

Report on an announced inspection of

# **HMP Ford**

29 November – 3 December 2010

by HM Chief Inspector of Prisons

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# Introduction

Our inspection of HMP Ford took place at the end of November 2010. One month later, on New Year's Day 2011, a major disturbance at the prison caused considerable damage and raised significant public concern. This inspection report does not explain – and certainly does not excuse – the disturbance. It does, however, describe conditions in the prison one month before the disturbance took place.

Inspectors made their assessments in the context of the prison's purpose and role. HMP Ford is a Category D prison 'with an emphasis on resettlement'. Category D prisons are defined by the Prison Service as being for prisoners 'who can be reasonably trusted in open conditions'. Most prisoners at Ford were coming to the end of long sentences and preparing for release, although about 10% were serving short sentences. All were considered to be low risk.

HMP Ford was not without strengths but it was clear during the inspection that the trust on which the smooth running of the prison depended was in short supply, and the prison was failing to deliver its fundamental resettlement role effectively.

The prison was safe for most prisoners. Care for vulnerable prisoners who might be at risk of suicide or self-harm was a particular strength. Punishments were generally proportionate and the use of force was low. The segregation unit was rarely used. Prisoners spoke very positively about the work of the chaplaincy. Health care was good.

Prisoners should be usefully occupied and it was good to see that at Ford there was enough work, training and education for the population. This had improved since our last inspection. Work was reasonably varied and, as well as contributing to the running of the prison, jobs ranged from producing poppies for the Royal British Legion to a horticulture department involved in the large-scale supply of plants to prisons, local authorities and the public, as well as produce for the prison's own kitchens. The prison workshops had good links with private sector employers. The quality of training was good. Achievement rates in literacy and numeracy had improved significantly since our last inspection. The library was well stocked and prisoners told us they valued the PE provision.

In our last inspection report, we noted that the smuggling in of alcohol, especially at night, had become a significant problem. Alcohol remained an issue but on this inspection we were more concerned about the availability of drugs. Prior to the inspection, the drug strategy had been in disarray. Over 40% of prisoners in our survey said it was easy to obtain illegal drugs. An average of almost one in eight prisoners had tested positive for drugs in random mandatory tests. There was a good rate of detection in suspicion drug testing, but staffing shortages meant that many tests could not be conducted within the necessary timescales.

Alcohol breath testing was unsophisticated. Disciplinary hearings had been carried out for 19 positive breath tests between May and October 2010 but we were surprised that no figures for the total number of tests conducted were available. In terms of actual finds, mobile phones and accessories were the items discovered most frequently, followed by drugs and drug paraphernalia. Alcohol finds were common but not as prominent as at previous inspections, although in recent months the number of security reports relating to alcohol had risen significantly.

The prison had made some positive efforts to improve security. The staff in the security department were committed and adaptable. As the name implies, an 'open' prison will never be completely secure: it is a low security facility for low-risk prisoners. Nevertheless, physical

security had improved. The fence around the residential areas had been improved and continuous remote camera surveillance facilities enhanced. Joint working with the local police had also improved and the police had arrested and charged people committing offences in the prison grounds. Absconds had reduced but were still high. An average of 16 prisoners were returned to closed conditions each month.

However, open prisons have relatively small numbers of staff and depend much more than closed prisons on positive relationships or 'dynamic security' to run smoothly and safely. At Ford, we were concerned that this dynamic security was undermined by poor staff-prisoner relationships. Fewer than half the prisoners in our survey said that most staff treated them with respect against an open prison comparator of 77%. Prisoners raised this repeatedly with inspectors and, while we saw some good staff-prisoner interaction, our own observation bore out prisoners' concerns. Relationships were further weakened by the lack of an effective personal officer scheme.

Prisoners had little faith in formal mechanisms for resolving their concerns and told us the application process was slow and unfair. Some said they were concerned that if they made a complaint they risked being returned to closed conditions. Prisoner diversity consultative forums had been organised but no prisoners had attended. There were certainly issues to discuss: for example, black and minority ethnic prisoners appeared to have had less access to release on temporary licence for a sustained period and in the month prior to the inspection, no black or minority ethnic prisoners were engaged in paid work outside the prison, despite comprising a third of the population.

Overlaying all these concerns was prisoners' frustration about the poor resettlement provision. Prisoners' perceptions about resettlement at Ford were significantly worse than other open prisons. For prisoners who had served long sentences, processes like release on temporary licence were critical steps in preparing them for the eagerly anticipated, but sometimes bewildering, world outside prison and they needed a range of practical support – with getting a roof over their heads, some sort of job, rebuilding family relationships and so on – to prepare for law-abiding and useful lives after release. Prisoners were frustrated by poor communication about what was available and a lack of staff resources in the offender management unit (OMU) which administered these processes. The pressure on the OMU – and the prison as a whole – was exacerbated by the 10% of prisoners serving short sentences. Little was available for these prisoners and they too were frustrated but, unlike longer-term prisoners, they had little investment in the regime.

Open prisons have a crucial role in preparing low risk, particularly long-term, prisoners for life back in the community. They do this by testing prisoners in low security conditions and gradually reintroducing them into society. Most open prisons perform this role effectively. Unfortunately, this was not the case at Ford. Instead, poor relationships were undermining the development of a strong positive culture, essential to responsible living and dynamic security. Ford's resettlement and offender management are critical weaknesses for a prison that should be focused squarely on preparing prisoners for a return to the community. The practical resettlement needs of individual prisoners should shape the entire approach of this establishment, something that we have now had to repeat at too many inspections. There have been some recent improvements but this time there must be sustained progress supported at every level.

**Nick Hardwick**  
HM Chief Inspector of Prisons

January 2011

# Fact page

## **Task of the establishment**

HMP Ford is a category D training establishment with an emphasis on resettlement.

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

Public

## **Region/Department**

South east

## **Number held**

547

## **Certified normal accommodation**

557

## **Operational capacity**

557

## **Date of last full inspection**

Unannounced short follow-up inspection October 2008

Full announced inspection November 2005

## **Brief history**

Formerly a Fleet Air Arm station, it converted to an open prison in 1960.

## **Short description of residential units**

The billets from the original Fleet Air Arm base remain in place and comprise most of the living accommodation, in huts and landings with single and double cells.

## **Escort contractor**

Serco

## **Health service commissioner and providers**

West Sussex Primary Care Trust

Sussex Community NHS Trust

## **Learning and skills providers**

The Manchester College



# Healthy prison summary

## Introduction

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HP1 All inspection 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 criteria are:

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

HP2 Under each test, we make an assessment of outcomes for prisoners and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the National Offender Management Service.

**- outcomes for prisoners are good against this healthy prison test.**

There is no evidence that outcomes for prisoners are being adversely affected in any significant areas.

**- outcomes for prisoners are reasonably good against this healthy prison test.**

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 against this healthy prison test.**

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 against this healthy prison test.**

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.

## Safety

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HP3 The reception layout and process had improved. Many prisoners wanted more help to adjust to life at Ford. There was little evidence of bullying but anti-bullying systems

were underdeveloped. Prisoners at risk of self-harm were well managed. Physical and procedural security were appropriate for open conditions but undermined by poor dynamic security. The segregation unit was generally used for short periods only. Adjudications were fair and punishments proportionate. Use of force was rare but there were some shortcomings in governance. There was evidence of considerable drug use and the integrated drug treatment system (IDTS) had not yet been established. Outcomes for prisoners against this healthy prison test were reasonably good.

- HP4 Prisoners reported positively on the conduct of escort staff. Some had experienced long waits in escort vehicles outside reception, but managers had recently taken steps to ensure that this no longer happened. The reception layout had changed and it was now more spacious. New arrivals could spend considerable periods going through the reception process, but there were sensible new arrangements to book in quickly those returning after temporary release. Reception risk assessment interviews were not held in private. Strip-searching after arrival was routine and not intelligence led and the BOSS (body orifice security scanner) chair was not used.
- HP5 There were no formal arrangements to support prisoners on their first night, but most people said they felt safe on the first night. Prisoner orderlies delivered a useful interactive induction, though many prisoners felt that they were not given enough help to adjust to open conditions after arrival. There was a lot of useful information in the induction room, including some in different languages.
- HP6 There was little evidence of bullying and there was a comprehensive violence reduction policy. The anti-bullying coordinator did not have enough time to meet all her responsibilities and information sharing between the security and social inclusion departments was weak. There had been some work to improve identification of prisoners who were bullying, and a recent increase in the numbers of bullying management records opened. However, the records were generally poorly completed and there was no system for supporting victims.
- HP7 There was little self-harm and good support for those subject to assessment, care in custody and teamwork (ACCT) documents. ACCT assessments were completed promptly, reviews were timely and the inclusion of family and friends in some review meetings was positive. There was generally good engagement with prisoners regarding issues relating to vulnerability. In some cases, night observations were too predictable. There was an active group of Listeners who were accessible to prisoners at all times. Not all staff carried ligature knives routinely at the time of the inspection, which could have led to crucial delays.
- HP8 The flow of drugs and mobile phones into the establishment continued to be the major security concerns. Alcohol finds were regular but less common than at previous inspections. The security committee was well attended and there had been improvements in physical security, but dynamic security based on strong staff-prisoner relationships was relatively weak. Joint working with local police had improved. There had been some decrease in security information and this was being addressed. Information was acted on appropriately. Many intelligence objectives had been repeated over many months.
- HP9 The segregation unit was used frequently for short periods, usually pending transfer. A number of departments visited promptly, which was commendable given the short time that prisoners were usually there. The cells were clean and reasons for

separation were provided. Prisoners located there were not allowed to exercise in the open air. Segregation paperwork was generally completed adequately, but there were some gaps and occasional long delays in duty governor authorisation.

HP10 The governor carried out quality checks of adjudications and had picked up relevant issues. Adjudications were carried out fairly. Punishments were proportionate and records showed that adjudicators engaged well with personal issues underlying poor behaviour. Incentives and earned privileges reviews were regular and appeared to be fair and thorough. Use of force was rare and normally involved low-level physical coercion. There had been no management checking of use of force records, but incidents were discussed at the security committee.

HP11 Over 40% of prisoners in our survey<sup>1</sup> said it was easy to obtain illegal drugs and the random mandatory drug testing positive rate was above target. The suspicion test positive rate was over 50%, which represented a good rate of detection, though a number of suspicion tests were falling out of time. The total number of alcohol breath tests was not monitored. The IDTS was not yet in place and there were no opiate substitution or detoxification treatments available.

## Respect

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HP12 The appearance of residential units had improved, but some cells were in need of more substantial refurbishment. Prisoners had little faith in the laundry facilities. Poor and unconstructive staff-prisoner relations remained a major concern. Personal officer work was weak. The quality of food was variable. Diversity structures were underdeveloped and work with prisoners with disabilities in particular needed development. Race equality work was reasonably well managed, but some concerning disparities were evident from monitoring. Some promising work was being done to support gay and bisexual prisoners. Faith provision was good. Prisoners had little confidence in the application and complaints systems and the quality of responses to complaints was variable at best. Health services were generally good. Outcomes for prisoners against this healthy prison test were not sufficiently good.

HP13 Decoration had improved the residential units cosmetically, but some cells were cramped and in a poor state of repair. The units were reasonably clean but the equipment provided to clean cells was inadequate. Most cell furniture was in poor

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<sup>1</sup> **Inspection methodology:** There are five key sources of evidence for inspection: 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, applying both qualitative and quantitative methodologies. All findings and judgements are triangulated, which increases the validity of the data gathered. Survey results show the collective response (in percentages) from prisoners in the establishment being inspected compared with the collective response (in percentages) from respondents in all establishments of that type (the comparator figure). Where references to comparisons between these two sets of figures are made in the report, these relate to statistically significant differences only. Statistical significance is a way of estimating the likelihood that a difference between two samples indicates a real difference between the populations from which the samples are taken, rather than being due to chance. If a result is very unlikely to have arisen by chance, we say it is 'statistically significant'. The significance level is set at 0.05, which means that there is only a 5% chance that the difference in results is due to chance. (Adapted from the *Dictionary of Forensic Psychology*: HM Inspectorate of Prisons.)

condition and not all shared cells had lockable cabinets. Confidence in the effectiveness of the prison laundry was low and many prisoners washed their clothes by hand in plastic containers. Toasters were provided but more could have been done to help prisoners prepare for independent living through opportunities for self-catering.

