prison's governance board monitored the provision's development and quality effectively. Managers had addressed most of the previous inspection's recommendations, for example, they had reintroduced National Careers Service (NCS) advice during induction and on application. The board made appropriate use of data for performance management purposes.

3.11 The self-assessment process was suitably thorough and evaluative. However, managers did not sufficiently reflect prisoners' experiences of work or of the NCS to inform a comprehensive action plan for improvement.

⁷ 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>.

Recommendation

3.12 The self-assessment process should cover work and the NCS.

Good practice

3.13 *The prison and its partners had engaged with several universities, which were providing a range of creative initiatives at the prison to the benefit of the men held.*

Provision of activities

3.14 There were 215 full-time purposeful activity places, sufficient for the population. Prisoners followed a therapy programme in the morning, with education, training and work in afternoons on Monday to Thursday. The range and breadth of education and work was adequate but vocational training was underdeveloped.

3.15 A recently revised allocations process had been introduced to encourage wing communities to take more responsibility for ensuring that education and off-the-wing work places were well used. The process was fair but it was too early to make a full evaluation of its impact. Pay rates were low and provided only limited incentive for prisoners to participate. They did not encourage prisoners to participate. Prisoners received an appropriate induction to the prison's purposeful activity provision.

3.16 During our inspection, 54 learners attended education classes that included English and maths at entry level to level 2 and information and communication technology (ICT) and business studies at levels 1 and 2. Personal and social development courses included basic food preparation and cookery, and peer mentoring. Vocational training was limited to 16 places in horticulture and industrial cleaning.

3.17 There were 144 full-time-equivalent work places in prison areas such as the gardens, chaplaincy, kitchen, education, gym and laundry. Much of the work was mundane but usually appropriate. None of the work activities offered accredited training.

3.18 During the inspection, 19 prisoners were studying Open University programmes and six distance-learning courses.

Recommendation

3.19 Work should be structured so it provides prisoners with the opportunity to acquire enhanced skills and knowledge and gain accredited qualifications.

Quality of provision

3.20 The quality of teaching, coaching, learning and assessment was good. The college appropriately established learners' starting points, before they started their programme. Tutors used the assessments to devise well-considered programmes to help meet learners' needs and aspirations.

3.21 Tutors in education sessions used engaging activities to help learners appreciate the importance of English and maths in wider contexts. Learners actively participated in taught sessions. For example, they used interactive white boards to show their peers how they had

solved problems using mathematical formulae. In ICT classes, learners made good progress in developing their skills and confidence in word processing and spreadsheets. Most were working towards qualifications at level 2, with a good number studying at Open University degree and masters levels.

- 3.22** In education, learners reflected well on their progress highlighting on white boards what they had learned and liked about their classes that day. Tutors added useful comments to encourage them to apply what they had learned. Prisoners received helpful assistance to enhance the standard of their written English, although it was less consistently effective in vocational training and work activities.
- 3.23** Learners benefited from good support from mentors, university student volunteers and college staff. In a small minority of lessons, the high level of support available meant prisoners were slower to develop independent problem-solving skills. Tutors did not always challenge sufficiently learners with higher abilities by providing more complex or demanding tasks.
- 3.24** Tutors used skills development logs effectively so that the development of learning champions, orderlies and mentors could be tracked. In vocational training, tutors made sound use of the daily work record to ensure that learners were clear about what they had learned during each session. Tutors provided detailed written feedback that promoted men's progress. However, a few learners' progress was inhibited as tutors did not make full use of individual records to identify the knowledge and skills men needed to improve further.

Recommendations

- 3.25** **Staff should ensure all learners receive appropriate feedback to help them improve their written English and vocational competence.**
- 3.26** **Tutors should provide learners with challenging activities so they can attain their full potential and take responsibility for their own learning. Progress should be recognised and recorded.**

Personal development and behaviour

- 3.27** The overall culture in learning, skills and work was cooperative and supportive. Tutors challenged the few instances of poor attitude and behaviour effectively. Prisoners' made good progress in developing their personal, social and employability skills in taught sessions.
- 3.28** Across vocational training and work, prisoners developed appropriate or better personal and employability skills, such as team working, speaking and listening. Prisoners described how participating in activities helped improve their general well-being.
- 3.29** Men gained a good understanding of external employment opportunities in horticulture that motivated them to succeed. Inspectors observed how health and safety was promoted well, ensuring learners routinely minimised risks, for example, by wearing personal protective equipment when carrying out practical tasks.
- 3.30** Punctuality was good in most taught sessions. Overall, attendance rates were generally good, although they were sometimes erratic because of the demands of the therapeutic regime. A few education classes had a small number of participants, which undermined learning strategies. Guidance on prisoners' next steps was insufficient, particularly for a small minority of learners studying for higher education qualifications through the Open University.

Recommendation

- 3.31** All prisoners should receive guidance to help them make decisions about their next steps, including higher education study options.

Education and vocational achievements

- 3.32** Achievement rates for accredited education and vocational qualifications were high for most learners who completed their courses. The large majority of learners were making expected or better progress. Learners could usually identify clearly the progress they had made since starting their studies. On the rare occasion when prisoners did not stay on the course, college managers worked effectively to re-engage them.
- 3.33** Learners developed good skills and knowledge in English, maths and ICT classes. Those in maths classes understood how to apply concepts to solve problems in a vocational context.
- 3.34** Standards of written and practical work in education, vocational training and work were generally high. Prisoners took pride in their achievements. Those following horticulture, cleaning and catering courses developed skills that met industry requirements. For example, in cleaning prisoners had a good appreciation of how current legislation applied to safe working practices and hazardous incidents reporting procedures.
- 3.35** Work undertaken both on and off the wings was not always planned sufficiently well to ensure prisoners could acquire broader or higher level skills and knowledge. Arrangements for recognising and recording prisoners' work and personal skills development were in place, but had not been implemented.

Library

- 3.36** The library was run by a library manager supported by one full-time and four part-time prisoner orderlies. Prisoners had good access to the library, which was open for day and evening sessions four days a week, with a lunchtime session for reading groups on Fridays and on alternate Saturdays.
- 3.37** The library was well stocked and offered a good variety of magazines and fiction and non-fiction books. An appropriate variety of resources in languages other than English was available. Large print texts and books to meet the needs of the full range of reading abilities were offered. In addition, appropriate legal texts, Prison Service instructions and a good supply of talking books, music CDs and film DVDs were available.
- 3.38** Reading groups were used well to promote literacy. Prisoners with low reading levels studied short texts, film reviews and games, and discussed the meanings of phrases and different perspectives. Higher-level readers explored the philosophical and cultural aspects of popular novels. An appropriate number of trained mentors helped prisoners improve their reading. Staff from Roehampton University provided books and ran popular groups for less confident readers.
- 3.39** Staff did not monitor library use by wing or type of prisoner and therefore could not evaluate whether it was meeting everyone's needs.

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.

- 3.40** There was a good range of well-maintained indoor PE facilities, including a sports hall and a separate fitness suite. However, the outdoor sports facility had been out of use for some time, limiting the range of activities available. Prisoners participated in a comprehensive programme, which included sessions targeted at the needs of some specific groups. However, managers had not completed a prisoner survey to ensure that all men's needs were met.
- 3.41** Access to PE was good. In our survey 49% of prisoners said they used the gym at least three times a week, more than the comparator and compared with the previous inspection. Managers had set a new target of 2.5 hours per week per prisoner, which was now being achieved.
- 3.42** Links with the health care department were excellent and included 'exercise on prescription' referrals. During the six months prior to our inspection, PE staff had supported the prison's transition to a 'no smoking' environment by running smoking cessation sessions. (See also paragraph 2.49.)
- 3.43** Feedback from prisoners who used the facilities indicated a high satisfaction rate with the level of support received from staff. Prisoners had a thorough induction to the gym, which included health and safety information. Staff levels were appropriate. All PE staff were suitably qualified and experienced.
- 3.44** The prison offered three accredited courses, which included understanding nutrition, performance and healthy eating. Achievement rates were generally high.
- 3.45** Prisoners could obtain a clean PE kit for their personal use and used wing-based shower facilities after using 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 Prisoners and staff understood Grendon's role in rehabilitation and reducing risks. Men received regular assessments through six-monthly therapy progress reviews and their needs and targets were updated frequently. In our survey, 87% of men told us they had done something at Grendon that made them less likely to reoffend in the future, against the comparator of 57%.
- 4.2 Grendon shared most of the senior management team with HMP Spring Hill and a joint reducing reoffending policy focused more on the work there. Although it outlined the resettlement pathways, it did not focus on progressive routes from Grendon. The reducing reoffending team met monthly and included Grendon staff, so there were opportunities to share information and services between the two prisons.
- 4.3 At our last inspection, Grendon had been under pressure to ensure there were enough candidates for therapy to fill spaces and faced some challenges moving men on appropriately following therapy. Significant efforts and progress had been made in both these areas. The prison roll had increased and the time men spent waiting for transfers post-therapy had decreased (see paragraph 4.25). Grendon had become more integrated into the prison system and better at building links with other prisons.
- 4.4 The NHS national strategy for offenders with personality disorders had been implemented and now partly provided funding for F and G wings. As a result, referral routes for men in this group were clearer than at our previous inspection, as Grendon was part of a network of services across the country. Links with NHS commissioners were good and managed through a two-monthly meeting. The strategy also funded outreach work, coordinated by a custodial manager, which aimed to contact prisons referring men to Grendon to ensure applicants understood the service.
- 4.5 During the inspection, release on temporary licence was not being used. National policy meant that men on indeterminate sentences, most of the population, were not eligible.
- 4.6 Grendon staff were involved in a wide range of research, including a collaboration with Birmingham City University, looking at the impact of the prison's work on social and emotional well-being and predicted reconviction rates.

Offender management and planning

Expected outcomes:

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

- 4.7** Offender management work was good overall. Teamwork was strong and support and supervision arrangements for the offender management team had improved since our last inspection. Offender supervisors were knowledgeable and experienced. A senior probation officer was based jointly at Grendon and Spring Hill prisons. She provided seconded probation staff with good supervision. Uniformed offender supervisors also received good supervision as well as emotional support on request. Case administrators worked with specific offender supervisors and supported the service well. There were monthly offender management meetings.
- 4.8** Offender supervisors were allocated to wings and caseloads were generally reasonable. This meant men could see them regularly. In our survey, 89% of men said they had a named offender supervisor and most men had meaningful and positive contact with them. Some contact was spontaneous and informal and not all contact was recorded formally. Offender supervisors ran regular information sessions for prisoners so they could raise queries and find out more about the resettlement process. For example, during our inspection, there was a session about the sex offender register and licence conditions.
- 4.9** Each wing had an offender management representative, a prisoner who liaised between the offender management unit (OMU) and the other men. The system was not embedded and more clarity was needed about the role for it to be effective.
- 4.10** In the cases we examined, analysis and risk management were generally good. All men had a full analysis of their risk of harm, which was timely and sufficient in most cases. Plans to manage men's risk of harm to others were good and addressed the custodial and community periods of the sentence. The overwhelming majority of offender assessment system (OASys) reviews had been completed within the previous three years, in line with national policy.
- 4.11** As part of the six-monthly therapy review, prisoners worked with staff to complete an assessment of their progress and needs. This fed into the annual sentence planning process. Sentence planning was excellent. Plans were detailed, comprehensive and involved men well. All men had a planning meeting and the targets set were appropriate, individual and achievable. Men understood their targets and were motivated to work with staff to change their behaviour. There was good evidence that progress was being made and that outcomes for men were positive. In our survey, 86% of men told us they could achieve their sentence plan targets in Grendon against the comparator of 63%.
- 4.12** Although not all men had regular contact with their offender manager in the community, contact was better than we would have expected. In our survey, 99% of men said they had a named offender manager in the community against the comparator of 86% and over half said their offender manager was working with them to achieve their sentence plan targets. Some men told us their offender manager had suggested they apply to Grendon.

Good practice

- 4.13** *Regular information sessions for prisoners enabled men to raise queries and gain a better understanding of the resettlement process.*

Public protection

- 4.14** Prisoners were screened on arrival and case administrators flagged up any public protection concerns for offender supervisors to assess. Offender supervisors then met new prisoners to discuss the issue and inform them of any restrictions. The offender management team compiled lists of men they were concerned about or who were being monitored, and disseminated the information to relevant staff. During the inspection, two men were being monitored; they had been informed of the restrictions in writing and had met with their offender supervisors to discuss them.
- 4.15** The monthly inter-departmental risk management meeting was usually only attended by security and offender management staff. However, minutes and decisions were disseminated to all relevant departments. The meeting appropriately reviewed prisoners who were subject to multi-agency public protection arrangements (MAPPA) at level 2 (where the active involvement of one or more agency is required) and level 3 (which covers prisoners on the highest risk level). They also reviewed those whose behaviour was a concern, or those under protection from harassment orders or subject to mail monitoring. Information about the different levels of supervision for visits was shared appropriately.
- 4.16** There was evidence of good contact between offender supervisors and offender managers both during a prisoner's sentence and prior to release. The few men with planned releases had their MAPPA levels confirmed in good time.

Categorisation

- 4.17** Categorisation review processes took place on time in accordance with national policy and were dovetailed with the sentence planning process. Men discussed their progress with their group prior to the categorisation review to ask for feedback. Decisions were justifiable and based on a good range of information. The approach to categorisation was proportionate and not risk averse. Over half of the men at Grendon were assessed as having made sufficient progress in reducing their risks to have been re-categorised to category C.
- 4.18** Many indeterminate sentence men had been nominally re-categorised as suitable for open conditions, but the recommendations needed to be approved by the parole board. In the six months prior to our inspection, 12 men had moved to lower category prisons.