- HP14 Less than half the prisoners in our survey said that most staff treated them with respect against an open prison comparator of 77%. While we saw some good staff-prisoner interaction, we had many more reports of peremptory treatment and witnessed abrupt and unhelpful staff responses to requests for information. Prisoners consistently told us that this was one of the major problems and questions were often about resettlement issues. Most staff routinely used surnames only in addressing prisoners. Consultation through the offender consultative committee was useful, but there was scope for direct consultation with more prisoners. Most prisoners had little personal officer contact and some had no identified personal officer. Most case note entries in our sample were negative, with little evidence of engagement by personal officers.
- HP15 Only 13% of prisoners in our survey said that food was good or very good, against an open prison comparator of 43%. The quality of food that we sampled varied from poor to average. The kitchen was in a poor state at the night visit, with unwashed utensils, food on the floor and uncovered bins. The menu was reasonably varied and special arrangements for recent religious festivals had been good. Staff supervising the dining hall had refused access to prisoners who were late for meals, even if they had legitimate reasons.
- HP16 Diversity was underdeveloped and the policy was still in draft. At the time of the inspection, the work of the social inclusion unit that covered diversity and violence reduction was hampered by a staff vacancy. A number of well-supported diversity representatives performed a useful function in advocating for prisoners. Diversity prisoner meetings had so far been poorly attended. There were few positive images celebrating diversity around the establishment. Equality impact assessments had not been completed.
- HP17 There was little evidence of racial tension between prisoners. Diversity incident reports were thoroughly investigated by the race equality officer (REO) but replies to prisoners did not adequately reflect those investigations. In some cases the REO had inappropriately been responsible for investigating more senior staff. There was little use of mediation to help resolve issues. Travellers were identified and had a dedicated prisoner representative.
- HP18 Monitoring data were analysed at the monthly social inclusion meetings but black and minority ethnic prisoners were underrepresented in release on temporary licence (ROTL) for five consecutive months with no concluded investigation as to why this might be. In the month prior to the inspection, no black or minority ethnic prisoners were engaged in paid work outside the prison despite comprising a third of the population.
- HP19 The level of specialist support for foreign nationals was limited and the foreign national policy did not focus on needs beyond immigration issues. Risk assessment boards for foreign nationals were often delayed as a result of slow responses to requests for information from the UK Border Agency. Offender management unit

systems for chasing progress were ineffective. There was a helpful list of staff and prisoners able and willing to act as interpreters for foreign national prisoners.

- HP20 The overall coordination of work with prisoners with disabilities was weak. Personal emergency evacuation plans had all been completed the week before the inspection and prisoners with disabilities were themselves unaware of the arrangements in place. There were no clear criteria for location to the unit which contained adapted cells. The result of this was that some people in need of adapted cells were located elsewhere while others with less need took up those cells. There was some provision for older prisoners, including suitable work posts, but there were no overarching governance arrangements to ensure that their needs were addressed.
- HP21 As in most prisons, it was clear that some men were afraid of being open about their sexual orientation. There had been two recent meetings focusing on the needs of gay and bisexual prisoners and the work of the peer supporter with responsibility for sexual orientation was well advertised.
- HP22 Prisoners reported very positively on faith provision and there was effective team-working between different faith representatives. There were good activities and religious celebrations, and some links had been made with outside faith communities. Facilities for worship were good. The chaplaincy provided much appreciated financial assistance to help support resettlement needs.
- HP23 Application and complaints forms were freely available. Prisoners had little faith in the application system and frequently complained of slow responses. Managers had with mixed success attempted to address the perception among prisoners that complaining led to being returned to closed conditions. Responses to complaints were generally timely but often abrupt. In one case, the officer who was the subject of the complaint had investigated it. Complaints were appropriately analysed and considered but it was inappropriate that the complaints clerk was tasked with conducting quality checks.
- HP24 The legal services officer normally met the demand for his services, but had no cover when not on duty. He had no recent legal services training, which was no longer nationally available through the Prison Service, and no specific training in immigration issues. The library contained an appropriate range of legal text books and Prison Service Orders.
- HP25 Health services were good and prisoners had generally reported positively on the level of service. Partnership arrangements with the primary care trust had just been re-established and some recently implemented positive changes in governance were not yet properly embedded. There was a range of nurse-led clinics and we observed professional and polite staff engagement with prisoners. There was only one defibrillator on site and this was not accessible out of hours or at weekends. There was reasonable mental health support in the establishment, but access to community mental health services was more of a concern. Pharmacy arrangements were adequate but the pharmacist did not visit the prison often enough. The dental suite had been refurbished and dental services were reasonable, but waiting lists for routine appointments were long.

## Purposeful activity

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HP26 There was enough work, education and other activities for the population. There was more accredited vocational training and a positive training environment. There was a good range of work, but pay rates were generally too low to fund resettlement activities. There was little outside employment. Education was valued by prisoners and the quality of teaching and learning was adequate overall. The library provided a reasonably good service. Physical education had improved and was valued by prisoners. Outcomes for prisoners against this healthy prison test were reasonably good.

HP27 Strategic performance management of learning and skills had been inconsistent and data were not used sufficiently to evaluate learning and achievement. There was a wide range of work and some good links with external companies, though these had led to employment for a relatively small number of prisoners. The training environment was good and workshops were well equipped. Standards of work were good, particularly in painting and decorating. There were more opportunities for accreditation in the workshops but sometimes at too low a level. There was reasonable achievement of qualifications. The promotion of equality and diversity in learning and skills was satisfactory but managers did not fully utilise monitoring data to identify gaps or trends in achievement.

HP28 Standards of education work were good in IT and graphic design but there were few education courses at level 3. Achievement of qualifications was satisfactory overall, but pass rates had been low on some literacy and numeracy courses. Attendance was satisfactory. Teaching and learning were good in IT and prisoners on open and distance learning courses received good individual support. In literacy and ESOL (English for speakers of other languages), some teaching did not sufficiently engage prisoners.

HP29 Prisoners had good access to the library when they were not at work. The library was well stocked. The book ordering service was efficient. Prisoners had a choice of newspapers and resources for foreign nationals were good. There were too few computers in the library and there were insufficient links between the library and education.

HP30 Prisoners were positive about the revised and much improved PE provision. There was a wider range of programmes and access was better. There were specific programmes for over 50s. Staffing was satisfactory and staff were appropriately qualified. There were no PE training courses for prisoners.

## Resettlement

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HP31 Strategic planning for resettlement had improved, but the central role of resettlement to the prison's identity had not been sufficiently recognised until relatively recently. This was a major weakness for an open prison and was at the root of much of the discontent we observed among prisoners. The offender management unit (OMU) was better managed and more efficient but communication with prisoners was still poor

and the cause of much frustration. There were still some considerable delays in processing paperwork for home detention curfew (HDC). There was insufficient work with short-term prisoners. Public protection was well managed and lifers continued to receive generally good support. Work on the resettlement pathways was variable. CARAT (counselling, assessment, referral, advice and throughcare) support was particularly good, but ETE (education, training and employment) provision was poor and insufficiently linked to resettlement needs. Visits provision was good. Outcomes for prisoners against this healthy prison test were not sufficiently good.

- HP32 There was a comprehensive recent reducing reoffending policy, which had been based on a sound needs analysis. However, it had yet to be implemented. Leadership of the resettlement function had become stronger and was more cohesive. However, the resettlement needs of prisoners were not sufficiently central to the overall purpose of the prison. In our survey, prisoners reported negatively on most questions relating to the helpfulness of resettlement work and they were unaware of available support in most resettlement pathways. The gap between prisoners' expectations of an open prison and what was actually offered underlay much of the frustration that we observed among prisoners.
- HP33 The OMU worked under great pressure, particularly because of the large throughput of relatively short-sentenced prisoners. Negative prisoner perceptions of the OMU were partly due to failings in communication and to a lack of staff. There was effective communication between OMU staff and offender managers in the community. Relevant information was routinely used to inform assessments and interventions but there was limited evidence of formal assessment of learning needs, learning styles and diversity issues. In-scope cases routinely had up-to-date and accurate OASys (offender assessment system) assessments. Where cases were transferred in, sentence plans were not always updated.
- HP34 Delays in HDC processes were the subject of much prisoner complaint. There had been recent improvements and risk assessment was thorough and appropriate. However, there were still some administrative frailties, including a lack of adequate cover for the HDC clerk. Work with the 10% of prisoners who were serving short sentences was weak. There was no custody planning for them and no active work until shortly before release.
- HP35 There was a thorough public protection policy; risk management meetings were well attended by the appropriate people and a strong team of probation staff handled higher-risk cases effectively. Lifers and indeterminate sentence prisoners were well managed by a knowledgeable and accessible team.
- HP36 There was reasonable provision of advice and support on housing, with an experienced full-time worker and two peer advisers, though the latter were untrained. Job Centre Plus provided information on benefits and Citizens' Advice provided a specialist debt surgery. However, our survey and conversations with prisoners showed that many were not aware of the help that was available.
- HP37 ETE provision was insufficiently linked to resettlement needs. There were too few opportunities for working and training on temporary release and only 35 of the 71 outside placements for work, education or community service were full time. The work of the careers, information and advice service, the OMU, the labour board and education overlapped too much and these areas did not provide a well-coordinated service to support prisoners' plans for resettlement. Prisoners received insufficient

information and advice. Access to job search facilities was poor. The career planning course was not sufficiently focused on key needs for resettlement.

- HP38 Discharge arrangements were in place for people with long-term health conditions or chronic difficulties. This was not consistent across the prison and plans to ensure that all prisoners had an opportunity to plan their health needs before discharge had not yet been implemented.
- HP39 The drug strategy group had not met for a period of six months at a time when the mandatory drug testing random positive rate had risen substantially. The CARAT team was universally praised by prisoners as being approachable and effective, and its services were well advertised. However, the team was struggling to meet demand. Alcohol services were covered by a separate strategy and included several sources of support. The cessation of the short duration programme disadvantaged short-term prisoners who may not have had the opportunity to engage in drug programmes elsewhere.
- HP40 About three-quarters of prisoners had a home/discharge address more than 50 miles from the prison and fewer prisoners than in comparator establishments had received visits the previous week. Prisoners commented very positively on visits provision. The visits area was relaxed and staff dealt helpfully and appropriately with visitors. Evening visits were not available and, other than some good family days, no other work was done to facilitate family links or support for parenting. The mail system was efficient and there were no reported concerns about access to telephones.
- HP41 Some people were doing accredited programmes, mainly in the community. Joint working with Surrey and Sussex Probation had developed well, especially in the provision of cognitive skills and domestic violence work. Some one-to-one work was also provided by seconded probation staff. The significant number of prisoners arriving at Ford after a very brief spell at a local prison had little opportunity to address offending behaviour.

## Main recommendations

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- HP42 **Managers should work with staff and prisoners to develop a strategy for positive staff-prisoner relationships which encourage prisoners' preparation for release and underpin strong dynamic security.**
- HP43 **Procedures for combating illicit drug and alcohol use should be consistently applied. The application and results of drug and breath testing should be closely monitored. Results should be used with security intelligence reports to ensure security measures are effective and intelligence led. Appropriate staff should be trained so that technical resources such as the BOSS chair can be used when necessary.**
- HP44 **Practical resettlement work should be central to the prison's vision and activity with an appropriate focus on levels of ROTL for work and job seeking. This should be supported by sustained improvement in the quality and speed of communication between OMU staff and prisoners.**
- HP45 **Outstanding equality impact assessments should be carried out and acted upon. There should be a linked investigation into the disparities in access to**

ROTL, paid work and community service for black and minority ethnic prisoners.

HP46 All prisoners, including those serving short sentences, should have a formal plan specifying how their resettlement needs will be met during and after custody, and this should be updated in a timely manner.



# Section 1: Arrival in custody

## Courts, escorts and transfers

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### Expected outcomes:

Prisoners travel in safe, decent conditions to and from court and between prisons. During movement the individual needs of prisoners are recognised and given proper attention.

- 1.1 Prisoners were generally content with their treatment by escort staff. Arrangements had been made to ensure that newly arrived prisoners did not have to wait outside reception on vans during the lunch period. Some prisoners had little prior warning of their transfer to Ford and few received written information about Ford prior to their move.
- 1.2 Prisoners and staff whom we spoke to were positive about their experience of the escort providers. Some men told us they were surprised to be told they were transferring to Ford as they had expected to go to another open prison, and others told us they only found out about their move to Ford on the day it took place. The prison received no advance information about the men who would be arriving other than the numbers, with the exception of lifers and other indeterminate sentence prisoners. The establishment had an information sheet for sending prisoners to give to prisoners before transfer, but in our survey only a fifth of prisoners said they had received any written information in advance.
- 1.3 Arriving prisoners had previously waited in escort vehicles if they arrived at lunchtime when reception was normally closed. However, procedures had recently been changed and the orderly officer now opened reception if a vehicle arrived at lunchtime. Prisoners were taken to the waiting room once documentation had been checked. On occasions, prisoners had arrived who did not meet the Ford reception criteria; they were held in the care and separation unit until a transfer to another prison could be arranged.

### Recommendation

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- 1.4 Prisoners being transferred to Ford should be provided with information in advance and have the opportunity to notify family and legal representatives of their destination.

## First days in custody

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### Expected outcomes:

Prisoners feel safe on their reception into prison and for the first few days. Their individual needs, both during and after custody, are identified and plans developed to provide help. During a prisoner's induction into the prison he/she is made aware of prison routines, how to access available services and how to cope with imprisonment.

- 1.5 The reception area was small but for the most part made good use of space. Cell-sharing risk assessments were comprehensive but interviews by reception staff were not held in private.

Prisoners felt less well treated in reception than in other open prisons. Induction was well organised but many prisoners felt they were given insufficient help to adjust to the prison.

## Reception

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- 1.6 The small reception area had been refurbished since the previous inspection and the layout had improved. It comprised two holding rooms with televisions and a range of useful information displayed on the walls, a small searching area and a private room used for health care interviews. There were two reception desks as a second, smaller desk had been installed for prisoners returning from outside work or other forms of temporary release. This meant that they could be dealt with more quickly at busy times when new arrivals were being dealt with at the main desk. A single toilet was used by staff and prisoners. A small kitchen was used to provide drinks and food for prisoners who arrived outside normal meal times. A BOSS (body orifice security scanner) chair occupied considerable space in the reception area. It was not used and reception staff said they had not been trained in how to use it.
- 1.7 Reception was usually staffed by two officers and one or two prisoner orderlies. At busy times a third member of staff was sometimes deployed, mainly to deal with prisoners returning after release on temporary license. The orderlies dealt with storing and retrieving property boxes and bags, preparing drinks and meals for new arrivals and issuing the packs of bedding, towels and basic toiletries that each new prisoner received. In our survey, only 50% of prisoners, against the comparator of 81%, said they had been treated well in reception. Both staff and prisoners told us that delays and errors sometimes resulted from the staffing of reception by officers who did not work there regularly, and that the amount of property that some prisoners arrived with could cause long delays.
- 1.8 On arrival, prisoners went into a holding room and were dealt with in turn at the reception desk. This afforded little privacy for sharing information used for the cell-sharing risk assessment. Cell-sharing risk assessments that we examined were comprehensive and up to date.
- 1.9 All new arrivals were routinely strip-searched, which was inappropriate when dealing with prisoners judged suitable for open conditions. Induction orderlies discussed with each prisoner what level of the incentives and earned privileges scheme he had been on at his previous prison so that anyone on enhanced level could keep their status at Ford.

## Recommendations

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- 1.10 Reception interviews should be held in private.
- 1.11 Strip-searching of arriving prisoners should be intelligence led.
- 1.12 Staff should be able to use the BOSS chair when appropriate.

## First night

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- 1.13 The induction officer allocated new arrivals to a room and they were taken by the induction orderlies to settle in. All new arrivals were in shared cells. If a prisoner refused to share a cell, he was located in the separation unit and, if he still did not want to share, he was returned to a closed prison. In the induction billets it was evident that men had been smoking despite no smoking signs and a prisoner complained to us about being co-located with a smoker on his

first night. In our survey, 88% said they felt safe on their first night, against the comparator of 93%. However, this was a significant improvement on the 75% who had said they felt safe on their first night at the previous full inspection. There was no formal additional scrutiny of new arrivals by night staff, but they were made aware of their names at shift handovers.

- 1.14 New arrivals had their photographs taken in the induction suite and their ID/menu card issued. They each had a one-to-one interview with the induction officer who enquired about any disability the prisoner had. If he needed assistance in the event of evacuation, this was shared with wing managers, the social inclusion unit and health care. At the end of the interview, a PIN phone number was issued to enable the prisoner to make his free telephone call. Prisoners had the choice of buying a reception pack, a smoker's pack and/or PIN phone credit up to a total of £10 which was repayable at £1 per week. Sixty-four per cent of prisoners said that they had been able to make a free telephone call on the day they arrived, against the comparator of 50%.

## Housekeeping point

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- 1.15 The arrangements for smoking in the induction billets should be clarified and enforced.

## Induction

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- 1.16 The induction suite had been relocated and was situated close to the two induction billets. It had been refurbished appropriately and offered good facilities, including a sizeable room equipped with a large screen for visual presentations. There was some useful information, including some staff photographs, on the walls and in holders around the room.
- 1.17 A number of prisoners told us that they had initially found it difficult to adjust to life at Ford. While many appreciated the prisoner-led induction, in our survey, only 56% against an open prison comparator of 74% said that induction told them everything they needed to know. Some said that, rather than being eased into the expectations of the prison, they had been expected to 'hit the ground running'. Induction feedback forms were completed by prisoners at the end of induction. While these were taken account of by the induction officer, they were not analysed for patterns or trends to allow for more considered evaluation and systematic change.
- 1.18 The two-day induction programme started on the first full weekday after arrival. Key departments in the establishment were allocated slots which often involved the prisoner orderly working in that area. Each prisoner had an induction passport which contained details of seven areas to be visited during induction. Days and times for visiting each area were listed in the passports, with information about other services such as Citizens' Advice, Alcoholics Anonymous and the home detention curfew surgery. When the passport contained all seven stamps (with some flexibility for special cases), the labour board considered the allocation of a work area for each prisoner. The labour board met on Wednesdays and Fridays and each prisoner started work at the latest a week after arrival.
- 1.19 The prison maintained a list of staff and prisoners who spoke other languages and were available to assist prisoners who did not speak English. Otherwise, induction staff had access to telephone interpretation services, but we were told that this was very rarely necessary. Some induction material, including the prison compacts and canteen sheets, had been translated into other languages.

## Recommendation

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- 1.20 Managers should investigate how arriving prisoners can be helped to adjust better to life at Ford. To this end, greater use should be made of the induction feedback forms to analyse patterns and trends.

# Section 2: Environment and relationships

## Residential units

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### 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.

2.1 The decor of residential units had improved cosmetically, but some cells were in a poor condition and shared cells on B wing were too small for two people. The units were generally clean and properly heated. The furniture in most cells was in poor condition and not all shared cells had lockable cabinets. Confidence in the effectiveness of the prison laundry was low and many prisoners washed their clothes by hand. Prisoners' access to their stored possessions was poor.

### Accommodation and facilities

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- 2.2 The prison was located on either side of a busy main road. All the residential accommodation and services, such as the offender management unit, chaplaincy, the dining hall, library and education were on one side of the road, and the main workshops and the administration block were on the other side. At previous inspections we had recommended that the prison should negotiate with the local authority to install a pedestrian crossing, which would allow for safer crossing of the road by staff and prisoners. This was now in place and it was frequently used.
- 2.3 Residential accommodation was split into two areas: A and B wings. A wing consisted of six spurs split over two floors and included the health care centre, communal dining hall and library. Almost all cells here were single occupancy. Each landing had its own communal bathroom and lavatory and a single telephone which provided privacy. There were no kitchen areas so the men could not prepare their own food in preparation for independent living. Toasters had recently been provided in the dining hall, but were not always accessible.
- 2.4 One unit on A wing contained 14 adapted cells, normally designated for men with mobility problems. It was situated near the A wing office and the dining hall, so that prisoners could have easier access to staff and dining facilities (see section on disability). The single cells we saw were clean, tidy and warm. There was one good-sized, double occupancy cell on the unit which was allocated to a prisoner who needed additional support and the cleaning orderly.
- 2.5 B wing comprised a large number of single-storey huts, each with its own communal bathroom and lavatory and a small kitchen area with a toaster. Other cooking facilities that could have promoted independent living were not provided. There was a telephone in each hut, some of which were located in the kitchen. Although all telephones had privacy hoods, their location did not afford privacy. B wing contained single and double cells, but the double cells were cramped for two prisoners. At the time of the inspection, the weather was very cold, but residential units and cells were warm with radiators working.
- 2.6 The decoration of the units had improved considerably since the previous inspection and there was a plan of works in place to ensure that residential areas and cells were painted regularly. However, some of the decoration was cosmetic and masked repairs that required attention,

such as leaking radiators. The great majority of cells we inspected appeared to be in reasonable repair, although we did observe one cell on A wing with holes in the ceiling.

- 2.7 The condition of furniture in cells was variable and some was in a poor state of repair. All cells had two lockers for each prisoner, but not all the lockers in shared cells could be locked. Prisoners on prescribed drugs who could not secure them had to carry them at all times. A number of prisoners told us that furniture was often swapped when someone left the unit and some said that cells had been dirty and inadequately furnished when they arrived.
- 2.8 There were notice boards in both the communal areas and on each unit, which gave basic information about the prison regime and specific areas such as diversity and safer custody initiatives. We were advised by prisoners that many of the notices had been put up just before the inspection. There was no offensive displays policy and we saw no evidence of inappropriate material displayed in cells.

## Recommendations

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- 2.9 The cells in B wing should only be used for single occupancy.
- 2.10 All prisoners in shared cells should have access to a lockable locker.
- 2.11 There should be more opportunity to self-cater to help prepare for independent living.

## Clothing and possessions

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- 2.12 Prisoners could wear their own clothes outside working hours. They had little confidence in the effectiveness of the laundry facilities and many said that they preferred to wash their own clothes by hand, as they often came back dirty from the prison laundry. This was evident from the clothes that we observed hanging on lines in bathrooms and on radiators in prisoners' cells. Plastic containers were used for personal washing. Bedding was cleaned each week, but a number of prisoners told us that it came back not properly washed.
- 2.13 All prisoners had access to warm jackets in the winter. In our survey, only 32% of prisoners said that they had access to stored property when they needed it, against the comparator of 52%. Prisoners we spoke to said that access to property was an ongoing problem and one reported waiting approximately two weeks to get items from storage.

## Recommendations

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- 2.14 The prison laundry should ensure that all items are properly washed and managers should monitor this.
- 2.15 Arrangements should be made to ensure that prisoners can retrieve their property from storage within one week of making an application. The system should be monitored.

## Hygiene

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- 2.16 Prisoners could shower each day. The majority of communal bathrooms were clean and cleaners told us that they used power hoses to keep showers and toilet areas clean. The speed of repairs to these facilities had improved.

- 2.17 A range of hygiene products were available to prisoners who did not wish to buy them from the canteen. Prisoners we spoke to said that they had no problems in getting these. Each unit had its own cleaner and most did a reasonable job. However, prisoners were given limited and low quality materials to clean their cells. In our survey, only 44% of prisoners said that they could get cell cleaning materials every week, against a comparator of 73%.

## Housekeeping point

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- 2.18 Prisoners should have access to sufficient and adequate cleaning materials.

## Staff-prisoner relationships

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### Expected outcomes:

Prisoners are treated respectfully by staff, throughout the duration of their custodial sentence, and are encouraged to take responsibility for their own actions and decisions. Healthy prisons should demonstrate a well-ordered environment in which the requirements of security, control and justice are balanced and in which all members of the prison community are safe and treated with fairness.

- 2.19 Less than half the prisoners said in our survey that most staff treated them with respect and there was evidence of peremptory and unhelpful staff behaviour. Most staff routinely used surnames only when addressing prisoners. There was limited positive interaction between staff and prisoners.
- 2.20 Prisoners reported negatively on treatment by staff. In our survey, only 49% of prisoners said that most staff treated them with respect against an open prison comparator of 77% and 62% at the previous full inspection of Ford in 2005. Some staff, mainly non-uniformed, were praised for their helpfulness, and we observed a number of positive interactions with these staff. In our survey, 56% of prisoners said they had a member of staff they could turn to with a problem, against the open prison comparator of 78%, although this was an improvement on the previous inspection at 46%.
- 2.21 Staffing levels limited the contact between staff and prisoners and there was a weak personal officer scheme (see section on personal officers). We received many complaints about unhelpful, rude or distant staff behaviour which was described as one of the main problems at Ford (see main recommendation HP42). One prisoner wrote in his survey that *'I try not to contact any officer as reply is no and attitude is rude, they have no respect'*. Another commented that *'[Officer X] is always giving me abuse and I don't know what to do, I'm going to hurt myself soon'*. Some names were consistently mentioned to inspectors in written and verbal comments, and these staff clearly had a considerable impact on prisoners.
- 2.22 Prisoners said that they saw managers infrequently. Most consultation took place at the offender consultative committee, an active group of prisoners elected by their peers. However, while this was a good initiative, there was little direct consultation with the wider prisoner group.
- 2.23 Prisoners' frustration about resettlement issues and getting queries answered had a considerable impact on day-to-day interactions with staff. We observed abrupt and unhelpful staff responses to requests for information on resettlement issues, which reflected poor communication with the offender management unit (see section on resettlement). Few staff

addressed prisoners politely and most routinely used only surnames in verbal or written communication.