Indeterminate sentence prisoners

- 4.19** Nearly three quarters of the population was serving an indeterminate sentence. Their needs were understood well and most felt they could make progress at Grendon. The therapeutic approach and full regime promoted self-reliance and independence, and sought to minimise the risk of institutionalisation.
- 4.20** Parole processes at the prison were good. Deadlines were met and reports for dossiers were completed on time (although see paragraph 4.26). Men usually opted out of deferred parole during the therapeutic process. Support for men attending parole hearings, usually seeking approval for open conditions, was very good.
- 4.21** Four prisoners in the therapeutic community 'plus' unit, serving indeterminate sentences for public protection, had had their application for a progressive move rejected at least twice at a parole hearing and were deemed to be 'stuck'. This had been identified by HM Prison and Probation Service and full case reviews were being carried out to try and overcome their barriers to progression.

Progression 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.

- 4.22** Grendon had a uniquely supportive environment and the process of moving on through the prison system could be difficult. The prison was beginning to build links across the estate to support those who had completed therapy at Grendon more effectively. For example, former Grendon prisoners at HMP Leyhill could attend a monthly support group run by a Leyhill psychologist, who was supervised by a therapist from Grendon. In addition, the Friends of Grendon, a charity, had funding to provide support to those moving on.
- 4.23** Prisoners in their first year at Grendon who chose to leave or who were not suitable for therapy could go back to their sending prison. The process was managed appropriately. Men received a written explanation for their return and were encouraged to consider applying to Grendon within six months.
- 4.24** Men could be out of therapy for several reasons, including having completed therapy, having been deselected or choosing to leave. Irrespective of the reasons, they were still expected to participate in the wing meeting and to be part of the community while at Grendon. At the last inspection, we found that some men who were out of therapy no longer had access to work opportunities. At the inspection, we found one wing was still operating this policy, but this was rectified during our visit.
- 4.25** The weekly population management meeting considered men who were out of therapy and aimed to move them on to appropriate locations. The transfer process at Grendon was challenging because many men needed to progress to specialist provision, such as a psychologically informed planned environment, a prison offering a specific course, or a lower category prison in their home area, which could be anywhere in the country. Once a place had been secured in another establishment it could be difficult to arrange a transfer. At our last inspection, waiting times were too long, but most men now obtained a transfer within a reasonable period. However, two men had been waiting for seven months.
- 4.26** End-of-therapy reports should have been completed within three months of men leaving Grendon, but during our inspection, 24 were outstanding. The prison had an action plan to reduce the backlog.
- 4.27** Grendon was not a resettlement prison and had no dedicated resettlement service. The few men released (three in the six months prior to our inspection) received individual support from their offender supervisors. Men could also raise issues about practical matters in their therapy groups and receive assistance and advice from staff and their peers. Resettlement plans focused on building support networks and positive relationships alongside managing risks and meeting practical resettlement needs. Resettlement planning followed on seamlessly from the sentence planning process and both men and community offender managers were effectively involved.
- 4.28** In our survey, prisoners' awareness of who could help with resettlement matters was better than in comparator prisons and particularly positive about assistance with drug and alcohol problems. Most men were released to approved premises and no one had been released without an address. Some men had received help to open bank accounts and good resources in the library helped men develop money management skills or supported them to start a business. Prisoners could also make an appointment with Jobcentre Plus advisers.

- 4.29** The health primary care team could support the very small number of prisoners directly discharged from Grendon by providing information, helping with GP registration and issuing a supply of medication or prescriptions. The specialist mental health team worked appropriately with the OMU and community networks supported prisoners with ongoing needs before their release or transfer to other prisons.
- 4.30** Substance misuse practitioners worked closely with the offender management team and a range of external stakeholders from across the country to ensure appropriate ongoing care and support was arranged for the small number of men who were released directly from Grendon.

Good practice

- 4.31** *Former Grendon prisoners who were at HMP Leyhill could attend a monthly support group run by a psychologist, which helped ease the transition from therapy into open conditions.*

Children, families and contact with the outside world

- 4.32** Support for prisoners to maintain contact and build relationships with their families was excellent and designed to support therapeutic processes. The social visits provision met men's needs and booking arrangements were effective.
- 4.33** All prisoners could have at least four visits every month. The visitors' centre outside the gate was modern and comfortable and had some helpful information for visitors. There was a children's play area and a pleasant outdoor space. An enthusiastic full-time visits coordinator ran the centre and attended during visiting times to offer families advice and support. As at the last inspection, she also ran a fortnightly family support group, which helped visitors resolve matters and build positive relationships. Visitors were booked in promptly and visits usually started and finished on time. Searches carried out on visitors were generally proportionate, but it seemed excessive to routinely rub-down search small children, however sensitively it was done.
- 4.34** The main visits room was very pleasant, if somewhat small. Furnishings were comfortable and in good condition and the well-equipped children's play area was clean and well decorated. There was also a garden with picnic tables and chairs. Prisoners did not have to wear any identification except their name badge. Except for those subject to child protection arrangements, men could move around freely, play with their children in the play area or sit in the garden. They could visit the tea bar with their visitors and buy refreshments in advance using their own money. Relationships between visits staff and visitors were very good. All the visitors we spoke to said staff were helpful and polite.
- 4.35** Each community also held two family days a year when prisoners could invite two adult family members to visit the wing, see their cell, meet staff and share a meal. The family day we attended on A wing was excellent and gave them first-hand insight into the therapeutic community (TC). Family members could occasionally attend therapy sessions to discuss a specific issue. In addition, prisoner representatives from each community organised an annual 'visit with a difference', designed to enable families to gain a wider understanding of Grendon.
- 4.36** There were also three children's visits a year attended by parents, carers and children, open to all prisoners. The visits provided lunch and a full day of activities, including games and stories. Prisoners could receive help from within their community to help them manage family issues. When appropriate therapeutic support visits could be arranged, which involved

the prisoner's personal officer and therapist attending to assist a prisoner who was trying to re-establish family contact or who needed help with a complicated issue.

Recommendation

4.37 Children should not be routinely rub-down searched.

Good practice

4.38 *Family days enabled family members to meet staff, see how their loved one lived and gain first hand insight into the TC.*

4.39 *The annual 'visit with a difference' enabled families to gain a wider understanding of the aims and objectives of Grendon.*

4.40 *Therapeutic support visits allowed prisoners' personal officer and therapist to provide men with support if they were trying to re-establish family contact or needed help with a complicated issue.*

Attitudes, thinking and behaviour

4.41 The focus and purpose of the prison was understanding the underlying reasons for offending and changing attitudes and behaviour. The therapeutic processes were designed to support and challenge prisoners effectively and safely.

4.42 In the main therapeutic units, men attended wing-based therapy sessions with staff and peers three times a week. There were also twice-weekly wing community meetings where tensions or issues were dealt with democratically. In the meetings, staff were as open to being challenged as prisoners. Ultimately, men could be voted out of the community, although staff had the final say (see also paragraph 2.11). There was also a weekly business meeting during which men were assigned roles that contributed to the life of the community and promoted personal development (see also paragraph 2.12). Each wing had its own constitution agreed by prisoners and staff.

4.43 The TCs were accredited by the Community of Communities (a quality improvement and accreditation programme for TCs) and received annual assessments, which led to action plans and service improvements. Continuation and completion rates were higher than predicted targets. Facilities and resources for therapy were sufficient but there had been a shortage of staff on one wing.

4.44 Creative therapies were available for men who had made sufficient progress. Psycho-drama and art therapy were available weekly and prisoners on F wing could also participate in music therapy. Most men were expected to participate in one of these activities while they were at Grendon. The sessions offered men an opportunity to explore difficult experiences from their past and supported them to manage their emotions. The work undertaken during creative therapy sessions was discussed during wing group therapy. (See also paragraph 3.4.)

4.45 Victim awareness work was an integral part of the therapeutic process and there were frequent discussions to promote understanding and empathy. Formal restorative justice work was developing well and the governor was the national lead for the Prison Service in this area. A joint project with the Thames Valley Partnership enabled prisoners to initiate restorative justice work themselves. The prison had run a Restorative Justice Day, organised by the men. It also had good links with the Chris Donovan Trust, a charity that raises

awareness of the experience of being a victim of crime. In addition, offender managers in the community had run case conferences when victims wished to be involved.

- 4.46** The prison had developed an innovative and effective gang intervention programme. It had been running for two years but funding was currently uncertain. The programme supported participants to reframe their beliefs and values and build a positive personal narrative. Participation and attendance during sessions had been 100% and participants had created a DVD that could be used at other prisons.

Additional resettlement services

- 4.47** Data from group sessions showed that 40% of prisoners had experienced sexual abuse as children. The group therapy process addressed trauma by creating a safe space so men could share experiences and develop attachment and coping skills. The prison was also working with HM Prison and Probation Service to look at ways of supporting men in other prisons who had disclosed abuse.

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.

Recommendations

Courts, escort and transfers

- 5.1** Prisoners should not be kept waiting in vans on arrival. (1.2)

Self-harm and suicide

- 5.2** The prison should ensure that procedures to support prisoners at risk of self-harm at night are robust and well understood by staff. (1.22)

Security

- 5.3** Prisoners should only be strip-searched when there is sufficient intelligence to suggest it is necessary. (1.31)
- 5.4** Hand-cuffing prisoners in the prison grounds should be justified by an individual risk assessment. (1.32)

Residential units

- 5.5** The facilities should be maintained in good condition and any repairs and refurbishment completed promptly. (2.8)

Equality and diversity

- 5.6** The EMT should disaggregate data for HMPs Grendon and Spring Hill. (2.17)
- 5.7** All DIRFs should receive a formal written response explaining how the incident has been investigated and resolved. (2.18)
- 5.8** Managers should routinely monitor the proportion of black and minority ethnic men in the population and their attrition rate from assessment and therapy. (2.28)

Faith and religious activity

- 5.9** The multi-faith room should be extended and provide suitable facilities for Muslim prisoners. (2.36, repeated recommendation 2.33)

Health services

- 5.10** F wing should have ready access to an AED. (2.50)
- 5.11** The in-possession policy and in-possession risk assessment arrangements should be updated to ensure they provide prescribers and nurses administering medication with current guidance. (2.59)
- 5.12** Medicine queues should be managed to ensure consistent patient confidentiality, and prison staff should supervise all medication administration. (2.60)
- 5.13** Pharmacy advice and support should be routinely available to patients and specialist oversight of medicine management arrangements should be provided. (2.61)
- 5.14** Effective governance processes should be developed to monitor the quality and safety of dental services and all dental equipment should comply with infection prevention standards. Procedures should not compromise patient safety. (2.65)
- 5.15** Prisoners requiring treatment in hospital under the Mental Health Act should be transferred within established NHS guidelines. (2.70)

Catering

- 5.16** Meals should not be served before 12 noon and 5pm during the week. (2.77, repeated recommendation 2.93)

Learning and skills and work activities

- 5.17** The self-assessment process should cover work and the NCS. (3.12)
- 5.18** Work should be structured so it provides prisoners with the opportunity to acquire enhanced skills and knowledge and gain accredited qualifications. (3.19)
- 5.19** Staff should ensure all learners receive appropriate feedback to help them improve their written English and vocational competence. (3.25)
- 5.20** Tutors should provide learners with challenging activities so they can attain their full potential and take responsibility for their own learning. Progress should be recognised and recorded. (3.26)
- 5.21** All prisoners should receive guidance to help them make decisions about their next steps, including higher education study options. (3.31)

Progression planning

- 5.22** Children should not be routinely rub-down searched. (4.37)

Examples of good practice

- 5.23** Men were invited to provide their written consent to have their next of kin informed in the event of serious injury or illness, reinforcing the importance of family in the therapeutic process. (1.8)
- 5.24** The harm reduction initiatives developed by peer representatives ensured that prisoners played a prominent role in delivering health promotion messages. (1.45)
- 5.25** The therapeutic process allowed prisoners and staff to reflect on and challenge each other's behaviour, helping to create an atmosphere of mutual respect. (2.13)
- 5.26** PEMs at Grendon had delivered training on unconscious bias to prison staff, which helped them recognise the potential for unintentional discrimination. They also regularly helped to organise external speakers, which promoted awareness of equality issues. (2.19)
- 5.27** Prisoners could invite another prisoner as a guest to celebrate their religious festival and share a meal, which promoted community and an understanding of different religions and traditions. (2.29)
- 5.28** Wing pods ensured the food provided was fresh and hot and men were involved in its preparation on the wings, a significant factor in the overwhelmingly positive view of the food provided. (2.78)
- 5.29** The wide range of extracurricular activities at Grendon helped make the prison environment as much like normal community life as possible. (3.6)
- 5.30** The prison and its partners had engaged with several universities, which were providing a range of creative initiatives at the prison to the benefit of the men held. (3.13)
- 5.31** Regular information sessions for prisoners enabled men to raise queries and gain a better understanding of the resettlement process. (4.13)
- 5.32** Former Grendon prisoners who were at HMP Leyhill could attend a monthly support group run by a psychologist, which helped ease the transition from therapy into open conditions. (4.31)
- 5.33** Family days enabled family members to meet staff, see how their loved one lived and gain first hand insight into the TC. (4.38)
- 5.34** The annual 'visit with a difference' enabled families to gain a wider understanding of the aims and objectives of Grendon. (4.39)
- 5.35** Therapeutic support visits allowed prisoners' personal officer and therapist to provide men with support if they were trying to re-establish family contact or needed help with a complicated issue. (4.40)

Section 6. Appendices

Appendix I: Inspection team

Sean Sullivan	Team leader
Francesca Cooney	Inspector
Jeanette Hall	Inspector
Deri Hughes-Roberts	Inspector
Gordon Riach	Inspector
Caroline Wright	Inspector
Ellis Cowling	Researcher
Helen Ranns	Researcher
Emma Seymour	Researcher
Joe Simmonds	Researcher
Stephen Eley	Health services inspector
Kathleen Byrne	Care Quality Commission inspector
David Baber	Ofsted inspector
Nigel Bragg	Ofsted inspector
Sheena Maberley	Ofsted inspector
Tony Kirk	Offender management inspector
Caroline Nicklin	Offender management inspector

Appendix II: Progress on recommendations from the last report

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

Safety

Prisoners, particularly the most vulnerable, are held safely.