## Personal officers

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### Expected outcomes:

Prisoners' relationships with their personal officers are based on mutual respect, high expectations and support.

2.24 Most prisoners reported little contact with their personal officers and few found personal officers helpful. Entries in case notes showed little positive interaction. Some prisoners had no identified personal officer on P-Nomis.

2.25 The personal officer scheme was based on an appropriate policy dated February 2010. Most staff were responsible for up to 20 prisoners and arrangements to cover absences were theoretically in place. However, the scheme was applied inconsistently and very few prisoners reported regular personal officer contact. In our survey, only 39% of prisoners said they had a personal officer against a comparator of 68%. Only half of those who had personal officers said they found them helpful against a comparator of 77%. One prisoner complained that an officer who had never spoken to him before introduced himself so that he could write a potentially crucial report for the prisoner's parole dossier.

2.26 In a random sample of 15 cases viewed on P-Nomis, several prisoners had no identified personal officer. Nearly all case notes showed minimal positive contact; most entries related to the prisoner's behaviour and showed no evidence that resettlement issues had been considered. Entries had improved slightly in the previous three months since the scheme had been relaunched, but most were still poor.

## Recommendation

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2.27 The personal officer scheme should support prisoners throughout their sentence and encourage them to achieve resettlement and rehabilitation objectives.

# Section 3: Duty of care

## Bullying and violence reduction

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### Expected outcomes:

Everyone feels safe from bullying and victimisation (which includes verbal and racial abuse, theft, threats of violence and assault). Active and fair systems to prevent and respond to violence and intimidation are known to staff, prisoners and visitors, and inform all aspects of the regime.

- 3.1 There was little evidence of bullying amongst prisoners. Identification of bullies had improved but systems for doing so were still underdeveloped. Bullying investigations were thorough but management records were generally poorly completed and there was no co-ordinated system for supporting victims. There was a comprehensive violence reduction policy, with a supporting action plan, though it was not clear how identified actions were implemented. Information sharing between the security department and the social inclusion department was weak. The anti-bullying coordinator did not have enough time to meet all her responsibilities and staff had not yet received relevant training.
- 3.2 Prisoners we spoke to said that very little bullying took place. Many prisoners were mutually supportive and had an investment in ensuring that the establishment was safe. The support between prisoners was reflected in the establishment's own 2010 bullying survey, which concluded that on most occasions a prisoner would try to put a stop to an incident if he saw someone being picked on. Prisoners also said that an officer would almost always act similarly. In our survey, 7% of prisoners said that they currently felt unsafe against a comparator of 4% and 10% said they had been victimised by another prisoner, similar to the comparator.
- 3.3 A comprehensive and up-to-date violence reduction strategy outlined how the establishment would identify violence and bullying, respond to perpetrators and victims, and monitor the effectiveness of actions. The strategy was complemented by a violence reduction action plan. This did not define the actions to be taken or expected completion dates.
- 3.4 There had been some improvement in the identification of bullies. A bullying concern form had been introduced in July 2010 and there had been a steady increase in the number of departments completing the forms. Peer supporters were active in identifying and reporting bullying to the anti-bullying coordinator. There was an anti-bullying hotline, though we were told that it was rarely used. Officers we spoke to were aware of their responsibilities in relation to bullying. The work of the social inclusion team was publicised widely in communal areas and on the residential units, and there were many notices declaring that bullying would not be tolerated in the establishment.
- 3.5 At the time of the inspection, there were no open bullying management records. The log showed that 27 had been opened in 2010, with information coming from a broad range of staff. The resulting initial investigations were thorough and reporting had increased throughout the year. However, the bullying management records that we examined were generally poorly completed. They did not describe the behaviour and how it might be addressed, and there was insufficient detail about the actions that had been agreed. The records of daily supervision demonstrated very little engagement with the perpetrator. There was no evidence of interventions to help the prisoner think about and change his behaviour. Victims of bullying

were offered support by the violence reduction coordinator and the chaplaincy among others, but this was not coordinated and some victims of bullying were not properly supported.

- 3.6 The social inclusion unit, which had been formed in May 2010, was responsible for the implementation of the violence reduction strategy and led the establishment's work on safer custody and diversity issues. The unit consisted of a manager, a violence reduction and suicide and self-harm co-ordinator and a diversity co-ordinator. The social inclusion manager had been on long-term sick leave and both coordinators had a number of other responsibilities which restricted their capacity to fulfil the work.
- 3.7 The monitoring of the violence reduction strategy and action plan took place at the monthly social inclusion meetings which were well attended, including peer supporters and Listeners, and were chaired by the governor. Discussion focused on the progress of violence reduction and anti-bullying work across departments and the work of the social inclusion unit. However, limited information was provided and there was no discussion about patterns of violence and bullying.
- 3.8 The establishment had carried out a bullying survey in February 2010, and the majority of respondents said that they felt safe or very safe in the establishment. The survey had only been completed by 38 prisoners and, although there were some useful findings, there was no evidence that they had been discussed at social inclusion meetings or used to inform the violence reduction strategy. The strategy was reviewed annually but only provided for the survey to be carried out every two years. The survey did not contain any questions about bullying by staff. In our survey, 23% of prisoners said that they had been victimised by a member of staff, against a comparator of 16%.
- 3.9 There was no record of a representative from the security department attending the social inclusion meeting and there was no formal sharing of information between security and the social inclusion unit. This was an omission because security intelligence, for example prisoners bringing in goods from outside for other prisoners, was not passed on so that staff could be alert to potential intimidation and bullying. The establishment had plans to train staff in anti-bullying and violence reduction, but this had not yet taken place.

## Recommendations

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- 3.10 Support for victims of bullying should be planned and coordinated to ensure that they have access to appropriate care.
- 3.11 There should be planned interventions for the perpetrators of bullying.
- 3.12 The establishment should carry out an anti-bullying survey annually to inform the review and update of the violence reduction strategy. The survey should include questions on the treatment of prisoners by staff.
- 3.13 There should be a regular, planned and coordinated exchange of information between the social inclusion unit and the security department.
- 3.14 All staff in contact with prisoners should receive anti-bullying and violence reduction training.

# Self-harm and suicide

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## Expected outcomes:

Prisons work to reduce the risks of self-harm and suicide through a whole-prison approach. Prisoners at risk of self-harm or suicide are identified at an early stage, and a care and support plan is drawn up, implemented and monitored. Prisoners who have been identified as vulnerable are encouraged to participate in all purposeful activity. All staff are aware of and alert to vulnerability issues, are appropriately trained and have access to proper equipment and support.

- 3.15 There was a little self-harm and prisoners on ACCTs (assessment, care in custody and teamwork) were managed well. ACCT assessments and reviews were timely and family and friends and an interpreter participated in some review meetings. A near-fatal incident had been properly investigated and learning points taken on board. Ligature knives were not routinely carried by all staff. Prisoners could speak to one of the Listeners at any time and the Listener suite was well used.
- 3.16 A comprehensive suicide and self-harm policy had been published in March 2010. The policy was monitored by the social inclusion meeting and, while no detailed information was provided on the nature and patterns of self-harm, there was evidence that a number of actions had been taken to improve practice in this area. There was little self-harm in the establishment and there had been increasingly successful attempts to manage vulnerable prisoners rather than transfer them back to closed conditions.
- 3.17 The arrangements for identifying vulnerable prisoners were sound. Twenty-eight ACCTs had been opened in 2010 by a wide range of staff, most for a few days. Three prisoners had actually self-harmed: one had taken an overdose and the others had made superficial cuts to themselves. At the time of the inspection, there was only one open ACCT and that was closed during the inspection. A near-fatal suicide attempt had been followed by a governor's debriefing meeting for staff and an internal investigation to ensure that appropriate lessons were learned. A number of recommendations had been made and implemented.
- 3.18 ACCT documentation demonstrated a good level of care. Concern and keep safe forms showed concern for the prisoner's safety and action plans were comprehensive and timely. All initial assessments were undertaken by a trained assessor and completed within 24 hours of the referral. The assessments gave a detailed picture of how the issues facing the prisoner might be addressed.
- 3.19 Records showed effective engagement by residential staff with prisoners on ACCTs, though in some cases night observations were too predictable. Some night staff did not routinely carry ligature knives. Records were checked frequently by managers who made helpful comments. Many ACCTs were closed after staff had responded effectively to help resolve issues. For example, the UK Border Agency was contacted to confirm deportation arrangements for a prisoner to be reunited with his family and he was allowed a telephone call to speak to his wife. Another man was helped to make contact with his partner and parents and to engage in constructive activities in the establishment. A risk assessment was arranged quickly for a prisoner who was concerned that a long wait for an assessment was preventing a decision about his release.

- 3.20 Review meetings were held within the required timescale and were usually attended by the most appropriate people. Case managers attended review meetings consistently and discussions were detailed and thoughtful. Interpreters were used where appropriate, and family members and friends had also participated in reviews. Care maps that we examined were comprehensive and up to date and showed completed tasks.
- 3.21 The establishment had formed an effective relationship with the Samaritans, who could be contacted by telephone, text and email at all times. They also provided drop-in facilities twice a week at the prison. A committed group of Listeners had been established and they were always accessible to prisoners. They were appropriately supported by the Samaritans who met them as a group every fortnight. The Listeners' suite had recently been refurbished and was well used.

## Recommendation

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- 3.22 All staff, including those working at night, should carry ligature knives.

## Housekeeping point

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- 3.23 Night observations of those subject to ACCT documents should be at unpredictable times.

## Applications and complaints

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### Expected outcomes:

Effective application and complaint procedures are in place, 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.

- 3.24 Prisoners complained of slow responses to applications. Complaints procedures were administered effectively and complaint forms were freely available. Complaints were monitored each week to identify trends. However, the quality of responses was variable and prisoners had little confidence in the system. One complaint had been investigated by the subject of the complaint. Quality checks were inappropriately conducted by the complaints clerk.
- 3.25 Application forms were freely available and could be posted in either of the two application boxes next to each wing office. In our survey, significantly fewer prisoners than the comparator said that the applications process was fair (54% against 76%) or prompt (44% against 72%). The application form had not been updated since November 2005 and was poorly drafted. Prisoners were not given a duplicate copy of their application form or a receipt.
- 3.26 Application forms to see the Independent Monitoring Board (IMB) were freely available with envelopes. Board members held two surgeries a week for up to four prisoners. Prisoners we spoke to knew how to complain to the Prisons and Probation Ombudsman (PPO) and leaflets promoting the PPO were available around the establishment.
- 3.27 During the six months before the inspection, there had been 451 complaints. Complaint forms were freely available and 91% of prisoners said that it was easy to get a complaint form against the comparator of 85%. There were two complaint boxes in the prison, but the box on B wing was not identified as such.

- 3.28 Prisoners had little faith in the complaints procedure. In our survey, of those prisoners who had made a complaint 33% felt that it had been dealt with fairly and 37% that it had been dealt with promptly against respective comparators of 42% and 51%. Only 17% of prisoners said they were given information about how to appeal. The timeliness of responses to complaints we examined was good, but the quality was mixed. Many replies were short and abrupt. In one case, a prisoner complained about an individual officer and the complaint was referred to the same officer to respond.
- 3.29 Prisoners perceived that complaining led to a return to closed conditions or other repercussions. In our survey, one prisoner commented: *'I'm worried about reporting an officer as I've been told it is likely I will be moved to a worse prison'*. Between April and October 2010, 527 prisoners had made a complaint and only 26 had been returned to closed conditions. The prison had analysed the complaints and the transfers and had not identified any correlation. The analysis had been distributed but had had little effect on prisoner perceptions.
- 3.30 Complaint reports were compiled by the complaints clerk and analysed for trends at the weekly performance meetings. The complaints clerk was also responsible for quality checking replies. No member of the senior management team conducted quality checks.

## Recommendations

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- 3.31 Applications should be answered promptly and outcomes tracked.
- 3.32 Managers should ensure that prisoners are aware of evidence showing that submitting a complaint has no bearing on their transfer.
- 3.33 Prisoners' complaints should not be investigated by the person who is the subject of the complaint.
- 3.34 All replies to complaints should be polite and detailed, and quality checks should be conducted by a senior member of staff.

## Housekeeping points

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- 3.35 The complaints box on B wing should be clearly labelled.
- 3.36 The application form should be rewritten in plain English.

## Legal rights

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### Expected outcomes:

Prisoners are told about their legal rights during induction, and can freely exercise these rights while in prison.

- 3.37 Some prisoners had difficulty communicating with their solicitors and attending legal visits. An officer dedicated up to two days a week to legal services but there was no cover when he was not available. There was no information on how to complain about a solicitor. The library stocked a reasonable range of legal text books and Prison Service Orders.

- 3.38 The legal services officer (LSO) dedicated up to two days a week of his time to legal services duties. Prisoners were unable to access legal services when he was not available. He had not received any legal training since his initial training four years previously and no specific training in immigration issues.
- 3.39 Appointments could be made to see the LSO during induction or by a general application. All prisoners were asked if they had a legal problem and the details were passed to the LSO who arranged an appointment. In November 2010 there had been 23 legal appointments. Some prisoners we spoke to were unaware of the LSO and his role and did not know how to contact him. There were no notices promoting his services.
- 3.40 The LSO had built a relationship with local firms of prison law solicitors and regularly referred cases to them. Solicitors in other areas of the law were appropriately sourced using the community legal advice website. The LSO had his own office with a fax machine and internet access.
- 3.41 There was no information in the establishment on how prisoners could complain about a solicitor and the LSO did not keep leaflets or complaints forms for the Legal Ombudsman. The library stocked a reasonable selection of legal text books and Prison Service Orders.

## Recommendation

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- 3.42 The legal services officer should receive training to update his knowledge.

## Housekeeping points

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- 3.43 Prisoners should be made aware of the role of the LSO and how he can be contacted.
- 3.44 Prisoners should have access to information about how they can complain about a solicitor.

## Faith and religious activity

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### 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.**

- 3.45 The chaplaincy team worked together constructively and cooperatively. The coordinating chaplain, who was the only full-time chaplain, participated regularly in all the key committees, boards and reviews. There were active links with outside faith communities and the chaplaincy took the lead in providing practical assistance to prisoners and in overseeing a valuable peer advice service.
- 3.46 The chaplaincy catered for a wide range of faiths. Discrete spaces were provided for Christian, Jewish, Muslim, Hindu and Sikh worship. The coordinating Church of England chaplain was the only full-time chaplain. He attended a wide range of meetings in the establishment, including the morning meeting, social inclusion and security meetings and most ACCT reviews. The work of the chaplaincy was very highly regarded by prisoners.

- 3.47 There was good cooperation among the different faiths in the chaplaincy team. There were lunchtime bible study sessions and teaching sessions were delivered by the Muslim, Hindu and Sikh chaplains. Short courses were offered from time to time.
- 3.48 Religious diets were well catered for and prisoners were happy with foods provided for special periods and festivals. Diwali had been a much appreciated success recently and Ramadan provision had been well organised. Chaplains were well supported by senior managers. There were links with local faith communities, mainly churches, some of whom came in on Sunday evenings to provide a variety of alternative worship events.
- 3.49 The chaplaincy hosted and supervised the 'focus group', comprising experienced, competent prisoners who gave advice and support for 12 hours each day to any prisoner who called in, mainly on practical matters relating to the prison regime. The chaplaincy maintained a fund to provide targeted financial assistance of a few pounds, for example for life sentence prisoners who had no money making town visits to reacquaint themselves with life in the community. The chaplaincy also provided clothes for prisoners on release who had no clothes of their own.

## Substance use

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### Expected outcomes:

**Prisoners with substance-related needs, including alcohol, are identified at reception and receive effective treatment and support throughout their stay in custody. All prisoners are safe from exposure to and the effects of substance use while in prison.**

- 3.50 Clinical treatment was not due to be available until the establishment of the integrated drug treatment system (IDTS). This was scheduled to start in March 2011. Mandatory drug testing (MDT) rates were above target and prisoners said that drugs were quite easily available. The MDT team was understaffed, and monitoring of suspicion testing and cleanliness of the facilities were both inadequate.

## Clinical management

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- 3.51 IDTS was not in place and no other opiate substitution or detoxification treatments were available. IDTS was scheduled to start in March 2011, but this looked ambitious given the lack of a clinical provider and specialist substance use nurse. Initial progress in preparing for IDTS had been slow, but, with the appointment of a new IDTS project lead in October 2010, progress had improved significantly.

## Drug testing

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- 3.52 The random MDT positive rate for the year to date was 12.24% against a target of 11.5%. The range was wide, from 3.85% in April 2010 to 22.22% in September 2010. In our survey, 42% of prisoners said it was easy or very easy to get illicit drugs at Ford against the comparator of 35%. Opiates and cannabis were the most commonly detected drugs in MDTs.
- 3.53 The completion of risk assessment tests for release on temporary licence (ROTL) took priority over suspicion tests. Forty-four risk tests had been completed from April to October 2010, and only 19 suspicion tests had been conducted in the same period. The positive rate for the suspicion tests was 52.63%, which represented a reasonably good rate of detection. However,

some suspicion test requests had fallen outside the required 72-hour window. This was not being appropriately monitored, and staff told us that in recent months up to a quarter of suspicion test requests had not been completed owing to unavailability of officers. The MDT suite was not sufficiently clean for a forensic testing environment: the floor, searching mat, urinal bowl, sink and draining board were all dirty. The holding room also needed cleaning, although there was a good range of CARAT (counselling, assessment, referral, advice and throughcare) services and drug awareness information displayed on the walls.

- 3.54 Alcohol breath tests were carried out on suspicion only. Adjudications had been carried out for 19 positive breath tests between May and October 2010 but surprisingly figures for the total number of tests conducted were not available.

## Recommendations

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- 3.55 The MDT programme should be adequately resourced to undertake suspicion testing within identified timescales and without gaps in provision.
- 3.56 Suspicion testing procedures should be monitored more effectively and the total number of alcohol tests should be recorded.

## Housekeeping point

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- 3.57 The MDT suite should be cleaned to provide decent and forensic waiting and testing environments.

## Section 4: Diversity

### Expected outcomes:

All establishments should be aware of and meet the specific needs of minority groups and implement distinct policies or action plans, which aim to represent their views, meet their needs and offer peer support to ensure all prisoners have equal access to all facilities. Multiple diversity needs should be recognised and met.

- 4.1 Diversity work was underdeveloped and the diversity policy was still in draft, though some useful work was done by diversity representatives. Social inclusion meetings were well attended by staff and diversity representatives who also staffed a diversity drop-in centre. Equality impact assessments had not been conducted on all relevant policies. Prisoner diversity forums had been organised but had not been attended by prisoners. There were few posters reflecting the diversity of the prison.
- 4.2 Diversity work was managed by the social inclusion unit (SIU). The diversity policy was in draft and covered religion, sexual orientation, gender (including transgender/transsexual issues), disability and age. Separate policies covered foreign nationals and race equality. The SIU was also responsible for safer custody and was overstretched (see section on bullying and violence reduction). The full-time social inclusion manager had been absent from work for some time and the race equality officer (REO) had been managing all the diversity strands.
- 4.3 Social inclusion meetings were well attended by a range of staff and included prisoner diversity representatives during the non-confidential part of the meetings. A monthly diversity and race equality report was discussed, action points were noted and followed up at subsequent meetings.
- 4.4 There were seven diversity prisoner representatives who covered different strands of diversity and met regularly with the REO and the head of safer custody. One of the prisoners represented the Traveller and Gypsy community. Representatives' duties included acting as a link between prisoners and the SIU, promoting the diversity policy, helping prisoners to complete diversity incident report forms (DIRFs), staffing the diversity drop-in centre, and inducting new arrivals. Some also saw themselves as providing an outlet for prisoners' frustrations. One of the representatives was working towards achieving an NVQ in advice and guidance.
- 4.5 The diversity drop-in centre was open during the core day, Mondays to Fridays, and staffed on a rota basis. The daytime opening hours made it difficult for prisoners working outside the establishment to use the centre. Records were not kept, but representatives said that they saw at least 10 prisoners a day.
- 4.6 Some notices with photographs of the diversity representatives were displayed around the establishment, but these were out of date and a number of prisoners were unaware of the diversity drop-in centre or who the diversity representatives were. Diversity representatives were recruited by word of mouth rather than open recruitment.
- 4.7 Equality impact assessments on locally implemented policies and functions had not been carried out (see main recommendation HP45).
- 4.8 Prisoner diversity consultative forums had been organised but no prisoners had attended. It was suggested that the daytime scheduling of the meetings had contributed to the non-

attendance. There were few posters around the establishment reflecting the diversity of the population.

## Recommendation

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- 4.9 Effective and credible arrangements should be established to consult with minority groups.

## Housekeeping points

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- 4.10 The opening hours of the diversity drop-in centre should be revised to enable prisoners working outside to use the facility.
- 4.11 Diversity representatives should be appointed following an open recruitment campaign.
- 4.12 Diversity should be positively promoted through the décor of the prison.

## Race equality

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- 4.13 The REO had insufficient time for the role. Black and minority ethnic prisoners were less likely to be granted release on temporary licence (ROTL) than white prisoners. They also had poorer access to paid work or community service than white prisoners. In our survey, black and minority ethnic prisoners reported more negatively than white prisoners in a number of areas. Racist incidents were thoroughly investigated but not always by the most appropriate member of staff. Replies were inappropriately short. Conciliation strategies were not used to resolve racist incidents.
- 4.14 At the time of the inspection, black and minority ethnic prisoners made up 34% of the population. The largest group were black Caribbean (10%) followed by black African (8%). Race issues were discussed at the social inclusion meetings. The governor promoted race equality through the 'diversity and race equality communications strategy'. Notices promoting race equality were displayed around the establishment.
- 4.15 Black and minority ethnic prisoners were less likely to be granted ROTL than white prisoners and grants of ROTL to this group were below the expected range for five consecutive months from June to October 2010. This had been noted at the social inclusion meeting in July 2010, but had not improved. Black and minority ethnic prisoners also had poorer access to paid work and community service than white prisoners. In November 2010, all 247 man-days spent on paid work had involved white British prisoners. Similarly, black and minority ethnic prisoners had undertaken only 20% of the community service days in November 2010 (see recommendation 4.9).
- 4.16 In our survey, black and minority ethnic prisoners reported more negatively than white prisoners on a range of areas, including induction, food, access to complaint forms, access to doctors and nurses, and resettlement licence. Only 3% of black and minority ethnic prisoners compared with 14% of white prisoners said that staff normally spoke to them during association. Sixty per cent of black and minority ethnic prisoners said they had been given greater responsibility than when they were in closed conditions against 75% of white prisoners.

- 4.17 In contrast, black and minority ethnic prisoners reported more positively on respect for religious beliefs, access to religious leaders, victimisation or intimidation by another prisoner, emotional wellbeing and mental health, and access to the gym and library. Over 80% of staff had undergone the Challenge It Change It training.

### **Managing racist incidents**

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- 4.18 In our survey, few prisoners said they had been victimised by staff (3%) or other prisoners (2%) because of their race or ethnic origin. All diversity incidents, including racist incidents, were reported on DIRFs which were available beside the seven boxes located around the prison. In the six months prior to the inspection, 25 diversity incidents had been reported, all but three of which had related to race. Seven of the 25 reports related to a single incident (see paragraph 4.20). The diversity incident log recorded all seven reports as a single entry, which was misleading.
- 4.19 In general, diversity incidents were thoroughly investigated, but the interview records did not record the name of the interviewer and investigations were not always conducted by an appropriate member of staff. The REO, an administrative officer grade, had investigated all 10 incidents that we examined. On two occasions this was inappropriate, the first when an offender manager had refused a Traveller home detention curfew and the second when an allegation had been made against a senior officer.
- 4.20 Conciliation strategies were supported in the policy but not practised. Reply letters typically consisted of only two paragraphs, one of which outlined options to appeal to the Prisons and Probation Ombudsman or the Equality and Human Rights Commission but gave no contact details. In one incident, seven Muslim prisoners had complained about being served burgers containing pork. After a lengthy investigation involving 10 interviews, the reply letter simply acknowledged that the incident had occurred and stated that any perceived racism had not been intentional.
- 4.21 Completed DIRF investigations were reported and discussed at the social inclusion meetings. Prisoner representatives had little faith in these reports, believing that they were ineffective and could cause the complainant to be viewed by staff as a troublemaker.

### **Race equality duty**

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- 4.22 Only one race equality impact assessment had been conducted since the previous inspection in October 2008. There was a particular need for impact assessments of ROTL and access to paid work and community service for black and minority ethnic prisoners.
- 4.23 Black history month had been celebrated in October 2010 with art and poetry nights, a quiz based on black achievers, a musical evening, cultural food on the menu and film nights. Prisoners had written a play commemorating the West Indian men and women who had served with the British army during the First World War. The play had been cancelled the day before the performance because managers were concerned about the script.
- 4.24 At the end of October 2010, there had been 14 Travellers in the prison. They were identified by the Traveller prisoner representative who notified the REO. A Traveller family day held prior to the inspection had been well received. Videos on Traveller culture and history were shown, cultural food was served and information displayed in the visits hall.