At the last inspection, in 2013, reception, first night and induction arrangements were welcoming and supportive. Safety was regarded as everyone's responsibility and the prison was fundamentally a safe place. However, some underpinning safety processes were underdeveloped and the prison needed to manage changes in the structure of the therapeutic communities carefully. The challenging treatment ethos may have contributed to some prisoners feeling victimised. Care for those vulnerable to self-harm was good. Security was proportionate and formal disciplinary processes were rarely used. Strategic management of substance misuse needed attention. Outcomes for prisoners were good against this healthy prison test.

Main recommendation

Formal safety custody and violence reduction processes should be robust and support the work carried out by the communities to ensure prisoner safety. (S42)

Achieved

Recommendations

Attendance at the safer custody committee should be improved. (1.20)

Not achieved

All staff should be made aware of the protocol for the use of the gated cell. (1.28)

Not achieved

Prisoners should have access 24-hour accesses to peer support, including those who have opted out of therapy and the communities. (1.29)

Not achieved

The establishment should ensure that the MDT programme is adequately resourced to undertake the required level of testing without gaps in provision. (1.38)

Achieved

Prisoners out of therapy should not be demoted to standard simply because they do not attend community groups. (1.43)

Achieved

The drug and alcohol strategy policy should be updated, be based on a needs analysis of the population and contain detailed action plans for both supply and demand reduction; the strategic committee should meet regularly to review progress. (1.55)

Achieved

Respect

Prisoners are treated with respect for their human dignity.

At the last inspection, in 2013, prisoners could keep themselves and their living environment clean, but the night sanitation system whilst still undesirable worked better than elsewhere. Staff-prisoner relationships were excellent. They were mature and had depth and underpinned the good work being done. Diversity was well managed and outcomes for diverse groups were generally equitable, but support for disabled prisoners needed to be improved. Faith provision was generally good, but there continued to be no washing facilities for Muslim prisoners. Complaints were well managed, but most issues were resolved in the groups. There was a limited demand for legal services, although some help was provided. Health services were good. Prisoners were generally happy with the quality of food. Prisoners complained about the cost of items from the prison canteen. Outcomes for prisoners were good against this healthy prison test.

Main recommendation

Prison managers and staff should be aware of the individual needs of men who have disclosed a disability and make all reasonable adjustments to ensure they can maximise the opportunities available through the prison regime. (S43)

Achieved

Recommendations

The central corridor should be clean and well decorated. (2.7)

Achieved

The multi-faith room should be extended and provide suitable facilities for Muslim prisoners. (2.33)

Not achieved (recommendation repeated, 2.36)

Monitoring of complaints should include all the protected characteristics. (2.38)

Achieved

There should be a protocol for information sharing between Care UK and HMP Grendon. (2.56)

Achieved

The prison should carry out an assessment of the risks in the communal areas of the health centre, such as the potential for infection associated with old flooring and ligature points relating to exposed piping. (2.57)

Achieved

The system for gaining consent should be rationalised: all health care providers and the prison should agree on a protocol for sharing relevant confidential medical information with prison departments. (2.58)

Achieved

The process of making written complaints about health care should preserve prisoners' medical confidentiality. (2.59)

Achieved

The prison should make full and complete records of the administration of medicines. This should include records of all occasions where the patient refused medication or failed to attend; issues relating to drug compliance should be followed up where appropriate. (2.72)

Achieved

SOPs should be reviewed; staff should receive appropriate training on SOPs and evidence of this should be documented. (2.73)

Achieved

All pod workers should wear the full required protective clothing. (2.92)

Achieved

Meals should not be served before 12 noon and 5pm during the week. (2.93)

Partially achieved (recommendation repeated, 2.77)

There should be no charge for catalogue orders or individual financial statements. (2.98)

Partially achieved

Purposeful activity

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

At the last inspection, in 2013, time out of cell was good. Therapy was the primary purposeful activity and accounted for a substantial part of the core day. Management of learning and skills was developing, with some advanced plans to improve the timetable. Nevertheless, learning and skills needed to improve to ensure it supported therapy. There were sufficient activity places available, although a substantial number of wing-based workers were under-occupied. Wages were low for prisoners in education and those not in therapy. Observation of teaching and learning needed to improve. Punctuality was now good, although attendance was poor. Access to the virtual campus was insufficient. Achievement levels were improving. The library provided good resources but did not offer prisoners access to IT. The gym was good with some positive training opportunities, but access needed to improve. Outcomes for prisoners were reasonably good against this healthy prison test.

Main recommendation

The essential supporting role that learning and skills had to the main therapeutic work of the prison needed to be fully realised. The quality of teaching and achievements needed to improve and attendance maximised. (S44)

Partially achieved

Recommendations

The prison should establish a virtual campus facility for all prisoners so that they can access careers advice and information and extended learning opportunities. (3.12)

Partially achieved

The connection between initial assessment and individual learning plans should be improved to record prisoners' progress accurately. (3.16)

Partially achieved

A quality monitoring process should be introduced for the work completed by the prisoner learning champions. (3.17)

Achieved

Learning support provided by distance learning prisoners and the work of the learning champions must be quality monitored. (3.24)

Achieved

Individual learning plans should include a clear and accurate record of progress and skills development and documentation should be completed accurately. (3.25)

Achieved

Teaching and training should be delivered in rooms that are free of disruption by the prison regime. (3.26)

Achieved

The prison should use achievement and success data to identify trends to inform improvements. (3.30)

Achieved

Prisoners should be encouraged to take more responsibility for their learning progress. (3.31)

Partially achieved

Prisoners should have access to computers so that they can obtain information to develop general IT skills and support their learning. (3.34)

Achieved

The range of learning materials for those on vocational courses should be improved to enhance prisoners' employability. (3.35)

Achieved

Staffing levels should be established to ensure that the PE programmes can operate fully and consistently. (3.41)

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 2013, strategic management of resettlement was good. The primary aim of the prison was to help reduce risks through treatment, and the prison's therapeutic approach provided prisoners with substantial benefits. Each prisoner had a thorough assessment, with targets set during induction. The offender personality disorder pathway aimed to foster a more coordinated approach but these had not yet been achieved. Offender management processes and support were good, although some reports were delayed. Public protection work was mostly good, but there were concerns regarding communication. Suitable help was provided for the small number of men released, but the main focus of reintegration was for prisoners to move progressively to other prisons. Support for prisoners to maintain contact with their children and families was impressive. Outcomes for prisoners were good against this healthy prison test.

Main recommendation

The offender personality disorder strategy should be fully implemented to ensure prisoners with personality disorders have a coordinated treatment pathway that identifies and assesses needs, refers suitable candidates to the appropriate prison and supports them when they leave therapy or require a progressive move. Continuing research into the effectiveness of therapeutic communities in reducing reoffending should be conducted. (S45)

Achieved

Recommendations

Managerial oversight of the OMU should be clarified and strengthened. In particular, there should be routine management oversight of assessment and sentence planning in high risk of harm cases or those involving child protection issues. (4.11)

Achieved

Prisoners subject to 100% mail and telephone monitoring should be informed of this in writing, and the right prisoners should be monitored. (4.17)

Achieved

All prisoners out of therapy should be transferred to other establishments within an agreed and acceptable timescale and have full-time access to appropriate regime activities while they wait. (4.26)

Partially achieved

Prisoners should be able to exchange unused statutory visiting orders for telephone credit. (4.40)

Achieved

Prisoners on the standard regime or subject to certain community sanctions should not be excluded from children's visits. (4.41)

Achieved

Small children should not be searched and prisoners should not be strip-searched unless specific intelligence suggests this is necessary. (4.42)

Not achieved

Appendix III: Care Quality Commission Requirement Notice



Requirement Notices

Provider: Care UK Clinical Services Limited

Location: HMP Grendon & Springhill

Location ID: 1-125719975

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

Action we have told the provider to take

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

Regulation 17 Good governance

17(2)(b) assess, monitor and mitigate the risks relating to the health, safety and welfare of service users and others who may be at risk which arise from the carrying on of the regulated activity;
17 (2)(e) seek and act on feedback from relevant persons and other persons on the services provided in the carrying on of the regulated activity, for the purposes of continually evaluating and improving such services;

How the regulation was not being met:

- We found that local governance systems in respect of dental services at HMP Grendon were not effective in identifying risks and responding to and mitigating risks in a timely manner. Systems and processes to identify and assess risks to the health, safety and/or welfare of people who use the service were not fully effective. Informal arrangements were relied on too much and there was a lack of clear accountability for managing risks to patients.
- Care UK is the main contractor for health care services within HMP Grendon with dental services subcontracted to another provider. Communication between the two providers was not effective despite systems and processes being in place. The provider did not ensure that important information was always shared to ensure the safety of people who used the service.
- During the inspection we were made aware of several faults with dental

equipment which had the potential to pose a risk to the safety and effectiveness of the service and patients. Whilst these issues were known to the provider as early as July 2016, they had failed to undertake sufficient measures to assess, reduce or remove the risks to people using the service within an appropriate timescale.

Appendix IV: 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	0	201	95%
Recall	0	10	5%
Convicted unsentenced	0	0	0
Remand	0	0	0
Civil prisoners	0	0	0
Detainees	0	0	0
Total	0	211	100%

Sentence	18–20 yr olds	21 and over	%
Unsentenced	0	0	0
Less than 6 months	0	0	0
6 months to less than 12 months	0	0	0
12 months to less than 2 years	0	0	0
2 years to less than 4 years	0	0	0
4 years to less than 10 years	0	27	12.8%
10 years and over (not life)	0	34	16.1%
ISPP (indeterminate sentence for public protection)	0	111	52%
Life	0	39	18.5%
Total	0	211	100%

Age	Number of prisoners	%
Please state minimum age here: 22		
Under 21 years	0	0
21 years to 29 years	31	14.7%
30 years to 39 years	76	36%
40 years to 49 years	58	27.5%
50 years to 59 years	38	18%
60 years to 69 years	7	3.3%
70 plus years	1	0.5%
Please state maximum age here: 70		
Total	211	100

Nationality	18–20 yr olds	21 and over	%
British	0	204	96.7%
Foreign nationals	0	7	3.3%
Total	0	211	100

Security category	18–20 yr olds	21 and over	%
Category B	0	88	41.7%
Category C	0	120	56.9%
Category D	0	3	1.4%
Other	0	0	0
Total	0	211	100%

Ethnicity	18–20 yr olds	21 and over	%
White	0	175	82.9%
British	0	166	78.7%
Irish	0	2	0.9%
Gypsy/Irish Traveller	0	4	1.9%
Other white	0	3	1.4%
Mixed	0	5	2.4%
White and black Caribbean	0	3	1.4%
White and black African	0	0	0%
White and Asian	0	1	0.5%
Other mixed	0	1	0.5%
Asian or Asian British	0	6	2.8%
Indian	0		0%
Pakistani	0	4	1.9%
Bangladeshi	0		0%
Chinese	0		0%
Other Asian	0	2	0.9%
Black or black British	0	24	11.4%
Caribbean	0	14	6.6%
African	0	5	2.4%
Other black	0	5	2.4%
Other ethnic group	0	1	0.5%
Arab	0	0	0%
Other ethnic group	0	1	0.5%
Not stated	0	0	0%
Total	0	0	100%

Religion	18–20 yr olds	21 and over	%
Baptist	0	1	0.5%
Church of England	0	54	25.6%
Roman Catholic	0	30	14.2%
Other Christian denominations	0	29	13.7%
Muslim	0	27	12.8%
Sikh	0	0	0%
Hindu	0	4	1.9%
Buddhist	0	19	9%
Jewish	0	0	0%
Other	0	8	3.8%
No religion	0	39	18.5%
Total		211	100%

Other demographics	18–20 yr olds	21 and over	%
Veteran (ex-armed services)	0	??	
Total	0		

Sentenced prisoners only

Length of stay	18–20 yr olds		21 and over	
	Number	%	Number	%
Less than 1 month	0	0	10	4.7%
1 month to 3 months	0	0	13	6.2%
3 months to 6 months	0	0	16	7.6%
6 months to 1 year	0	0	42	19.9%
1 year to 2 years	0	0	48	22.7%
2 years to 4 years	0	0	55	26.1%
4 years or more	0	0	27	12.8%
Total	0	0	211	100

Sentenced prisoners only

	18–20 yr olds	21 and over	%
Foreign nationals detained post sentence expiry	0	0	0%
Public protection cases (this does not refer to public protection sentence categories but cases requiring monitoring/restrictions).	0	2	0.9%
Total	0	0	0%

Appendix V: Summary of prisoner questionnaires and interviews

Prisoner survey methodology

A voluntary, confidential and anonymous survey 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

Questionnaires were offered to all prisoners.

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 8 May 2017 the prisoner population at HMP Grendon was 211. Using the method described above, questionnaires were distributed to all 211 prisoners.

We received a total of 182 completed questionnaires, a response rate of 86%. Thirteen respondents refused to complete a questionnaire and 16 questionnaires were not returned.

Wing/unit	Number of completed survey returns
A	38
B	38
C	32
D	37
F	11
G	26

Presentation of survey results and analyses

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

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 differences⁸ are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in prisoners' background details.

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

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

The following comparative analyses are presented:

- The current survey responses from HMP Grendon in 2017 compared with responses from prisoners surveyed in all other local prisons. This comparator is based on all responses from prisoner surveys carried out in eight category B training prisons since April 2014.
- The current survey responses from HMP Grendon in 2017 compared with the responses of prisoners surveyed at HMP Grendon in 2013.
- A comparison within the 2017 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2017 survey between the responses of prisoners who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2017 survey between responses of prisoners who consider themselves to be homosexual, bisexual or other and those who consider themselves to be heterosexual.
- A comparison within the 2017 survey between the responses of prisoners on G wing and those on A, B, C, D and F wings.