## Recommendations

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- 4.25 Investigations into diversity incidents should be conducted by staff of appropriate seniority.
- 4.26 Replies to diversity incident reports should be detailed, state whether the complaint has been upheld and the reasons for the decision.
- 4.27 Conciliation strategies should be used where appropriate to resolve conflicts between perpetrators and victims of racist incidents.

## Housekeeping points

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- 4.28 A separate entry should be made in the diversity incident log for each DIRF received.
- 4.29 Investigators' names should be recorded on the DIRF investigation records.

## Religion

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- 4.30 Religion was addressed in the diversity policy. Most prisoners said that their religious beliefs were respected and there was no evidence of discrimination on the grounds of religion.
- 4.31 The religious needs of prisoners were included in the 'diversity policy and good practice guide' and well met (see section on faith and religious activity). The establishment recorded the faith of prisoners and any religious conversions. Religion was a standing item on the social inclusion meeting agenda and the meetings were attended by the chaplain.
- 4.32 Staff were issued with a booklet entitled '*A guide to religious practice in prisons*'. Victims of discrimination on religious grounds were encouraged to complete a DIRF.
- 4.33 Prisoners in our groups reported positively on faith provision. Fifty-nine per cent said that their religious beliefs were respected compared with 52% at the previous inspection. No prisoners in our survey had been victimised by another prisoner because of their religious beliefs, although 2% said that they had been victimised by a member of staff.

## Foreign nationals

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- 4.34 The foreign national policy focused on administrative procedures rather than prisoners' needs. Foreign national prisoners' support meetings were irregular. Despite attendance of the UK Border Agency (UKBA), foreign nationals' applications for ROTL were delayed by slow UKBA responses. The offender management unit (OMU) had not done enough to expedite those responses. There was a useful list of people who could interpret for speakers of specific languages.
- 4.35 During the week before the inspection, 48 foreign nationals had been held in the prison. The foreign national policy published in June 2010 focused purely on administrative procedures for foreign national prisoners and on liaison with UKBA. It did not deal with the distinct needs of foreign nationals, for example contacting immigration solicitors, maintaining links with families

overseas, preparing for return to their country of origin and language difficulties. A foreign national prisoner action plan had been drafted following consultation with prisoners in July 2010, but it lacked coherence, a timetable and deadlines. There was no dedicated foreign national coordinator and the REO was responsible for all duties in relation to foreign nationals.

- 4.36 A list of staff and prisoners who were willing and able to act as interpreters was updated weekly and accessible to all staff. During the inspection two members of staff and 20 prisoners acted as interpreters. The prison had access to telephone interpreting services, but they were rarely used. Notices around the establishment were all in English.
- 4.37 There was regular liaison with UKBA. Staff from a local immigration office attended the establishment twice a month. A record of prisoners needing to see UKBA was kept by prisoner representatives in the diversity drop-in centre and faxed to the local immigration office in advance of their visit. Staff from the criminal casework directorate (CCD) did not attend the establishment.
- 4.38 UKBA were often slow to respond to requests for a contribution to risk assessment board meetings. At the time of the inspection, 18 replies from UKBA were outstanding, none of which had been followed up by the OMU. One reply had been outstanding for more than two months. The CCD case owners rarely supported requests for ROTL.
- 4.39 No immigration detainees were held during the inspection. Staff told us that UKBA occasionally asked for a prisoner to be held under immigration powers following completion of their sentence, before being moved to an immigration removal centre (IRC). In one case, OMU held the authority to detain (IS91) dated July 2008 for a prisoner serving an eight-year sentence. This was out of date but staff wrongly thought that it could be used to hold the person in future on expiry of sentence.
- 4.40 The REO knew which prisoners were foreign nationals. This information was recorded on the prisoner record management system (P-Nomis) and a diversity representative asked prisoners on induction if they were foreign nationals. Some foreign nationals we spoke to were unaware of the foreign national prisoner representative, but there were some notices with his photograph around the prison.
- 4.41 There was no regular contact with accredited, independent immigration advice and support agencies. The legal services officer had access to the community legal advice website, although the REO and diversity representatives were unaware of this.
- 4.42 A foreign national prisoner support and information group meeting had been held in July 2010 but had not met since. The group had met on five occasions in 2009.
- 4.43 Some foreign nationals were returned to closed conditions following a decision by UKBA to make a deportation order. Others were taken to an IRC on completion of their sentence. Until recently, the prison's policy had been to move foreign nationals to the segregation unit to await transfer with no opportunity to pack their belongings. At the social inclusion meeting in July 2010, the governor had agreed to *'issue a notice stating that foreign national offenders being transferred for deportation reasons can clear their own property'*. Some prisoners still thought they would not be given the opportunity to pack.
- 4.44 Foreign national prisoners who had not received any visits from family or friends during the previous month were entitled to additional phone credits, although prisoners we spoke to were not aware of this. Foreign national prisoners could also buy phone cards which enabled them to make telephone calls at discounted but still expensive rates.

## Recommendations

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- 4.45 The foreign national prisoner policy should focus on prisoner needs and be accompanied by a time-bound action plan.
- 4.46 Delayed replies from UKBA should be followed up promptly by the offender management unit.
- 4.47 Foreign nationals should not be held beyond sentence without an up-to-date authority to detain (IS91).
- 4.48 Efforts should be made to make and sustain contact with immigration advice and support agencies.
- 4.49 Foreign national prisoner support and information groups should be held regularly to help raise awareness of provision and feed back areas of concern to senior managers.

## Disability

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- 4.50 Identification of prisoners with disabilities was thorough, but the coordination of work in this area was inadequate. There was no care planning for prisoners with disabilities. Prisoners with learning disabilities were supported by the education department, but the treatment of prisoners with physical disabilities was uncoordinated. There were no clear criteria for location to the unit with adapted cells. Some prisoners needing such facilities were located elsewhere while others with less need occupied those cells. There were 13 prisoners with personal emergency evacuation plans (PEEPs) but these had only been completed the week before the inspection. The disability policy was still in draft and some promising proposals had not yet been implemented.
- 4.51 In our survey, 11% of prisoners identified themselves as having a disability. However, the establishment did not have a central record of prisoners with disabilities and managers did not know how many required support or the nature of the help that they needed.
- 4.52 There was a thorough, although uncoordinated, approach to the identification of prisoners with disabilities. Prisoners were given the opportunity to disclose their disability on reception and induction and this information was used to allocate cells. New prisoners were also assessed by a nurse. Those with a physical disability were referred to health care with a named nurse to oversee their care. Prisoners with a learning disability were referred to the education department, where they were assessed and referred to one-to-one support or group teaching at an appropriate level. The on-site careers advice service also interviewed all prisoners and assessed how a disability would influence their work choices. There was a peer education scheme and prisoners could receive support from another prisoner if they wanted it.
- 4.53 The establishment had 14 adapted cells and bathroom and toilet facilities based on one unit, but there was no formal policy describing how the unit operated, for whom it was intended and what services would be provided. We were told that the unit was intended for older prisoners and those with mobility problems, although at the time of the inspection some of the prisoners located there had no disabilities. Health care staff told us that there were some prisoners who could come off the unit and others who were placed elsewhere but needed the facilities because they had mobility and other health conditions. There was no care planning for

prisoners with disabilities and decisions to move prisoners on or off the unit were made at short notice in ad hoc meetings.

- 4.54 There was a central record of 13 prisoners who required a personal emergency evacuation plan (PEEP), although the assessments had only taken place during the week before the inspection. Completed PEEPs were kept in boxes in the wing offices and a list of names was displayed on the office notice boards. Prisoners on PEEPs we spoke to said that they were unclear how they would be helped in an emergency.
- 4.55 The existing disability discrimination policy was out of date and was being revised. Most of the proposed policy initiatives had not been implemented. The needs of prisoners with disabilities were discussed at social inclusion meetings, but no data were provided to inform strategy in this area. Discussions focused on specific issues, such as the ongoing problem of transport from the prison to the rail station and local town. The disability coordinator was a member of the social inclusion team with responsibility for other diversity issues.

## Recommendations

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- 4.56 There should be a central register of prisoners with disabilities including information on how their individual needs should be met. All prisoners with disabilities should have a care plan.
- 4.57 There should be a clear policy on how the unit with adapted cells should be used.
- 4.58 The effectiveness of provision for prisoners with disabilities should be monitored at social inclusion meetings.

## Older prisoners

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- 4.59 Prisoners over 50 were generally more positive about the way they were treated than younger prisoners. There was some provision for older prisoners, including suitable work posts, but no governance to ensure that their needs were addressed. Older prisoners had made suggestions about services that would help them, but there was no evidence that these had been acted upon. A number of promising initiatives had yet to be implemented.
- 4.60 There were 128 prisoners over 50, including three over the age of 70. In our survey, the responses of older prisoners to their treatment were generally more positive than those of the general population. Sixty per cent said that they were treated well at reception compared with 48% for those under 50. Older prisoners also responded more favourably on issues such as access to the chaplaincy and Listeners, and feeling able to speak to a member of staff if they had a problem. Only 12% of older prisoners said that they had felt victimised by staff, compared with 25% of prisoners under 50, but 16% said that they had felt victimised by other prisoners compared with 8% for those under 50.
- 4.61 The policy for older prisoners was to form part of the diversity policy and good practice guide, which had yet to be implemented. The issue of older prisoners was a standing item on the social inclusion meeting agenda, but no information was collected to inform the meeting of the specific needs of this group of prisoners. There were no specific activities for older prisoners although they had drawn up an action plan which was presented to the July social inclusion meeting. There was some provision for older prisoners with mobility problems on the unit with

adapted cells and suitable work was available, including the making of poppies for the Royal British Legion.

- 4.62 Various initiatives to support older prisoners were being developed, including links with local day centres and a special association area in the dining hall. There was a peer supporter dedicated to older prisoners.

## Recommendation

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- 4.63 There should be a formal consultation process with older prisoners to inform the development of specific services to meet their needs.

## Sexual orientation

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- 4.64 Two recent meetings had addressed the needs of gay and bisexual prisoners. The draft policy on sexual orientation did not describe how the negative perceptions of gay and bisexual men would be addressed. The peer supporter with responsibility for the sexual orientation strand of diversity had a high profile.
- 4.65 As in many other prisons, we were told that prisoners were afraid of being open about their sexual orientation and that some who had been open had been victimised. The draft diversity policy and good practice guide included a section on sexual orientation, gender identity and gender reassignment.
- 4.66 The establishment had taken positive steps to engage with gay and bisexual prisoners and two meetings had been arranged, the first of which had been attended by the governor. There was an active peer supporter with responsibility for sexual orientation. His role was well advertised and he said he had been able to support a significant number of men.

# Section 5: Health services

## Expected outcomes:

Prisoners should be 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 in the community.

5.1 Health care services were commissioned by West Sussex Primary Care Trust (PCT). Until recently, primary care services had been affected by a lack of clinical leadership and partnership working, but overall provision was good and the range of primary care services was adequate for the needs of the population. Pharmacy and dental services were adequate but a number of issues required attention. There was no access to in-reach mental health services and links with community mental health services varied. Prisoners spoke highly of health care staff and services during the inspection. This was not reflected in our survey which identified dissatisfaction with access to, and the quality of, health care services.

## General

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- 5.2 Sussex Community NHS Trust provided primary care services, GP services and a primary mental health service. A recent health needs assessment was about to be published and the prison health performance and quality indicators had been reviewed. There was no prison health improvement action plan or systems to monitor equality of access to services. Strategic partnership arrangements had recently restarted and were limited. It was planned that the prison partnership board, which met every two months, would monitor services and governance issues. Board membership comprised senior staff from the prison, PCT representatives and the head of health care. Neither the head of health care nor the clinical nurse manager was a full member of the senior management team.
- 5.3 The department was located on the ground floor at the end of the accommodation blocks. It had a small waiting area, three treatment rooms, a dental room, an optician's room, pharmacy and adjoining offices, all accessible from a central corridor that ran the length of the building. There were rooms for the primary mental health nurse and GP. The department was generally clean and tidy, although some areas needed refurbishing. Old cupboards in the pharmacy and treatment rooms did not all lock securely. Some sinks and work surfaces did not conform to infection control requirements. An integrated drug treatment system (IDTS) facility was being furnished. There was no separate health care room in the prison reception area. Health screening was undertaken in the senior officer's room which was large but sparse and did not have a full range of health equipment or access to SystemOne.
- 5.4 A good range of primary care services was available. Prisoners were observed being treated respectfully. Information about access to health services was available but not in a range of languages. Prisoners were able to raise health concerns through the offender consultative committee.

## Recommendations

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- 5.5 The prison partnership board should develop a prison health delivery plan to improve and monitor health services for prisoners.

- 5.6 All equipment and surfaces should conform to infection control requirements and cupboards should have secure locks.
- 5.7 There should be a health care room in reception that provides full facilities for initial screening of prisoners, including access to SystemOne.

## Housekeeping point

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- 5.8 Information about health services should be available in a range of languages.

## Clinical governance

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- 5.9 There were a range of policies and procedures in place and some of these were specific to prison health. There had been a recent infection control audit. Monitoring of clinical governance was limited as this occurred at the recently established prison partnership board which had not been attended by the health care department.
- 5.10 The nursing establishment included a clinical nurse manager supported by four practice nurses. There was one primary mental health nurse. Two part-time salaried GPs were available Monday to Friday. There was a health care manager and two administrative staff. The team was managed by the head of mental health business unit. Clinical staff training and professional development opportunities were available and clinical supervision and staff appraisals were in place and used by all nursing staff.
- 5.11 Emergency resuscitation equipment, including one automated emergency defibrillator, was available in the health care centre, but not when the department was closed. With the exception of first aid kits, there was no other emergency equipment across the site. First aiders were available on site and training was up to date. All emergency equipment was checked weekly and records of checks maintained. Some pharmaceutical items were held in the grab bag, and we found all these items to be in date. All health care staff had completed annual cardiopulmonary resuscitation training. There were no readily accessible protocols for emergency treatment by nursing staff of hypoglycaemia, anaphylaxis and resuscitation.
- 5.12 There were good links for specialist nurse advice such as the asthma nurse and continence nurse. Equipment and mobility aids were available when required and ongoing contractual issues were being addressed.
- 5.13 SystemOne was in place for the management of clinical records and all prisoners had a clinical record. Staff had recently received further training to enhance the use of the electronic system. Generally record keeping was of a good quality. Paper clinical records were stored in locked filing cabinets in the administration office. Archive arrangements were appropriate and compliant with the Data Protection Act and Caldicott guidelines.
- 5.14 Complaints were predominantly received through the prison system. There were very few complaints about health care, the most common being waits for dental services. Responses were satisfactory. Access to patient advice and liaison services (PALS) was advertised in the health care department but not widely around the establishment.
- 5.15 There was no system for the monitoring of unexplained injuries and only the front sheet of the completed F213s (form used to report injuries to prisoners) was shared with health and safety or the security department.

## Recommendation

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- 5.16 Emergency equipment should be easily accessible throughout the establishment and there should be sufficient staff trained to use it.

## Housekeeping point

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- 5.17 PALS information should be advertised around the establishment.

## Primary care

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- 5.18 In our survey, prisoners were more negative about ease of access and the quality of clinical services than the comparator and the previous full inspection, but prisoners interviewed during the inspection were complimentary about the quality of clinical services.
- 5.19 Primary health care services were available Monday to Friday between 8am and 5.15pm. Out-of-hours services were provided by Harmoni during evenings and weekends in line with the local community service. There was an adequate range of visiting professionals including a biweekly genito-urinary medicine service (GUM), and monthly access to the podiatrist and optician.
- 5.20 There was no physiotherapist on site and a number of prisoners had been identified as having back or shoulder pain. The gym provided an over-50s group and had just started providing a disability and remedial group for back pain for staff and prisoners. There were plans to develop the health trainer role, although funding had not been received. The health care department had some links with the gym but did not consistently advise the gym of men's fitness to take part in activities.
- 5.21 Slots were allocated every day for emergencies and general appointments. Twice a week specific slots were allocated for community service and paid workers. Discussions were in hand to ensure that all workers could access their medication in a timely way. Clinics included smoking cessation, well man screening and immunisations. There were no clinics for patients with coronary heart disease or hypertension. Each nurse held the lead in areas such as diabetes, disability, older people, asthma and foot care. Nurses organised their own appointments and reviews. The use of SystmOne for case management was limited as was the use of the appointment system. There were no triage protocols or algorithms, although there were plans to provide triage training for one nurse.
- 5.22 There was no therapeutic activity for prisoners not actively engaged in work or education or those with low level mental health needs. A disability and older person's liaison nurse regularly visited the accommodation area for prisoners with disabilities. A drop-in session was held once a month for older prisoners with health needs or those with disabilities.
- 5.23 Initial screening of all new prisoners was minimal and carried out in reception using a standard screening tool which was later scanned on to SystmOne. Secondary screening was not routinely carried out which presented some risk if a prisoner had not been seen by health care staff for a significant length of time. Prisoners were given a leaflet outlining the health care services available and a nurse spoke at prisoner induction sessions. There was access to translation and interpretation services.

- 5.24 A range of health promotion literature was displayed in the department and there were plans to increase the health promotion information across the establishment. Health promotion information was not available in a range of languages. The first monthly health promotion event had taken place during the inspection week.
- 5.25 A GUM clinic provided sexual health advice and a wide range of condoms and dental dams were available from the health care centre, but only on request.
- 5.26 If prisoners wanted to see a health care professional, they submitted an application form in a box located outside the health care department. The health care orderly delivered the appointment slips to the relevant prisoner's cell. Occasionally prisoners complained that they did not receive an appointment slip.
- 5.27 A nurse attended prisoners on the segregation unit each day if necessary. The out-of-hours service assessed prisoners who had been moved to the segregation unit during the evening and weekend.

## Recommendations

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- 5.28 There should be a full range of nurse-led clinics including hypertension and coronary heart disease.
- 5.29 Formal documented triage algorithms, including those for emergency treatment, should be used to ensure consistency and continuity of care and advice given to patients.
- 5.30 All prisoners should have the opportunity for a thorough reception screen and, where necessary, secondary health care screening within 72 hours. Information should be recorded using the standardised electronic screening tool, and assessment forms relevant to the prisoner's health needs should be completed.

## Housekeeping points

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- 5.31 SystemOne should be used to its full capacity to enable effective case management review and appointment planning.
- 5.32 Health promotion literature should be available in a range of languages.
- 5.33 Condoms should be available for prisoners confidentially.

## Pharmacy

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- 5.34 Pharmacy services were provided by a local pharmacy which visited the establishment approximately every two months. Prescription items were supplied in a timely manner. The West Sussex PCT pharmacy lead was scheduled to visit once a month although this did not always happen. The supply-only model did not allow patients access to a complete pharmaceutical service. There was little face-to-face contact with the pharmacist and there were no pharmacist led clinics. Thermolabile products were stored in appropriate conditions.
- 5.35 The vast majority of medication was provided as in possession. A nurse prescriber, supported by the GP when necessary, was available to patients every day, which enhanced the range of prescribed medication available to patients. Prescriptions were electronically generated using

SystemOne. The in-possession risk assessment was carried out by the GP or prescriber during their clinics and they indicated on the prescription the frequency of in possession. There was an in-possession contract which prisoners signed but there were no lockable boxes in cells to ensure security of prescribed medicines (see recommendation 2.10). Prescriptions were faxed to the local pharmacy and medication was received the same or the following day.

- 5.36 There were patient group directions (PGDs) for the range of immunisations offered by the department but there were insufficient PGDs for nurses to work autonomously in their lead roles. Over-the-counter medications were issued by nurses during special sick appointments. Special sick supplies were recorded electronically on the patient's medication record, but these were not reviewed routinely by the pharmacist.
- 5.37 Prescribing was appropriate to the population and patients could request repeat medication. There was appropriate provision of medication for patients being discharged or transferred. Patients could receive medication out of hours on the authority of the local out-of-hours doctors' service, which wrote a prescription to be dispensed by a local pharmacy. Analgesic and antibiotic medication could be supplied from stock in an emergency.
- 5.38 The medicines management group had been re-established and had met twice. The membership had varied and there was a lack of clear procedures and written policies for staff to adhere to. The in-possession policy for prescribers and staff was not sufficiently robust. There was no written policy for out-of-hours provision and no written risk assessment policy. There was no single specific prescribing formulary available.

## Recommendations

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- 5.39 **The pharmacist should be supported to develop pharmacy-led clinics and medicine use reviews.**
- 5.40 **A range of patient group directions should be produced to facilitate the supply of more potent medicines by nursing staff when appropriate.**
- 5.41 **There should be a regular audit of all medicines management systems and the pharmacist should regularly review prescribed and special sick medication and items issued from stock.**
- 5.42 **Issues relating to drug compliance should be investigated, records maintained and, where necessary, adjustments made to the quantity of medication issued to reduce waste.**
- 5.43 **There should be robust written policies for risk assessment and for the provision of in-possession and special sick medication.**
- 5.44 **The medicines and therapeutics committee should ensure that prescribing is evidence based and a single prescribing formulary should be made available.**

## Dentistry

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- 5.45 The dentist and dental nurse provided two sessions a week on Wednesday. The dental surgery was clean, pleasant and well ventilated. The dental chair, unit, light and cabinets were modern and in good working order. The autoclave and ultrasonic bath had recently been replaced. An independent infection control audit had been carried out. During observation of

treatment, it was noted that hand washing did not take place between each patient, although gloves were changed. A practice inspection had been carried out a year previously and the report was satisfactory.

- 5.46 A full range of treatment equivalent to that available in the NHS was provided to all patients, with oral health promotion on a one-to-one basis. There were 40 patients on the list and nine new patients were seen each week. The waiting list was approximately three weeks for a new patient and eight weeks for ongoing treatment. Additional funding had been awarded as the dentist had exceeded targets in the previous year. There were plans to provide additional sessions during March 2011 to reduce the waiting list. The DNA (did not attend) rate was two to three per session. DNAs had been investigated and various reasons had emerged, including failure to receive appointment slips. It was not clear if failed appointments had been followed up.
- 5.47 Patients made a request to see the dentist through the health care application process and the request was assessed to determine if an urgent appointment was needed.
- 5.48 Although there was no formal triage protocol, health care staff had received some training from the dental nurse and any urgent cases were seen by the dentist at his own surgery. There was no dental out-of-hours protocol. Annual leave was partially covered for one session per week provided by an associate of the provider for emergency treatment. There was good communication between the dentist and the health care staff.
- 5.49 Generally, records were appropriately stored in locked fireproof cabinets, although there was one box stored under shelves waiting to be archived securely. Record keeping was satisfactory, although medical histories were not always updated annually. Holders were not routinely used when taking radiographs and several 'grade 3' radiographs were observed. Records did not contain reports for all the radiographs taken.

## Recommendations

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- 5.50 Further investigation of prisoners who do not attend should be carried out to promote more efficient use of the sessions.
- 5.51 There should be a formal written triage system with clear treatment pathways and out-of-hours protocol for non-dental staff.
- 5.52 Full cover for annual leave should be organised to accommodate the large number of patients.
- 5.53 Record keeping and archiving of records should be reviewed with reference to current Good Practice Guidelines published by the Faculty of General Dental Practice (UK).
- 5.54 Provision of radiographs should be reviewed with reference to Selection Criteria for Dental Radiography Faculty of General Dental Practice (UK) Good Practice Guidelines. Radiographs should be provided in accordance with IR(ME)R 2000.

## Housekeeping point

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- 5.55 Hand washing should take place between patients to comply with current good practice for infection control.

## Secondary care

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- 5.56 One of the administration staff managed the hospital outpatient appointments for prisoners. Prisoners who had been risk assessed could attend external appointments on their own or, if necessary, an escort could be provided. There was reasonable access to external hospital appointments with the exception of local physiotherapy services where there were long waits for an appointment. There were some difficulties communicating with the pain clinic and ophthalmology. We were told that prisoners were sometimes transferred to Ford with outstanding appointments which had to be rearranged, resulting in a delay in treatment.

## Recommendation

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- 5.57 There should be clear referral pathways to ensure timely access to secondary care.

## Mental health

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- 5.58 In our survey, 44% of prisoners said that their emotional well being or mental health needs were being addressed by a nurse against the open prison comparator of 29%. No prisoners said that their mental health needs were being addressed by a psychiatrist against the comparator of 8%.
- 5.59 At the time of the inspection, there was one registered mental health nurse who offered a primary mental health service three days a week to cover for the full-time member of staff who was on sick leave. The caseload consisted of approximately 30 prisoners. One-to-one support and guided self-help were available, but there were no day services or group work. Counselling services were provided by Cruse for bereavement and Relate for relationship issues. There were good links with the chaplain. There were no in-reach mental health services in the establishment and limited access to community mental health services, which had been identified in the health needs assessment as needing prompt improvement. Although improving access to psychological therapies had been discussed at the shared care protocol meetings, there were no clear plans to develop mental health services.
- 5.60 Senior officers had received mental health awareness training as part of the ACCT (assessment, care in custody and teamwork) training. Mental health awareness training for discipline staff had not been delivered since 2009 and there were no plans for this to happen. No patients were awaiting transfer to secure NHS mental health beds, although staff were aware of the procedure if it was required.