⁸ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. Our significance level is set at 0.01 which means that there is only a 1% likelihood that the difference is due to chance.

Survey summary

Section I: About You

QI.1	What wing or houseblock are you currently living on? See survey methodology	
QI.2	How old are you?	
	Under 21	1 (1%)
	21 - 29.....	25 (14%)
	30 - 39.....	64 (36%)
	40 - 49.....	47 (26%)
	50 - 59.....	35 (19%)
	60 - 69.....	6 (3%)
	70 and over	2 (1%)
QI.3	Are you sentenced?	
	Yes	172 (97%)
	Yes - on recall.....	6 (3%)
	No - awaiting trial.....	0 (0%)
	No - awaiting sentence	0 (0%)
	No - awaiting deportation.....	0 (0%)
QI.4	How long is your sentence?	
	Not sentenced.....	0 (0%)
	Less than 6 months	0 (0%)
	6 months to less than 1 year	0 (0%)
	1 year to less than 2 years	0 (0%)
	2 years to less than 4 years	0 (0%)
	4 years to less than 10 years.....	17 (10%)
	10 years or more	36 (21%)
	IPP (indeterminate sentence for public protection)	33 (19%)
	Life.....	86 (50%)
QI.5	Are you a foreign national (i.e. do not have UK citizenship)?	
	Yes	7 (4%)
	No.....	173 (96%)
QI.6	Do you understand spoken English?	
	Yes	180 (100%)
	No.....	0 (0%)
QI.7	Do you understand written English?	
	Yes	179 (100%)
	No.....	0 (0%)

Q1.8	What is your ethnic origin?		
	White - British (English/ Welsh/ Scottish/ Northern Irish).....	139 (79%)	Asian or Asian British - Chinese 1 (1%)
	White - Irish	2 (1%)	Asian or Asian British - other..... 2 (1%)
	White - other.....	3 (2%)	Mixed race - white and black Caribbean. 4 (2%)
	Black or black British - Caribbean.....	4 (2%)	Mixed race - white and black African 0 (0%)
	Black or black British - African	7 (4%)	Mixed race - white and Asian 1 (1%)
	Black or black British - other	3 (2%)	Mixed race - other..... 3 (2%)
	Asian or Asian British - Indian	0 (0%)	Arab..... 1 (1%)
	Asian or Asian British - Pakistani.....	4 (2%)	Other ethnic group 2 (1%)
	Asian or Asian British - Bangladeshi.....	0 (0%)	
Q1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?		
	Yes		5 (3%)
	No.....		171 (97%)
Q1.10	What is your religion?		
	None.....	48 (27%)	Hindu 3 (2%)
	Church of England	48 (27%)	Jewish 0 (0%)
	Catholic	16 (9%)	Muslim 17 (10%)
	Protestant.....	3 (2%)	Sikh 0 (0%)
	Other Christian denomination	8 (5%)	Other..... 17 (10%)
	Buddhist.....	15 (9%)	
Q1.11	How would you describe your sexual orientation?		
	Heterosexual/ Straight		158 (87%)
	Homosexual/Gay.....		6 (3%)
	Bisexual.....		17 (9%)
Q1.12	Do you consider yourself to have a disability (i.e do you need help with any long term physical, mental or learning needs)?		
	Yes		44 (24%)
	No.....		137 (76%)
Q1.13	Are you a veteran (ex- armed services)?		
	Yes		11 (6%)
	No.....		168 (94%)
Q1.14	Is this your first time in prison?		
	Yes		61 (34%)
	No.....		119 (66%)
Q1.15	Do you have children under the age of 18?		
	Yes		68 (38%)
	No.....		112 (62%)

Section 2: Courts, transfers and escorts

Q2.1	On your most recent journey here, how long did you spend in the van?		
	Less than 2 hours		40 (22%)
	2 hours or longer		129 (71%)
	Don't remember		12 (7%)

Q2.2	On your most recent journey here, were you offered anything to eat or drink?	
	<i>My journey was less than two hours</i>	40 (22%)
	Yes	120 (67%)
	No.....	13 (7%)
	<i>Don't remember</i>	5 (3%)
Q2.3	On your most recent journey here, were you offered a toilet break?	
	<i>My journey was less than two hours</i>	40 (22%)
	Yes	16 (9%)
	No.....	118 (66%)
	<i>Don't remember</i>	5 (3%)
Q2.4	On your most recent journey here, was the van clean?	
	Yes	112 (62%)
	No.....	51 (28%)
	<i>Don't remember</i>	17 (9%)
Q2.5	On your most recent journey here, did you feel safe?	
	Yes	146 (81%)
	No.....	29 (16%)
	<i>Don't remember</i>	5 (3%)
Q2.6	On your most recent journey here, how were you treated by the escort staff?	
	<i>Very well</i>	70 (39%)
	<i>Well</i>	84 (47%)
	<i>Neither</i>	17 (9%)
	<i>Badly</i>	7 (4%)
	<i>Very badly</i>	1 (1%)
	<i>Don't remember</i>	1 (1%)
Q2.7	Before you arrived, were you given anything or told that you were coming here? (Please tick all that apply to you.)	
	<i>Yes, someone told me</i>	135 (75%)
	<i>Yes, I received written information</i>	55 (31%)
	<i>No, I was not told anything</i>	9 (5%)
	<i>Don't remember</i>	0 (0%)
Q2.8	When you first arrived here did your property arrive at the same time as you?	
	Yes	162 (90%)
	No.....	18 (10%)
	<i>Don't remember</i>	0 (0%)

Section 3: Reception, first night and induction

Q3.1	How long were you in reception?	
	<i>Less than 2 hours</i>	163 (91%)
	<i>2 hours or longer</i>	10 (6%)
	<i>Don't remember</i>	7 (4%)
Q3.2	When you were searched, was this carried out in a respectful way?	
	Yes	170 (94%)
	No	8 (4%)
	<i>Don't remember</i>	2 (1%)

Q3.3	Overall, how were you treated in reception?	
	Very well.....	121 (67%)
	Well.....	55 (31%)
	Neither.....	4 (2%)
	Badly.....	0 (0%)
	Very badly.....	0 (0%)
	Don't remember.....	0 (0%)
Q3.4	Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)	
	Loss of property.....	20 (12%)
	Housing problems.....	5 (3%)
	Contacting employers.....	0 (0%)
	Contacting family.....	15 (9%)
	Childcare.....	1 (1%)
	Money worries.....	11 (6%)
	Feeling depressed or suicidal.....	16 (9%)
	Physical health.....	13 (8%)
	Mental health.....	27 (16%)
	Needing protection from other prisoners.....	1 (1%)
	Getting phone numbers.....	18 (10%)
	Other.....	5 (3%)
	Did not have any problems.....	102 (59%)
Q3.5	Did you receive any help/support from staff in dealing with these problems when you first arrived here?	
	Yes.....	51 (29%)
	No.....	24 (14%)
	Did not have any problems.....	102 (58%)
Q3.6	When you first arrived here, were you offered any of the following? (Please tick all that apply to you.)	
	Tobacco.....	102 (58%)
	A shower.....	101 (57%)
	A free telephone call.....	92 (52%)
	Something to eat.....	126 (71%)
	PIN phone credit.....	65 (37%)
	Toiletries/ basic items.....	96 (54%)
	Did not receive anything.....	24 (14%)
Q3.7	When you first arrived here, did you have access to the following people or services? (Please tick all that apply to you.)	
	Chaplain.....	124 (70%)
	Someone from health services.....	128 (73%)
	A Listener/Samaritans.....	53 (30%)
	Prison shop/ canteen.....	42 (24%)
	Did not have access to any of these.....	20 (11%)
Q3.8	When you first arrived here, were you offered information on the following? (Please tick all that apply to you.)	
	What was going to happen to you.....	152 (85%)
	What support was available for people feeling depressed or suicidal.....	124 (70%)
	How to make routine requests (applications).....	125 (70%)
	Your entitlement to visits.....	112 (63%)
	Health services.....	129 (72%)
	Chaplaincy.....	119 (67%)
	Not offered any information.....	15 (8%)
Q3.9	Did you feel safe on your first night here?	
	Yes.....	171 (96%)
	No.....	5 (3%)
	Don't remember.....	2 (1%)

Q3.10	How soon after you arrived here did you go on an induction course?	
	<i>Have not been on an induction course</i>	26 (15%)
	<i>Within the first week</i>	134 (77%)
	<i>More than a week</i>	5 (3%)
	<i>Don't remember</i>	9 (5%)
Q3.11	Did the induction course cover everything you needed to know about the prison?	
	<i>Have not been on an induction course</i>	26 (15%)
	<i>Yes</i>	118 (67%)
	<i>No</i>	22 (13%)
	<i>Don't remember</i>	10 (6%)
Q3.12	How soon after you arrived here did you receive an education ('skills for life') assessment?	
	<i>Did not receive an assessment</i>	43 (25%)
	<i>Within the first week</i>	15 (9%)
	<i>More than a week</i>	84 (48%)
	<i>Don't remember</i>	33 (19%)

Section 4: Legal rights and respectful custody

Q4.1	How easy is it to.....						
		<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>	<i>N/A</i>
	<i>Communicate with your solicitor or legal representative?</i>	74 (42%)	60 (34%)	10 (6%)	6 (3%)	1 (1%)	27 (15%)
	<i>Attend legal visits?</i>	41 (24%)	51 (30%)	16 (9%)	8 (5%)	2 (1%)	52 (31%)
	<i>Get bail information?</i>	15 (10%)	12 (8%)	18 (11%)	2 (1%)	2 (1%)	108 (69%)
Q4.2	Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?						
	<i>Not had any letters</i>					37 (21%)	
	<i>Yes</i>					54 (31%)	
	<i>No</i>					82 (47%)	
Q4.3	Can you get legal books in the library?						
	<i>Yes</i>					106 (60%)	
	<i>No</i>					5 (3%)	
	<i>Don't know</i>					67 (38%)	
Q4.4	Please answer the following questions about the wing/unit you are currently living on:						
		<i>Yes</i>	<i>No</i>	<i>Don't know</i>			
	<i>Do you normally have enough clean, suitable clothes for the week?</i>	159 (89%)	19 (11%)	1 (1%)			
	<i>Are you normally able to have a shower every day?</i>	176 (98%)	2 (1%)	1 (1%)			
	<i>Do you normally receive clean sheets every week?</i>	155 (87%)	20 (11%)	3 (2%)			
	<i>Do you normally get cell cleaning materials every week?</i>	164 (92%)	13 (7%)	1 (1%)			
	<i>Is your cell call bell normally answered within five minutes?</i>	89 (50%)	47 (26%)	42 (24%)			
	<i>Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?</i>	140 (81%)	32 (18%)	1 (1%)			
	<i>If you need to, can you normally get your stored property?</i>	63 (36%)	53 (30%)	60 (34%)			
Q4.5	What is the food like here?						
	<i>Very good</i>					80 (44%)	
	<i>Good</i>					87 (48%)	
	<i>Neither</i>					12 (7%)	
	<i>Bad</i>					1 (1%)	
	<i>Very bad</i>					0 (0%)	

Q4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	
	<i>Have not bought anything yet/ don't know</i>	3 (2%)
	Yes	60 (34%)
	No.....	115 (65%)
Q4.7	Can you speak to a Listener at any time, if you want to?	
	Yes	63 (36%)
	No.....	68 (39%)
	Don't know	43 (25%)
Q4.8	Are your religious beliefs respected?	
	Yes	113 (64%)
	No.....	20 (11%)
	Don't know/ N/A.....	44 (25%)
Q4.9	Are you able to speak to a Chaplain of your faith in private if you want to?	
	Yes	131 (73%)
	No.....	12 (7%)
	Don't know/ N/A.....	36 (20%)
Q4.10	How easy or difficult is it for you to attend religious services?	
	<i>I don't want to attend</i>	33 (18%)
	Very easy.....	75 (42%)
	Easy	46 (26%)
	Neither	7 (4%)
	Difficult.....	2 (1%)
	Very difficult.....	6 (3%)
	Don't know	11 (6%)

Section 5: Applications and complaints

Q5.1	Is it easy to make an application?			
	Yes	175 (98%)		
	No	4 (2%)		
	Don't know	0 (0%)		
Q5.2	Please answer the following questions about applications. (If you have not made an application please tick the 'not made one' option.)			
		Not made one		
		Yes		
		No		
	Are <i>applications</i> dealt with fairly?	14 (8%)	146 (83%)	16 (9%)
	Are <i>applications</i> dealt with quickly (within seven days)?	14 (9%)	111 (69%)	35 (22%)
Q5.3	Is it easy to make a complaint?			
	Yes	141 (79%)		
	No	13 (7%)		
	Don't know	25 (14%)		
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 <i>complaints</i> dealt with fairly?	59 (34%)	82 (47%)	34 (19%)
	Are <i>complaints</i> dealt with quickly (within seven days)?	59 (35%)	57 (34%)	51 (31%)

Q5.5	Have you ever been prevented from making a complaint when you wanted to?	
	Yes	20 (11%)
	No.....	156 (89%)
Q5.6	How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?	
	<i>Don't know who they are</i>	19 (11%)
	Very easy.....	54 (31%)
	Easy	51 (29%)
	Neither	34 (20%)
	Difficult.....	11 (6%)
	Very difficult.....	5 (3%)

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.)	
	<i>Don't know what the IEP scheme is</i>	2 (1%)
	Yes	157 (89%)
	No	12 (7%)
	<i>Don't know</i>	5 (3%)
Q6.2	Do the different levels of the IEP scheme encourage you to change your behaviour? (This refers to enhanced, standard and basic levels.)	
	<i>Don't know what the IEP scheme is</i>	2 (1%)
	Yes	99 (57%)
	No.....	61 (35%)
	<i>Don't know</i>	11 (6%)
Q6.3	In the last six months have any members of staff physically restrained you (C&R)?	
	Yes	5 (3%)
	No.....	170 (97%)
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>I have not been to segregation in the last 6 months</i>	160 (95%)
	Very well.....	2 (1%)
	Well	1 (1%)
	Neither	3 (2%)
	Badly.....	1 (1%)
	Very badly	1 (1%)

Section 7: Relationships with staff

Q7.1	Do most staff treat you with respect?	
	Yes	165 (94%)
	No.....	10 (6%)
Q7.2	Is there a member of staff you can turn to for help if you have a problem?	
	Yes	168 (95%)
	No.....	8 (5%)
Q7.3	Has a member of staff checked on you personally in the last week to see how you are getting on?	
	Yes	119 (68%)
	No.....	56 (32%)

Q7.4	How often do staff normally speak to you during association?	
	<i>Do not go on association</i>	0 (0%)
	<i>Never</i>	5 (3%)
	<i>Rarely</i>	26 (15%)
	<i>Some of the time</i>	42 (24%)
	<i>Most of the time</i>	51 (29%)
	<i>All of the time</i>	53 (30%)
Q7.5	When did you first meet your personal (named) officer?	
	<i>I have not met him/her</i>	17 (10%)
	<i>In the first week</i>	131 (74%)
	<i>More than a week</i>	15 (8%)
	<i>Don't remember</i>	14 (8%)
Q7.6	How helpful is your personal (named) officer?	
	<i>Do not have a personal officer/ I have not met him/ her</i>	17 (10%)
	<i>Very helpful</i>	81 (46%)
	<i>Helpful</i>	50 (29%)
	<i>Neither</i>	16 (9%)
	<i>Not very helpful</i>	6 (3%)
	<i>Not at all helpful</i>	5 (3%)

Section 8: Safety

Q8.1	Have you ever felt unsafe here?	
	<i>Yes</i>	59 (33%)
	<i>No</i>	118 (67%)
Q8.2	Do you feel unsafe now?	
	<i>Yes</i>	18 (10%)
	<i>No</i>	154 (90%)
Q8.3	In which areas have you felt unsafe? (Please tick all that apply to you.)	
	<i>Never felt unsafe</i>	118 (69%)
	<i>Everywhere</i>	12 (7%)
	<i>Segregation unit</i>	0 (0%)
	<i>Association areas</i>	19 (11%)
	<i>Reception area</i>	1 (1%)
	<i>At the gym</i>	9 (5%)
	<i>In an exercise yard</i>	15 (9%)
	<i>At work</i>	3 (2%)
	<i>During movement</i>	10 (6%)
	<i>At education</i>	4 (2%)
	<i>At meal times</i>	13 (8%)
	<i>At health services</i>	9 (5%)
	<i>Visits area</i>	1 (1%)
	<i>In wing showers</i>	11 (6%)
	<i>In gym showers</i>	2 (1%)
	<i>In corridors/stairwells</i>	19 (11%)
	<i>On your landing/wing</i>	32 (19%)
	<i>In your cell</i>	14 (8%)
	<i>At religious services</i>	1 (1%)
Q8.4	Have you been victimised by other prisoners here?	
	<i>Yes</i>	58 (33%)
	<i>No</i>	118 (67%)

Q8.5	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	33 (19%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	6 (3%)
	<i>Sexual abuse</i>	1 (1%)
	<i>Feeling threatened or intimidated</i>	37 (21%)
	<i>Having your canteen/property taken</i>	2 (1%)
	<i>Medication</i>	0 (0%)
	<i>Debt</i>	0 (0%)
	<i>Drugs</i>	0 (0%)
	<i>Your race or ethnic origin</i>	5 (3%)
	<i>Your religion/religious beliefs</i>	6 (3%)
	<i>Your nationality</i>	3 (2%)
	<i>You are from a different part of the country than others</i>	6 (3%)
	<i>You are from a traveller community</i>	0 (0%)
	<i>Your sexual orientation</i>	4 (2%)
	<i>Your age</i>	4 (2%)
	<i>You have a disability</i>	3 (2%)
	<i>You were new here</i>	5 (3%)
	<i>Your offence/ crime</i>	27 (15%)
	<i>Gang related issues</i>	2 (1%)
Q8.6	Have you been victimised by staff here?	
	Yes	25 (14%)
	No	149 (86%)
Q8.7	If yes, what did the incident(s) involve/ what was it about? (Please tick all that apply to you.)	
	<i>Insulting remarks (about you or your family or friends)</i>	6 (3%)
	<i>Physical abuse (being hit, kicked or assaulted)</i>	0 (0%)
	<i>Sexual abuse</i>	1 (1%)
	<i>Feeling threatened or intimidated</i>	13 (7%)
	<i>Medication</i>	3 (2%)
	<i>Debt</i>	0 (0%)
	<i>Drugs</i>	0 (0%)
	<i>Your race or ethnic origin</i>	0 (0%)
	<i>Your religion/religious beliefs</i>	2 (1%)
	<i>Your nationality</i>	2 (1%)
	<i>You are from a different part of the country than others</i>	1 (1%)
	<i>You are from a traveller community</i>	0 (0%)
	<i>Your sexual orientation</i>	1 (1%)
	<i>Your age</i>	0 (0%)
	<i>You have a disability</i>	2 (1%)
	<i>You were new here</i>	5 (3%)
	<i>Your offence/ crime</i>	10 (6%)
	<i>Gang related issues</i>	0 (0%)
Q8.8	If you have been victimised by prisoners or staff, did you report it?	
	Not been victimised	110 (67%)
	Yes	30 (18%)
	No	23 (14%)

Section 9: Health services

Q9.1	How easy or difficult is it to see the following people?:						
		<i>Don't know</i>	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>
	The doctor	6 (3%)	27 (16%)	93 (53%)	18 (10%)	25 (14%)	5 (3%)
	The nurse	5 (3%)	47 (27%)	93 (54%)	14 (8%)	11 (6%)	3 (2%)
	The dentist	17 (10%)	15 (9%)	52 (30%)	17 (10%)	52 (30%)	18 (11%)

Q9.2	What do you think of the quality of the health service from the following people?:						
		<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
	The doctor	6 (3%)	34 (20%)	86 (49%)	18 (10%)	16 (9%)	14 (8%)
	The nurse	2 (1%)	54 (32%)	85 (51%)	16 (10%)	7 (4%)	4 (2%)
	The dentist	24 (14%)	51 (31%)	53 (32%)	17 (10%)	14 (8%)	7 (4%)
Q9.3	What do you think of the overall quality of the health services here?						
	<i>Not been</i>						1 (1%)
	<i>Very good</i>						37 (21%)
	<i>Good</i>						86 (50%)
	<i>Neither</i>						20 (12%)
	<i>Bad</i>						17 (10%)
	<i>Very bad</i>						12 (7%)
Q9.4	Are you currently taking medication?						
	<i>Yes</i>						96 (55%)
	<i>No</i>						79 (45%)
Q9.5	If you are taking medication, are you allowed to keep some/ all of it in your own cell?						
	<i>Not taking medication</i>						79 (45%)
	<i>Yes, all my meds</i>						71 (41%)
	<i>Yes, some of my meds</i>						16 (9%)
	<i>No</i>						9 (5%)
Q9.6	Do you have any emotional or mental health problems?						
	<i>Yes</i>						84 (49%)
	<i>No</i>						89 (51%)
Q9.7	Are you being helped/ supported by anyone in this prison (e.g. a psychologist, psychiatrist, nurse, mental health worker, counsellor or any other member of staff)?						
	<i>Do not have any emotional or mental health problems</i>						89 (52%)
	<i>Yes</i>						68 (40%)
	<i>No</i>						14 (8%)

Section 10: Drugs and alcohol

Q10.1	Did you have a problem with drugs when you came into this prison?		
	<i>Yes</i>		46 (26%)
	<i>No</i>		130 (74%)
Q10.2	Did you have a problem with alcohol when you came into this prison?		
	<i>Yes</i>		39 (22%)
	<i>No</i>		137 (78%)
Q10.3	Is it easy or difficult to get illegal drugs in this prison?		
	<i>Very easy</i>		10 (6%)
	<i>Easy</i>		12 (7%)
	<i>Neither</i>		9 (5%)
	<i>Difficult</i>		19 (11%)
	<i>Very difficult</i>		19 (11%)
	<i>Don't know</i>		105 (60%)

Q10.4	Is it easy or difficult to get alcohol in this prison?	
	Very easy.....	3 (2%)
	Easy.....	6 (3%)
	Neither.....	12 (7%)
	Difficult.....	15 (9%)
	Very difficult.....	38 (22%)
	Don't know.....	101 (58%)
Q10.5	Have you developed a problem with illegal drugs since you have been in this prison?	
	Yes.....	5 (3%)
	No.....	171 (97%)
Q10.6	Have you developed a problem with diverted medication since you have been in this prison?	
	Yes.....	1 (1%)
	No.....	175 (99%)
Q10.7	Have you received any support or help (for example substance misuse teams) for your drug problem, while in this prison?	
	Did not / do not have a drug problem.....	128 (74%)
	Yes.....	37 (22%)
	No.....	7 (4%)
Q10.8	Have you received any support or help (for example substance misuse teams) for your alcohol problem, whilst in this prison?	
	Did not / do not have an alcohol problem.....	137 (78%)
	Yes.....	32 (18%)
	No.....	6 (3%)
Q10.9	Was the support or help you received, whilst in this prison, helpful?	
	Did not have a problem/ did not receive help.....	123 (72%)
	Yes.....	46 (27%)
	No.....	2 (1%)

Section II: Activities

Q11.1	How easy or difficult is it to get into the following activities, in this prison?						
		<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 (6%)	49 (29%)	59 (35%)	13 (8%)	31 (18%)	9 (5%)
	Vocational or skills training	20 (12%)	22 (13%)	30 (18%)	20 (12%)	43 (26%)	30 (18%)
	Education (including basic skills)	16 (9%)	42 (25%)	55 (33%)	16 (9%)	31 (18%)	9 (5%)
	Offending behaviour programmes	34 (21%)	51 (31%)	31 (19%)	16 (10%)	17 (10%)	13 (8%)
Q11.2	Are you currently involved in the following? (Please tick all that apply to you.)						
	Not involved in any of these.....					16 (9%)	
	Prison job.....					130 (76%)	
	Vocational or skills training.....					28 (16%)	
	Education (including basic skills).....					43 (25%)	
	Offending behaviour programmes.....					79 (46%)	

Q11.3	If you have been involved in any of the following, while in this prison, do you think they will help you on release?				
		<i>Not been involved</i>	<i>Yes</i>	<i>No</i>	<i>Don't know</i>
	Prison job	8 (5%)	90 (57%)	50 (32%)	10 (6%)
	Vocational or skills training	29 (23%)	65 (52%)	22 (17%)	10 (8%)
	Education (including basic skills)	24 (17%)	85 (60%)	25 (18%)	8 (6%)
	Offending behaviour programmes	26 (17%)	105 (70%)	12 (8%)	8 (5%)
Q11.4	How often do you usually go to the library?				
	<i>Don't want to go</i>				5 (3%)
	<i>Never</i>				5 (3%)
	<i>Less than once a week</i>				42 (24%)
	<i>About once a week</i>				78 (45%)
	<i>More than once a week</i>				42 (24%)
Q11.5	Does the library have a wide enough range of materials to meet your needs?				
	<i>Don't use it</i>				5 (3%)
	<i>Yes</i>				134 (78%)
	<i>No</i>				33 (19%)
Q11.6	How many times do you usually go to the gym each week?				
	<i>Don't want to go</i>				36 (21%)
	<i>0</i>				17 (10%)
	<i>1 to 2</i>				36 (21%)
	<i>3 to 5</i>				71 (41%)
	<i>More than 5</i>				13 (8%)
Q11.7	How many times do you usually go outside for exercise each week?				
	<i>Don't want to go</i>				27 (16%)
	<i>0</i>				18 (10%)
	<i>1 to 2</i>				55 (32%)
	<i>3 to 5</i>				38 (22%)
	<i>More than 5</i>				36 (21%)
Q11.8	How many times do you usually have association each week?				
	<i>Don't want to go</i>				1 (1%)
	<i>0</i>				2 (1%)
	<i>1 to 2</i>				6 (3%)
	<i>3 to 5</i>				7 (4%)
	<i>More than 5</i>				159 (91%)
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>				1 (1%)
	<i>2 to less than 4 hours</i>				1 (1%)
	<i>4 to less than 6 hours</i>				6 (3%)
	<i>6 to less than 8 hours</i>				16 (9%)
	<i>8 to less than 10 hours</i>				23 (13%)
	<i>10 hours or more</i>				125 (71%)
	<i>Don't know</i>				4 (2%)

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	130 (76%)
	No	42 (24%)
Q12.2	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	30 (17%)
	No.....	144 (83%)
Q12.3	Have you had any problems getting access to the telephones?	
	Yes	12 (7%)
	No.....	164 (93%)
Q12.4	How easy or difficult is it for your family and friends to get here?	
	<i>I don't get visits</i>	35 (20%)
	<i>Very easy</i>	14 (8%)
	<i>Easy</i>	31 (18%)
	<i>Neither</i>	22 (13%)
	<i>Difficult</i>	42 (24%)
	<i>Very difficult</i>	28 (16%)
	<i>Don't know</i>	1 (1%)

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	169 (99%)
	No.....	2 (1%)
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>	2 (1%)
	<i>No contact</i>	29 (17%)
	<i>Letter</i>	103 (59%)
	<i>Phone</i>	95 (55%)
	<i>Visit</i>	71 (41%)
Q13.3	Do you have a named offender supervisor in this prison?	
	Yes	153 (88%)
	No.....	20 (12%)
Q13.4	Do you have a sentence plan?	
	<i>Not sentenced</i>	0 (0%)
	Yes	161 (93%)
	No.....	12 (7%)
Q13.5	How involved were you in the development of your sentence plan?	
	<i>Do not have a sentence plan/ not sentenced</i>	12 (7%)
	<i>Very involved</i>	72 (42%)
	<i>Involved</i>	73 (42%)
	<i>Neither</i>	6 (3%)
	<i>Not very involved</i>	6 (3%)
	<i>Not at all involved</i>	4 (2%)

Q13.6	Who is working with you to achieve your sentence plan targets? (Please tick all that apply to you.)			
	<i>Do not have a sentence plan/ not sentenced</i>	12	(7%)	
	<i>Nobody</i>	17	(10%)	
	<i>Offender supervisor</i>	109	(63%)	
	<i>Offender manager</i>	89	(51%)	
	<i>Named/ personal officer</i>	114	(66%)	
	<i>Staff from other departments</i>	93	(54%)	
Q13.7	Can you achieve any of your sentence plan targets in this prison?			
	<i>Do not have a sentence plan/ not sentenced</i>	12	(7%)	
	<i>Yes</i>	138	(80%)	
	<i>No</i>	12	(7%)	
	<i>Don't know</i>	10	(6%)	
Q13.8	Are there plans for you to achieve any of your sentence plan targets in another prison?			
	<i>Do not have a sentence plan/ not sentenced</i>	12	(7%)	
	<i>Yes</i>	52	(30%)	
	<i>No</i>	70	(40%)	
	<i>Don't know</i>	39	(23%)	
Q13.9	Are there plans for you to achieve any of your sentence plan targets in the community?			
	<i>Do not have a sentence plan/ not sentenced</i>	12	(7%)	
	<i>Yes</i>	62	(36%)	
	<i>No</i>	47	(27%)	
	<i>Don't know</i>	52	(30%)	
Q13.10	Do you have a needs based custody plan?			
	<i>Yes</i>	34	(20%)	
	<i>No</i>	43	(25%)	
	<i>Don't know</i>	97	(56%)	
Q13.11	Do you feel that any member of staff has helped you to prepare for your release?			
	<i>Yes</i>	84	(50%)	
	<i>No</i>	85	(50%)	
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	27 (16%)	52 (31%)	90 (53%)
	Accommodation	18 (11%)	54 (33%)	93 (56%)
	Benefits	21 (13%)	41 (26%)	97 (61%)
	Finances	25 (16%)	42 (26%)	93 (58%)
	Education	26 (16%)	67 (41%)	70 (43%)
	Drugs and alcohol	34 (22%)	73 (46%)	51 (32%)
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>	151	(87%)	
	<i>No</i>	22	(13%)	

Main comparator and comparator to last time



Prisoner survey responses HMP Grendon 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		HMP Grendon 2017	Category B Training Prisons Comparator	HMP Grendon 2017	HMP Grendon 2013
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	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		182	1,580	182	177
SECTION 1: General information					
1.2	Are you under 21 years of age?	1%	0%	1%	1%
1.3	Are you sentenced?	100%	97%	100%	100%
1.3	Are you on recall?	3%	4%	3%	2%
1.4	Is your sentence less than 12 months?	0%	1%	0%	0%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	19%	12%	19%	36%
1.5	Are you a foreign national?	4%	11%	4%	5%
1.6	Do you understand spoken English?	100%	99%	100%	100%
1.7	Do you understand written English?	100%	98%	100%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	18%	29%	18%	22%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	3%	3%	3%	3%
1.1	Are you Muslim?	10%	14%	10%	9%
1.11	Are you homosexual/gay or bisexual?	13%	5%	13%	10%
1.12	Do you consider yourself to have a disability?	24%	26%	24%	21%
1.13	Are you a veteran (ex-armed services)?	6%	6%	6%	6%
1.14	Is this your first time in prison?	34%	43%	34%	28%
1.15	Do you have any children under the age of 18?	38%	49%	38%	36%
SECTION 2: Transfers and escorts					
On your most recent journey here:					
2.1	Did you spend more than 2 hours in the van?	71%	64%	71%	72%
For those who spent two or more hours in the escort van:					
2.2	Were you offered anything to eat or drink?	87%	71%	87%	81%
2.3	Were you offered a toilet break?	12%	11%	12%	14%
2.4	Was the van clean?	62%	61%	62%	70%
2.5	Did you feel safe?	81%	75%	81%	89%
2.6	Were you treated well/very well by the escort staff?	86%	69%	86%	83%
2.7	Before you arrived here were you told that you were coming here?	75%	64%	75%	74%
2.7	Before you arrived here did you receive any written information about coming here?	31%	12%	31%	30%
2.8	When you first arrived here did your property arrive at the same time as you?	90%	80%	90%	92%

Main comparator and comparator to last time

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SECTION 3: Reception, first night and induction					
3.1	Were you in reception for less than 2 hours?	90%	50%	90%	83%
3.2	When you were searched in reception, was this carried out in a respectful way?	94%	82%	94%	95%
3.3	Were you treated well/very well in reception?	98%	74%	98%	92%
	When you first arrived:				
3.4	Did you have any problems?	41%	62%	41%	59%
3.4	Did you have any problems with loss of property?	12%	22%	12%	7%
3.4	Did you have any housing problems?	3%	5%	3%	5%
3.4	Did you have any problems contacting employers?	0%	1%	0%	1%
3.4	Did you have any problems contacting family?	9%	18%	9%	21%
3.4	Did you have any problems ensuring dependants were being looked after?	1%	1%	1%	0%
3.4	Did you have any money worries?	7%	12%	7%	12%
3.4	Did you have any problems with feeling depressed or suicidal?	10%	16%	10%	2%
3.4	Did you have any physical health problems?	8%	14%	8%	11%
3.4	Did you have any mental health problems?	16%	19%	16%	11%
3.4	Did you have any problems with needing protection from other prisoners?	1%	6%	1%	2%
3.4	Did you have problems accessing phone numbers?	11%	18%	11%	32%
	For those with problems:				
3.5	Did you receive any help/ support from staff in dealing with these problems?	68%	35%	68%	61%
	When you first arrived here, were you offered any of the following:				
3.6	Tobacco?	58%	64%	58%	68%
3.6	A shower?	57%	30%	57%	52%
3.6	A free telephone call?	52%	43%	52%	43%
3.6	Something to eat?	71%	58%	71%	61%
3.6	PIN phone credit?	37%	43%	37%	41%
3.6	Toiletries/ basic items?	54%	52%	54%	54%

Key to tables

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SECTION 3: Reception, first night and induction continued					
	When you first arrived here did you have access to the following people:				
3.7	The chaplain or a religious leader?	71%	45%	71%	59%
3.7	Someone from health services?	73%	63%	73%	77%
3.7	A Listener/Samaritans?	30%	31%	30%	27%
3.7	Prison shop/ canteen?	24%	25%	24%	25%
	When you first arrived here were you offered information about any of the following:				
3.8	What was going to happen to you?	85%	49%	85%	87%
3.8	Support was available for people feeling depressed or suicidal?	70%	36%	70%	64%
3.8	How to make routine requests?	70%	39%	70%	69%
3.8	Your entitlement to visits?	63%	34%	63%	64%
3.8	Health services?	73%	46%	73%	72%
3.8	The chaplaincy?	67%	40%	67%	66%
3.9	Did you feel safe on your first night here?	96%	77%	96%	91%
3.10	Have you been on an induction course?	85%	88%	85%	89%
	For those who have been on an induction course:				
3.11	Did the course cover everything you needed to know about the prison?	79%	64%	79%	75%
3.12	Did you receive an education (skills for life) assessment?	75%	85%	75%	75%
SECTION 4: Legal rights and respectful custody					
	In terms of your legal rights, is it easy/very easy to:				
4.1	Communicate with your solicitor or legal representative?	75%	52%	75%	71%
4.1	Attend legal visits?	54%	47%	54%	60%
4.1	Get bail information?	17%	11%	17%	11%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	31%	50%	31%	39%
4.3	Can you get legal books in the library?	59%	46%	59%	75%
	For the wing/unit you are currently on:				
4.4	Are you normally offered enough clean, suitable clothes for the week?	89%	68%	89%	95%
4.4	Are you normally able to have a shower every day?	99%	92%	99%	100%
4.4	Do you normally receive clean sheets every week?	87%	52%	87%	96%
4.4	Do you normally get cell cleaning materials every week?	92%	59%	92%	97%
4.4	Is your cell call bell normally answered within five minutes?	50%	35%	50%	67%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	81%	65%	81%	83%
4.4	Can you normally get your stored property, if you need to?	36%	24%	36%	38%
4.5	Is the food in this prison good/very good?	93%	29%	93%	74%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	34%	47%	34%	55%
4.7	Are you able to speak to a Listener at any time, if you want to?	36%	54%	36%	32%
4.8	Are your religious beliefs respected?	64%	50%	64%	73%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	73%	54%	73%	77%
4.10	Is it easy/very easy to attend religious services?	67%	50%	67%	65%

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SECTION 5: Applications and complaints					
5.1	Is it easy to make an application?	98%	78%	98%	93%
	For those who have made an application:				
5.2	Do you feel applications are dealt with fairly?	90%	48%	90%	84%
5.2	Do you feel applications are dealt with quickly (within seven days)?	76%	31%	76%	54%
5.3	Is it easy to make a complaint?	79%	62%	79%	73%
	For those who have made a complaint:				
5.4	Do you feel complaints are dealt with fairly?	71%	27%	71%	69%
5.4	Do you feel complaints are dealt with quickly (within seven days)?	53%	22%	53%	55%
5.5	Have you ever been prevented from making a complaint when you wanted to?	11%	23%	11%	19%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	60%	24%	60%	62%
SECTION 6: Incentives and earned privileges scheme					
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	89%	49%	89%	86%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	57%	44%	57%	60%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	3%	10%	3%	3%
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?	33%	37%	33%	13%
SECTION 7: Relationships with staff					
7.1	Do most staff, in this prison, treat you with respect?	94%	81%	94%	92%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	96%	71%	96%	91%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	68%	29%	68%	63%
7.4	Do staff normally speak to you most of the time/all of the time during association?	59%	22%	59%	55%
7.5	Do you have a personal officer?	90%	65%	90%	91%
	For those with a personal officer:				
7.6	Do you think your personal officer is helpful/very helpful?	83%	60%	83%	78%

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SECTION 8: Safety					
8.1	Have you ever felt unsafe here?	33%	49%	33%	42%
8.2	Do you feel unsafe now?	11%	25%	11%	17%
8.4	Have you been victimised by other prisoners here?	33%	36%	33%	39%
	Since you have been here, have other prisoners:				
8.5	Made insulting remarks about you, your family or friends?	19%	16%	19%	27%
8.5	Hit, kicked or assaulted you?	3%	14%	3%	4%
8.5	Sexually abused you?	1%	3%	1%	2%
8.5	Threatened or intimidated you?	21%	23%	21%	25%
8.5	Taken your canteen/property?	1%	9%	1%	3%
8.5	Victimised you because of medication?	0%	6%	0%	5%
8.5	Victimised you because of debt?	0%	5%	0%	0%
8.5	Victimised you because of drugs?	0%	5%	0%	1%
8.5	Victimised you because of your race or ethnic origin?	3%	7%	3%	8%
8.5	Victimised you because of your religion/religious beliefs?	3%	7%	3%	6%
8.5	Victimised you because of your nationality?	2%	5%	2%	6%
8.5	Victimised you because you were from a different part of the country?	3%	6%	3%	3%
8.5	Victimised you because you are from a Traveller community?	0%	1%	0%	0%
8.5	Victimised you because of your sexual orientation?	2%	3%	2%	5%
8.5	Victimised you because of your age?	2%	3%	2%	2%
8.5	Victimised you because you have a disability?	2%	5%	2%	5%
8.5	Victimised you because you were new here?	3%	6%	3%	2%
8.5	Victimised you because of your offence/crime?	15%	7%	15%	26%
8.5	Victimised you because of gang related issues?	1%	6%	1%	3%

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	Percentages which are not highlighted show there is no significant difference				
SECTION 8: Safety continued					
8.6	Have you been victimised by staff here?	14%	35%	14%	28%
	Since you have been here, have staff:				
8.7	Made insulting remarks about you, your family or friends?	4%	13%	4%	14%
8.7	Hit, kicked or assaulted you?	0%	6%	0%	2%
8.7	Sexually abused you?	1%	2%	1%	0%
8.7	Threatened or intimidated you?	7%	15%	7%	12%
8.7	Victimised you because of medication?	2%	5%	2%	2%
8.7	Victimised you because of debt?	0%	2%	0%	0%
8.7	Victimised you because of drugs?	0%	2%	0%	1%
8.7	Victimised you because of your race or ethnic origin?	0%	6%	0%	5%
8.7	Victimised you because of your religion/religious beliefs?	1%	5%	1%	2%
8.7	Victimised you because of your nationality?	1%	4%	1%	3%
8.7	Victimised you because you were from a different part of the country?	1%	4%	1%	1%
8.7	Victimised you because you are from a Traveller community?	0%	1%	0%	0%
8.7	Victimised you because of your sexual orientation?	1%	2%	1%	3%
8.7	Victimised you because of your age?	0%	2%	0%	3%
8.7	Victimised you because you have a disability?	1%	4%	1%	4%
8.7	Victimised you because you were new here?	3%	4%	3%	3%
8.7	Victimised you because of your offence/crime?	6%	6%	6%	12%
8.7	Victimised you because of gang related issues?	0%	2%	0%	3%
	For those who have been victimised by staff or other prisoners:				
8.8	Did you report any victimisation that you have experienced?	57%	47%	57%	65%

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SECTION 9: Health services					
9.1	Is it easy/very easy to see the doctor?	69%	24%	69%	74%
9.1	Is it easy/very easy to see the nurse?	81%	44%	81%	84%
9.1	Is it easy/very easy to see the dentist?	39%	17%	39%	51%
	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?	71%	38%	71%	73%
9.2	The nurse?	84%	46%	84%	85%
9.2	The dentist?	73%	43%	73%	73%
9.3	The overall quality of health services?	72%	31%	72%	75%
9.4	Are you currently taking medication?	55%	54%	55%	58%
	For those currently taking medication:				
9.5	Are you allowed to keep possession of some or all of your medication in your own cell?	91%	81%	91%	96%
9.6	Do you have any emotional well being or mental health problems?	49%	37%	49%	39%
	For those who have problems:				
9.7	Are you being helped or supported by anyone in this prison?	83%	45%	83%	78%
SECTION 10: Drugs and alcohol					
10.1	Did you have a problem with drugs when you came into this prison?	26%	19%	26%	25%
10.2	Did you have a problem with alcohol when you came into this prison?	22%	16%	22%	20%
10.3	Is it easy/very easy to get illegal drugs in this prison?	13%	38%	13%	16%
10.4	Is it easy/very easy to get alcohol in this prison?	5%	29%	5%	6%
10.5	Have you developed a problem with drugs since you have been in this prison?	3%	11%	3%	2%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	1%	9%	1%	4%
	For those with drug or alcohol problems:				
10.7	Have you received any support or help with your drug problem while in this prison?	84%	60%	84%	70%
10.8	Have you received any support or help with your alcohol problem while in this prison?	84%	64%	84%	77%
	For those who have received help or support with their drug or alcohol problem:				
10.9	Was the support helpful?	96%	73%	96%	98%

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SECTION 11: Activities					
Is it very easy/ easy to get into the following activities:					
11.1	A prison job?	63%	37%	63%	54%
11.1	Vocational or skills training?	31%	31%	31%	30%
11.1	Education (including basic skills)?	57%	51%	57%	49%
11.1	Offending behaviour programmes?	51%	26%	51%	49%
Are you currently involved in any of the following activities:					
11.2	A prison job?	76%	68%	76%	86%
11.2	Vocational or skills training?	16%	11%	16%	13%
11.2	Education (including basic skills)?	25%	27%	25%	28%
11.2	Offending behaviour programmes?	46%	17%	46%	58%
11.3	Have you had a job while in this prison?	95%	89%	95%	99%
For those who have had a prison job while in this prison:					
11.3	Do you feel the job will help you on release?	60%	42%	60%	60%
11.3	Have you been involved in vocational or skills training while in this prison?	77%	76%	77%	80%
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?	67%	51%	67%	71%
11.3	Have you been involved in education while in this prison?	83%	86%	83%	87%
For those who have been involved in education while in this prison:					
11.3	Do you feel the education will help you on release?	72%	58%	72%	78%
11.3	Have you been involved in offending behaviour programmes while in this prison?	83%	76%	83%	93%
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?	84%	50%	84%	93%
11.4	Do you go to the library at least once a week?	70%	43%	70%	59%
11.5	Does the library have a wide enough range of materials to meet your needs?	78%	43%	78%	72%
11.6	Do you go to the gym three or more times a week?	49%	37%	49%	23%
11.7	Do you go outside for exercise three or more times a week?	43%	44%	43%	50%
11.8	Do you go on association more than five times each week?	91%	67%	91%	92%
11.9	Do you spend ten or more hours out of your cell on a weekday?	71%	18%	71%	56%
SECTION 12: Friends and family					
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	76%	33%	76%	72%
12.2	Have you had any problems with sending or receiving mail?	17%	47%	17%	24%
12.3	Have you had any problems getting access to the telephones?	7%	16%	7%	11%
12.4	Is it easy/ very easy for your friends and family to get here?	26%	19%	26%	26%

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SECTION 13: Preparation for release					
For those who are sentenced:					
13.1	Do you have a named offender manager (home probation officer) in the probation service?	99%	86%	99%	98%
For those who are sentenced what type of contact have you had with your offender manager:					
13.2	No contact?	17%	29%	17%	9%
13.2	Contact by letter?	60%	33%	60%	71%
13.2	Contact by phone?	55%	35%	55%	57%
13.2	Contact by visit?	41%	34%	41%	54%
13.3	Do you have a named offender supervisor in this prison?	89%	80%	89%	92%
For those who are sentenced:					
13.4	Do you have a sentence plan?	93%	76%	93%	86%
For those with a sentence plan:					
13.5	Were you involved/very involved in the development of your plan?	90%	53%	90%	79%
Who is working with you to achieve your sentence plan targets:					
13.6	Nobody?	11%	39%	11%	16%
13.6	Offender supervisor?	68%	44%	68%	67%
13.6	Offender manager?	55%	29%	55%	66%
13.6	Named/ personal officer?	71%	17%	71%	71%
13.6	Staff from other departments?	58%	18%	58%	58%
For those with a sentence plan:					
13.7	Can you achieve any of your sentence plan targets in this prison?	86%	63%	86%	84%
13.8	Are there plans for you to achieve any of your targets in another prison?	32%	29%	32%	41%
13.9	Are there plans for you to achieve any of your targets in the community?	39%	19%	39%	43%
13.10	Do you have a needs based custody plan?	19%	6%	19%	22%
13.11	Do you feel that any member of staff has helped you to prepare for release?	50%	14%	50%	48%
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?	37%	18%	37%	42%
13.12	Accommodation?	37%	18%	37%	42%
13.12	Benefits?	30%	19%	30%	36%
13.12	Finances?	31%	15%	31%	37%
13.12	Education?	49%	21%	49%	54%
13.12	Drugs and alcohol?	59%	28%	59%	64%
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?	87%	57%	87%	90%

Diversity analysis



Key question responses (ethnicity) HMP Grendon 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

		Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		32	144
1.3	Are you sentenced?	100%	100%
1.5	Are you a foreign national?	8%	3%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	100%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	3%	3%
1.1	Are you Muslim?	50%	1%
1.12	Do you consider yourself to have a disability?	8%	28%
1.13	Are you a veteran (ex-armed services)?	3%	6%
1.14	Is this your first time in prison?	54%	30%
2.6	Were you treated well/very well by the escort staff?	95%	84%
2.7	Before you arrived here were you told that you were coming here?	76%	75%
3.2	When you were searched in reception, was this carried out in a respectful way?	97%	94%
3.3	Were you treated well/very well in reception?	92%	99%
3.4	Did you have any problems when you first arrived?	40%	40%
3.7	Did you have access to someone from health care when you first arrived here?	65%	76%
3.9	Did you feel safe on your first night here?	97%	96%
3.10	Have you been on an induction course?	84%	85%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	65%	78%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
4.4	Are you normally offered enough clean, suitable clothes for the week?	95%	87%
4.4	Are you normally able to have a shower every day?	97%	99%
4.4	Is your cell call bell normally answered within five minutes?	60%	47%
4.5	Is the food in this prison good/very good?	92%	95%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	24%	37%
4.7	Are you able to speak to a Listener at any time, if you want to?	36%	36%
4.8	Do you feel your religious beliefs are respected?	68%	64%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	78%	74%
5.1	Is it easy to make an application?	100%	97%
5.3	Is it easy to make a complaint?	81%	79%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	78%	92%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	53%	59%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	3%	3%
7.1	Do most staff, in this prison, treat you with respect?	86%	96%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	91%	96%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	42%	62%
7.4	Do you have a personal officer?	86%	92%
8.1	Have you ever felt unsafe here?	39%	32%
8.2	Do you feel unsafe now?	14%	9%
8.3	Have you been victimised by other prisoners?	33%	33%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	22%	21%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	9%	1%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	3%	3%
8.5	Have you been victimised because of your nationality? (By prisoners)	6%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	3%	1%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Black and minority ethnic prisoners	White prisoners
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
8.6	Have you been victimised by a member of staff?	19%	12%
8.7	Have you ever felt threatened or intimidated by staff here?	17%	6%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	0%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	1%
8.7	Have you been victimised because of your nationality? (By staff)	0%	1%
8.7	Have you been victimised because you have a disability? (By staff)	3%	1%
9.1	Is it easy/very easy to see the doctor?	64%	71%
9.1	Is it easy/ very easy to see the nurse?	74%	83%
9.4	Are you currently taking medication?	34%	60%
9.6	Do you feel you have any emotional well being/mental health issues?	14%	56%
10.3	Is it easy/very easy to get illegal drugs in this prison?	9%	14%
11.2	Are you currently working in the prison?	77%	74%
11.2	Are you currently undertaking vocational or skills training?	9%	18%
11.2	Are you currently in education (including basic skills)?	20%	24%
11.2	Are you currently taking part in an offending behaviour programme?	46%	45%
11.4	Do you go to the library at least once a week?	62%	70%
11.6	Do you go to the gym three or more times a week?	60%	46%
11.7	Do you go outside for exercise three or more times a week?	40%	44%
11.8	On average, do you go on association more than five times each week?	94%	91%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	64%	73%
12.2	Have you had any problems sending or receiving mail?	28%	15%
12.3	Have you had any problems getting access to the telephones?	6%	7%

Diversity Analysis



Key question responses (disability) HMP Grendon 2017

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

Key to tables

	Any percentage highlighted in green is significantly better	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		
Number of completed questionnaires returned		44	137
1.3	Are you sentenced?	100%	100%
1.5	Are you a foreign national?	2%	4%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	6%	22%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	6%	1%
1.1	Are you Muslim?	2%	12%
1.12	Do you consider yourself to have a disability?	-	-
1.13	Are you a veteran (ex-armed services)?	10%	5%
1.14	Is this your first time in prison?	29%	35%
2.6	Were you treated well/very well by the escort staff?	73%	90%
2.7	Before you arrived here were you told that you were coming here?	80%	73%
3.2	When you were searched in reception, was this carried out in a respectful way?	88%	96%
3.3	Were you treated well/very well in reception?	96%	99%
3.4	Did you have any problems when you first arrived?	64%	34%
3.7	Did you have access to someone from health care when you first arrived here?	72%	73%
3.9	Did you feel safe on your first night here?	86%	99%
3.10	Have you been on an induction course?	86%	85%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	71%	77%

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?	90%	88%
4.4	Are you normally able to have a shower every day?	96%	99%
4.4	Is your cell call bell normally answered within five minutes?	48%	50%
4.5	Is the food in this prison good/very good?	98%	91%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	31%	34%
4.7	Are you able to speak to a Listener at any time, if you want to?	32%	38%
4.8	Do you feel your religious beliefs are respected?	70%	62%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	75%	73%
5.1	Is it easy to make an application?	94%	99%
5.3	Is it easy to make a complaint?	75%	81%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	88%	90%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	55%	58%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	2%	3%
7.1	Do most staff, in this prison, treat you with respect?	86%	97%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	88%	98%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	50%	62%
7.4	Do you have a personal officer?	94%	90%
8.1	Have you ever felt unsafe here?	54%	27%
8.2	Do you feel unsafe now?	21%	7%
8.3	Have you been victimised by other prisoners?	52%	27%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	38%	16%
8.5	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	4%	2%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	4%	2%
8.5	Have you been victimised because of your nationality? (By prisoners)	2%	1%
8.5	Have you been victimised because of your age? (By prisoners)	6%	1%
8.5	Have you been victimised because you have a disability? (By prisoners)	6%	0%

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		
8.6	Have you been victimised by a member of staff?	27%	10%
8.7	Have you ever felt threatened or intimidated by staff here?	14%	5%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	0%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	2%	0%
8.7	Have you been victimised because of your nationality? (By staff)	0%	1%
8.7	Have you been victimised because of your age? (By staff)	0%	0%
8.7	Have you been victimised because you have a disability? (By staff)	4%	0%
9.1	Is it easy/very easy to see the doctor?	63%	71%
9.1	Is it easy/ very easy to see the nurse?	75%	83%
9.4	Are you currently taking medication?	73%	49%
9.6	Do you feel you have any emotional well being/mental health issues?	73%	40%
10.3	Is it easy/very easy to get illegal drugs in this prison?	20%	10%
11.2	Are you currently working in the prison?	76%	76%
11.2	Are you currently undertaking vocational or skills training?	19%	15%
11.2	Are you currently in education (including basic skills)?	25%	25%
11.2	Are you currently taking part in an offending behaviour programme?	45%	46%
11.4	Do you go to the library at least once a week?	69%	70%
11.6	Do you go to the gym three or more times a week?	41%	51%
11.7	Do you go outside for exercise three or more times a week?	43%	42%
11.8	On average, do you go on association more than five times each week?	88%	91%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	73%	71%
12.2	Have you had any problems sending or receiving mail?	18%	17%
12.3	Have you had any problems getting access to the telephones?	12%	5%

Diversity analysis



Key question responses (sexual orientation) HMP Grendon 2017

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

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to be homosexual or bisexual	Consider themselves to be heterosexual
	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		
Number of completed questionnaires returned		23	158
1.3	Are you sentenced?	100%	100%
1.5	Are you a foreign national?	0%	4%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	8%	20%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	8%	2%
1.1	Are you Muslim?	4%	11%
1.12	Do you consider yourself to have a disability?	30%	24%
1.13	Are you a veteran (ex-armed services)?	4%	7%
1.14	Is this your first time in prison?	52%	31%
2.6	Were you treated well/very well by the escort staff?	82%	86%
2.7	Before you arrived here were you told that you were coming here?	78%	75%
3.2	When you were searched in reception, was this carried out in a respectful way?	89%	96%
3.3	Were you treated well/very well in reception?	96%	98%
3.4	Did you have any problems when you first arrived?	44%	41%
3.7	Did you have access to someone from health care when you first arrived here?	78%	72%
3.9	Did you feel safe on your first night here?	96%	96%
3.10	Have you been on an induction course?	78%	86%
4.1	Is it easy/very easy to communicate with your solicitor or legal representative?	82%	74%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to be homosexual or bisexual	Consider themselves to be heterosexual
	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?	74%	91%
4.4	Are you normally able to have a shower every day?	96%	99%
4.4	Is your cell call bell normally answered within five minutes?	48%	50%
4.5	Is the food in this prison good/very good?	89%	93%
4.6	Does the shop /canteen sell a wide enough range of goods to meet your needs?	48%	32%
4.7	Are you able to speak to a Listener at any time, if you want to?	19%	39%
4.8	Do you feel your religious beliefs are respected?	39%	68%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	70%	74%
5.1	Is it easy to make an application?	96%	98%
5.3	Is it easy to make a complaint?	82%	79%
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	92%	89%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	77%	54%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	4%	3%
7.1	Do most staff, in this prison, treat you with respect?	96%	94%
7.2	Is there a member of staff you can turn to for help if you have a problem in this prison?	100%	95%
7.3	Do staff normally speak to you at least most of the time during association time? (most/all of the time)	70%	57%
7.4	Do you have a personal officer?	100%	89%
8.1	Have you ever felt unsafe here?	48%	31%
8.2	Do you feel unsafe now?	8%	11%
8.3	Have you been victimised by other prisoners?	50%	30%
8.5	Have you ever felt threatened or intimidated by other prisoners here?	27%	20%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	0%	3%
8.5	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	3%
8.5	Have you been victimised because of your sexual orientation? (By prisoners)	12%	1%
8.5	Have you been victimised because of your age? (By prisoners)	0%	3%
8.5	Have you been victimised because you have a disability? (By prisoners)	0%	2%

Diversity analysis

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to be homosexual or bisexual	Consider themselves to be heterosexual
	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?	12%	14%
8.7	Have you ever felt threatened or intimidated by staff here?	4%	8%
8.7	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	0%	0%
8.7	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	1%
8.7	Have you been victimised because of your sexual orientation? (By staff)	4%	0%
8.7	Have you been victimised because of your age? (By staff)	0%	0%
8.7	Have you been victimised because you have a disability? (By staff)	4%	1%
9.1	Is it easy/very easy to see the doctor?	73%	68%
9.1	Is it easy/ very easy to see the nurse?	77%	82%
9.4	Are you currently taking medication?	68%	53%
9.6	Do you feel you have any emotional well being/mental health issues?	54%	48%
10.3	Is it easy/very easy to get illegal drugs in this prison?	8%	13%
11.2	Are you currently working in the prison?	73%	76%
11.2	Are you currently undertaking vocational or skills training?	12%	17%
11.2	Are you currently in education (including basic skills)?	27%	25%
11.2	Are you currently taking part in an offending behaviour programme?	40%	47%
11.4	Do you go to the library at least once a week?	76%	69%
11.6	do you go to the gym three or more times a week?	32%	51%
11.7	Do you go outside for exercise three or more times a week?	36%	44%
11.8	On average, do you go on association more than five times each week?	92%	91%
11.9	Do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc)	77%	70%
12.2	Have you had any problems sending or receiving mail?	20%	17%
12.3	Have you had any problems getting access to the telephones?	23%	5%



Prisoner survey responses HMP Grendon 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	G wing	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		26	156
SECTION 1: General information			
1.2	Are you under 21 years of age?	0%	1%
1.3	Are you sentenced?	100%	100%
1.3	Are you on recall?	7%	3%
1.4	Is your sentence less than 12 months?	0%	0%
1.4	Are you here under an indeterminate sentence for public protection (IPP prisoner)?	10%	21%
1.5	Are you a foreign national?	0%	5%
1.6	Do you understand spoken English?	100%	100%
1.7	Do you understand written English?	100%	100%
1.8	Are you from a minority ethnic group? (Including all those who did not tick white British, white Irish or white other categories.)	27%	17%
1.9	Do you consider yourself to be Gypsy/ Romany/ Traveller?	0%	3%
1.1	Are you Muslim?	17%	9%
1.11	Are you homosexual/gay or bisexual?	16%	12%
1.12	Do you consider yourself to have a disability?	10%	27%
1.13	Are you a veteran (ex-armed services)?	0%	7%
1.14	Is this your first time in prison?	47%	32%
1.15	Do you have any children under the age of 18?	50%	36%
SECTION 2: Transfers and escorts			
On your most recent journey here:			
2.1	Did you spend more than 2 hours in the van?	57%	73%
2.5	Did you feel safe?	93%	79%
2.6	Were you treated well/very well by the escort staff?	90%	85%
2.7	Before you arrived here were you told that you were coming here?	77%	75%
2.8	When you first arrived here did your property arrive at the same time as you?	90%	90%

Key to tables

	Any percentage highlighted in green is significantly better	G wing	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction			
3.1	Were you in reception for less than 2 hours?	93%	90%
3.2	When you were searched in reception, was this carried out in a respectful way?	97%	94%
3.3	Were you treated well/very well in reception?	97%	98%
	When you first arrived:		
3.4	Did you have any problems?	52%	39%
3.4	Did you have any problems with loss of property?	19%	11%
3.4	Did you have any housing problems?	12%	1%
3.4	Did you have any problems contacting employers?	0%	0%
3.4	Did you have any problems contacting family?	12%	8%
3.4	Did you have any problems ensuring dependants were being looked after?	4%	0%
3.4	Did you have any money worries?	8%	6%
3.4	Did you have any problems with feeling depressed or suicidal?	12%	9%
3.4	Did you have any physical health problems?	12%	7%
3.4	Did you have any mental health problems?	8%	17%
3.4	Did you have any problems with needing protection from other prisoners?	0%	1%
3.4	Did you have problems accessing phone numbers?	12%	10%
	When you first arrived here, were you offered any of the following:		
3.6	Tobacco?	27%	63%
3.6	A shower?	53%	58%
3.6	A free telephone call?	53%	51%
3.6	Something to eat?	73%	71%
3.6	PIN phone credit?	30%	38%
3.6	Toiletries/ basic items?	77%	50%

Key to tables

	Any percentage highlighted in green is significantly better	G wing	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 3: Reception, first night and induction continued			
	When you first arrived here did you have access to the following people:		
3.7	The chaplain or a religious leader?	67%	71%
3.7	Someone from health services?	73%	72%
3.7	A Listener/Samaritans?	20%	32%
3.7	Prison shop/ canteen?	27%	24%
	When you first arrived here were you offered information about any of the following:		
3.8	What was going to happen to you?	73%	88%
3.8	Support was available for people feeling depressed or suicidal?	61%	71%
3.8	How to make routine requests?	73%	70%
3.8	Your entitlement to visits?	77%	61%
3.8	Health services?	73%	72%
3.8	The chaplaincy?	67%	67%
3.9	Did you feel safe on your first night here?	100%	96%
3.10	Have you been on an induction course?	73%	87%
3.12	Did you receive an education (skills for life) assessment?	69%	76%
SECTION 4: Legal rights and respectful custody			
	In terms of your legal rights, is it easy/very easy to:		
4.1	Communicate with your solicitor or legal representative?	73%	76%
4.1	Attend legal visits?	45%	56%
4.1	Get bail information?	11%	18%
4.2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	10%	34%
4.3	Can you get legal books in the library?	39%	63%
	For the wing/unit you are currently on:		
4.4	Are you normally offered enough clean, suitable clothes for the week?	70%	92%
4.4	Are you normally able to have a shower every day?	97%	99%
4.4	Do you normally receive clean sheets every week?	97%	85%
4.4	Do you normally get cell cleaning materials every week?	90%	93%
4.4	Is your cell call bell normally answered within five minutes?	53%	49%
4.4	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	93%	79%
4.4	Can you normally get your stored property, if you need to?	30%	37%
4.5	Is the food in this prison good/very good?	100%	92%
4.6	Does the shop/canteen sell a wide enough range of goods to meet your needs?	33%	34%
4.7	Are you able to speak to a Listener at any time, if you want to?	41%	36%
4.8	Are your religious beliefs are respected?	61%	64%
4.9	Are you able to speak to a religious leader of your faith in private if you want to?	70%	74%
4.10	Is it easy/very easy to attend religious services?	50%	70%

Key to tables

	Any percentage highlighted in green is significantly better	G wing	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 5: Applications and complaints			
5.1	Is it easy to make an application?	100%	97%
5.3	Is it easy to make a complaint?	80%	79%
5.5	Have you ever been prevented from making a complaint when you wanted to?	3%	13%
5.6	Is it easy/very easy to see the Independent Monitoring Board?	39%	64%
SECTION 6: Incentive and earned privileges scheme			
6.1	Do you feel you have been treated fairly in your experience of the IEP scheme?	80%	91%
6.2	Do the different levels of the IEP scheme encourage you to change your behaviour?	67%	56%
6.3	In the last six months have any members of staff physically restrained you (C&R)?	3%	3%
SECTION 7: Relationships with staff			
7.1	Do most staff, in this prison, treat you with respect?	97%	94%
7.2	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	93%	96%
7.3	Has a member of staff checked on you personally in the last week to see how you were getting on?	67%	68%
7.4	Do staff normally speak to you most of the time/all of the time during association?	53%	59%
7.5	Do you have a personal officer?	84%	91%

Key to tables

	Any percentage highlighted in green is significantly better	G wing	All other wings
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
SECTION 8: Safety			
8.1	Have you ever felt unsafe here?	27%	34%
8.2	Do you feel unsafe now?	16%	10%
8.4	Have you been victimised by other prisoners here?	16%	36%
	Since you have been here, have other prisoners:		
8.5	Made insulting remarks about you, your family or friends?	3%	21%
8.5	Hit, kicked or assaulted you?	3%	3%
8.5	Sexually abused you?	0%	1%
8.5	Threatened or intimidated you?	0%	25%
8.5	Taken your canteen/property?	0%	1%
8.5	Victimised you because of medication?	0%	0%
8.5	Victimised you because of debt?	0%	0%
8.5	Victimised you because of drugs?	0%	0%
8.5	Victimised you because of your race or ethnic origin?	0%	3%
8.5	Victimised you because of your religion/religious beliefs?	0%	4%
8.5	Victimised you because of your nationality?	0%	2%
8.5	Victimised you because you were from a different part of the country?	0%	4%
8.5	Victimised you because you are from a traveller community?	0%	0%
8.5	Victimised you because of your sexual orientation?	3%	2%
8.5	Victimised you because of your age?	0%	3%
8.5	Victimised you because you have a disability?	0%	2%
8.5	Victimised you because you were new here?	0%	3%
8.5	Victimised you because of your offence/crime?	10%	16%
8.5	Victimised you because of gang related issues?	0%	1%

Key to tables

	Any percentage highlighted in green is significantly better	C wing	All other wings
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SECTION 8: Safety continued			
8.6	Have you been victimised by staff here?	7%	16%
	Since you have been here, have staff:		
8.7	Made insulting remarks about you, your family or friends?	0%	4%
8.7	Hit, kicked or assaulted you?	0%	0%
8.7	Sexually abused you?	0%	1%
8.7	Threatened or intimidated you?	3%	8%
8.7	Victimised you because of medication?	3%	1%
8.7	Victimised you because of debt?	0%	0%
8.7	Victimised you because of drugs?	0%	0%
8.7	Victimised you because of your race or ethnic origin?	0%	0%
8.7	Victimised you because of your religion/religious beliefs?	0%	1%
8.7	Victimised you because of your nationality?	0%	1%
8.7	Victimised you because you were from a different part of the country?	0%	1%
8.7	Victimised you because you are from a traveller community?	0%	0%
8.7	Victimised you because of your sexual orientation?	0%	1%
8.7	Victimised you because of your age?	0%	0%
8.7	Victimised you because you have a disability?	0%	1%
8.7	Victimised you because you were new here?	3%	3%
8.7	Victimised you because of your offence/crime?	0%	7%
8.7	Victimised you because of gang related issues?	0%	0%
SECTION 9: Health services			
9.1	Is it easy/very easy to see the doctor?	57%	71%
9.1	Is it easy/very easy to see the nurse?	67%	84%
9.1	Is it easy/very easy to see the dentist?	30%	41%
9.4	Are you currently taking medication?	52%	55%
9.6	Do you have any emotional well being or mental health problems?	45%	49%
SECTION 10: Drugs and alcohol			
10.1	Did you have a problem with drugs when you came into this prison?	27%	26%
10.2	Did you have a problem with alcohol when you came into this prison?	16%	24%
10.3	Is it easy/very easy to get illegal drugs in this prison?	10%	13%
10.4	Is it easy/very easy to get alcohol in this prison?	3%	5%
10.5	Have you developed a problem with drugs since you have been in this prison?	0%	3%
10.6	Have you developed a problem with diverted medication since you have been in this prison?	3%	0%

Key to tables

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	Percentages which are not highlighted show there is no significant difference		
SECTION 11: Activities			
	Is it very easy/ easy to get into the following activities:		
11.1	A prison job?	48%	66%
11.1	Vocational or skills training?	17%	34%
11.1	Education (including basic skills)?	17%	65%
11.1	Offending Behaviour Programmes?	28%	55%
	Are you currently involved in any of the following activities:		
11.2	A prison job?	69%	77%
11.2	Vocational or skills training?	3%	18%
11.2	Education (including basic skills)?	0%	29%
11.2	Offending Behaviour Programmes?	24%	50%
11.4	Do you go to the library at least once a week?	59%	71%
11.5	Does the library have a wide enough range of materials to meet your needs?	79%	78%
11.6	Do you go to the gym three or more times a week?	41%	50%
11.7	Do you go outside for exercise three or more times a week?	45%	42%
11.8	Do you go on association more than five times each week?	97%	90%
11.9	Do you spend ten or more hours out of your cell on a weekday?	67%	72%
SECTION 12: Friends and family			
12.1	Have staff supported you and helped you to maintain contact with family/friends while in this prison?	61%	78%
12.2	Have you had any problems with sending or receiving mail?	16%	17%
12.3	Have you had any problems getting access to the telephones?	3%	8%
12.4	Is it easy/ very easy for your friends and family to get here?	27%	26%
SECTION 13: Preparation for release			
13.3	Do you have a named offender supervisor in this prison?	52%	95%
13.10	Do you have a needs based custody plan?	7%	22%
13.11	Do you feel that any member of staff has helped you to prepare for release?	31%	53%