## Recommendations

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- 5.61 A full range of mental health services should be available and provided in a timely manner.
- 5.62 A programme of mental health awareness training should be provided for all prison staff.



# Section 6: Activities

## Learning and skills and work activities

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### Expected outcomes:

Learning and skills provision meets the requirements of the specialist education inspectorate's Common Inspection Framework (separately inspected by specialist education inspectors). Prisoners are encouraged and enabled to learn both during and after sentence, as part of sentence planning; and have access to good library facilities. Sufficient purposeful activity is available for the total prisoner population.

6.1 The prison provided a good range of purposeful work and vocational training, and sufficient activity places for full employment, though only 71 prisoners were attending external placements at the time of the inspection. Prisoners received good information and advice at induction, but there was insufficient focus on helping them to identify goals for resettlement. There were waiting lists for many courses. The range of vocational qualifications had increased, but few prisoners had achieved a qualification during the previous year. Teaching and training were generally good and the achievement of educational qualifications satisfactory, but teaching and learning in literacy and English for speakers of other languages (ESOL) were not sufficiently interesting or stimulating. Prisoners had good access to the library which was well resourced. The programme in the gym had improved since the previous inspection, although there were no courses leading to qualifications.

## Leadership and management

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6.2 Leadership and management were satisfactory. The range of work, training and education had improved and there were more opportunities for prisoners to gain qualifications at work, especially in horticulture. There were sufficient activity places for full employment. On one day during the inspection, 389 prisoners worked in the establishment, 104 attended education or vocational training, 43 were on release on temporary licence for work, training or community service, four were retired and one was medically unfit for work. Prisoners could engage in a combination of part-time education and employment and all prisoners were entitled to attend education for up to five sessions a week. However, staff turnover and temporary appointments to the senior management post of head of learning and skills had led to inconsistent strategic direction and insufficient focus on planning activities to support prisoners' resettlement into the community.

6.3 The pay scheme had been revised to reduce anomalies so that prisoners selecting education or training were not at a disadvantage. However, employment in the kitchen, textile recycling and work for DHL were more highly paid and these were the most popular. The establishment had introduced an appropriate financial incentive scheme to motivate prisoners to achieve qualifications at work.

6.4 Further opportunities for accreditation in education and vocational training had been introduced since the previous inspection. Managers had developed good links with external partners to enhance the programmes offered. Learning environments were well maintained and efficiently managed. However, the number of prisoners attending external work and training was relatively low and prisoners attending education and vocational training did not have sufficient opportunity to apply their skills in work-based settings.

- 6.5 There were staff shortages in the education department at the time of the inspection. Although a programme had been developed for prisoners working in industries and horticulture to receive training in literacy and numeracy, staff had not been available to teach these programmes since August 2010.
- 6.6 The promotion of equality and diversity was satisfactory. Bright, well-presented posters in education and training environments effectively promoted and reinforced appropriate values. College and prison staff collected detailed data on participation in activities and achievement of qualifications according to prisoners' age and ethnic background. However, managers did not use these data fully to identify gaps or trends in achievement. The establishment provided a satisfactory range of training in equality, diversity and safeguarding that was also available to the staff of the learning and skills providers. At the time of the inspection, few members of staff from the college and other external organisations had received recent training in equality, diversity and safeguarding.
- 6.7 The arrangements for evaluating and improving the quality of learning and skills across the establishment were not well developed. Self-assessment of work and vocational training was thorough and provided an accurate and realistic evaluation of the provision. However, the assessment did not identify some of the key areas for development in education. The monitoring of the quality of teaching and training in education was not sufficiently detailed to identify good or poor practice. The quality of vocational training managed by the prison was not monitored.

## Recommendations

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- 6.8 **There should be clear and consistent strategic leadership and management of learning and skills which focuses on preparing prisoners for resettlement.**
- 6.9 **Literacy and numeracy teaching provision should be included in vocational training and work.**
- 6.10 **Members of staff from partner organisations providing work, training and education should receive training in equality, diversity and safeguarding.**
- 6.11 **Diversity monitoring data should be used to identify any gaps in access or achievement and any disparities investigated.**
- 6.12 **The quality of teaching, training and learning in education and vocational training should be monitored to improve standards and share good practice.**

## Induction

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- 6.13 Induction into learning and skills activities was satisfactory. Prisoners attended a two-day induction in a welcoming atmosphere with informative wall displays about the programme offered and the support and advice available. The careers, information and advice service had been provided by Tribal since December 2009. Initial assessments in literacy and numeracy were managed well. Staff had reduced the need for prisoners who had recently completed an assessment at another establishment, or could present certificates, to repeat the assessment unnecessarily. Prisoners assessed at entry level for literacy, numeracy or language were efficiently prioritised and started learning quickly. However, the paper-based assessment used did not provide sufficiently detailed information on learners' achievement at or above level 1.

- 6.14 Prisoners received good information on the options for activities, but they were not told of the length of the waiting lists for many education and training courses and work places, and how this might affect their plans. Most prisoners expressed an interest in undertaking four or five courses but subsequent allocation was based primarily on available vacancies rather than preference. The initial action plan completed at induction did not focus sufficiently on identifying prisoners' plans for resettlement so that the most appropriate activities could be selected to help them prepare for release.

## Recommendation

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- 6.15 Induction should focus on identifying prisoners' plans for resettlement so that they can select the most appropriate learning, skills and work activities to build on their prior learning and work experience, and help them prepare for their release.

## Work

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- 6.16 The range of work had improved since the previous inspection. The number of places in contract workshops offering more repetitive work had been reduced by 80%. There were 20 places for prisoners to produce poppies for the Royal British Legion, manufacture wash bowls for the Prison Service and produce technical tools. Other employment comprised stores work, recycling, the laundry, contract manufacturing in textiles and plastic moulding, engineering, the kitchens and orderly roles around the prison. Horticulture was the largest employer in the prison with between 70 and 110 places, depending on the season. The gardens were productive and well managed. Each year they provided approximately 40,000 trees and shrubs to other prisons and 400,000 plants to prisons, local authorities and the public. An extensive market gardening facility provided a wide range of fruit and vegetables.
- 6.17 The establishment had developed good links with external partners to set up and manage three of the prison workshops. Travis Perkins trained prisoners to refurbish machinery for hire to the public. The prisoners gained qualifications accredited by the company for competence in light and heavy machinery. Lawrence Michael Barry Ltd recycled waste cloth into rags for industry: prisoners developed work skills and some progressed to driving to collect or deliver supplies. DHL operated a packing shop for prisoners' canteen purchases and prisoners developed a good understanding of the time-constrained logistics of the supply chain industry.
- 6.18 The workshops were well equipped and produced some very high-quality products. Prisoners achieved good technical skills and standards of work and many also developed employability skills, such as working to tight deadlines. However, systems for identifying and recording the development of these interpersonal or work-related skills were poor. Although there were more workplaces in the laundry, kitchens and horticulture which offered opportunities for accreditation, the number of prisoners achieving vocational qualifications through work was relatively low in 2009/2010. Achievement rates were high for individual units of qualifications in skills such as mower and tractor driving.

## Vocational training

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- 6.19 The Manchester College delivered a national vocational qualification (NVQ) at level 1 in construction crafts in carpentry and painting and decorating, and prisoners undertook programmes for the Prison Information and Communication Technology Academy (PICTA). The training kitchen had six places for prisoners to work towards an NVQ at levels 1 and 2 in the staff mess. The British Industrial Cleaning Science courses provided training at levels 1

and 2. Training facilities were sufficient for the number of prisoners attending each programme and the prisoners had good access to the resources they needed. A small social enterprise company working in the prison had arranged with a training provider to deliver short training courses of between one and five days in practical vocational skills. Recent courses had led to certificates in ladder work, erecting scaffolding towers, safety skills in construction, operating cherry pickers, the manufacturing of biodiesel and safety in street work. Achievement rates were good, but only 101 prisoners had gained a total of 127 qualifications since June 2009.

- 6.20 The PICTA workshop was well resourced. Transfers to the programme from other establishments where PICTA was offered were well managed. Achievement rates were good at 84%. There were opportunities for progression to higher levels in the programme, although few prisoners remained in the establishment for long enough to benefit.
- 6.21 The quality of training was good and prisoners achieved high standards of work in most areas. For example, in painting and decorating, they demonstrated high quality gloss work and good wallpaper hanging skills. Achievement of qualifications was satisfactory overall. However, staff did not use individual learning plans well enough to identify a prisoner's relevant prior learning and experience and his priorities for development. Very few of the workshops monitored prisoners' progress towards qualifications adequately. In many vocational areas, prisoners did not have sufficient opportunities to practise their skills in a real work environment.

## Recommendation

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- 6.22 The use of individual learning plans should be improved across learning and skills and enterprises to recognise and record prisoners' progress and achievement.

## Education

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- 6.23 Education was provided by The Manchester College. Participation was good with approximately 180 prisoners attending education each week, comprising 30% of the population. All education was part time apart from 10 learners on open and flexible learning programmes. Most classes had waiting lists, some extending up to 12 weeks. The range of education programmes was satisfactory up to level 2. There were limited opportunities to progress to level 3, especially in information technology (IT). ESOL provision had recently been introduced to meet the needs of the growing number of foreign national prisoners. There was a good range of personal development learning, although some courses were offered in rotation and not all prisoners could take their full choice of programmes, depending on the length of their sentence. Courses in customer service and self-employment were offered at levels 2 and 3. Open and flexible learning programmes were offered to meet the needs of learners at level 4 and above. Sixteen learners were following open learning courses, mainly at level 4.
- 6.24 Outcomes for learners were satisfactory. During 2009/2010, achievement rates in IT courses were good at 96% and personal development courses at 91%. Achievement rates in literacy and numeracy were low at 67%, but this represented a 20% increase over 2008/2009. The pass rate in numeracy at level 2 was good at 80%. There were high standards of work in graphic design and business enterprise. Attendance was satisfactory.
- 6.25 Teaching and learning were good in IT, business enterprise, such as customer service and self-employment, and numeracy. In the better classes, staff motivated learners with a range of different activities. In less effective classes, learners used badly photocopied, uninspiring worksheets. Computing facilities were not used to develop learners' skills in literacy or ESOL.

- 6.26 Not all teaching staff used individual learning plans effectively to identify and record learners' goals and progress towards achieving them. Learning goals were often too broad and did not relate sufficiently to development targets identified through diagnostic assessment. Peer tutors gave good individual support to learners in skills for life and IT classes. Accommodation in the education department was satisfactory, but only one room had an interactive white board.
- 6.27 There was good individual support for learners on open and flexible learning programmes. A member of staff had specific responsibility and time allocated to monitor their progress and liaise with external examining bodies and visiting tutors. Specialist dyslexia support was available, but only one learner was receiving it at the time of the inspection.

## Library

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- 6.28 The library was sub-contracted to the West Sussex Library Service. There was good access to library facilities at times when prisoners were not involved in other activities. The library was open each weekday for an hour and a half at lunchtime and two hours in the evening. It was also open for two hours on Saturday afternoons. Approximately 65 prisoners used the library each day. The welcoming accommodation was spacious with soft seating and adequate working areas. However, there was insufficient access to computers and no access to the library for wheelchair users.
- 6.29 The library was well managed by a part-time qualified librarian and staffed by one part-time librarian supported by two part-time prisoner orderlies. The stock of 6,800 books was adequate for the size of the population. The stock was modern and refreshed regularly. The loss rate was low at 3.5%. Books in other languages reflected the different cultures of the population and comprised 5% of the total stock. An efficient inter-library loan service was well used. Seventy-one orders had been made in the month prior to the inspection. A good range of newspapers was available, including foreign language papers. There was a good range of clearly displayed legal practitioner texts, reference books and relevant Prison Service Orders.
- 6.30 There were very few links between the library and education, for example, Story Book Dads was not provided despite an agreement by library and education staff to work with prisoners to build relationships with their children. Not enough tutors used the library as a learning resource.

## Recommendations

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- 6.31 Access to the library for wheelchair users should be improved.
- 6.32 Computing facilities in the library should be improved to meet a reasonable level of need.
- 6.33 Managers should enhance the use of the library to support prisoners' development in wider activities, such as creative writing, job search and parenting skills.

## Physical education and health promotion

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Expected outcomes:

Physical education and PE facilities meet the requirements of the specialist education inspectorate's Common Inspection Framework (separately inspected by specialist education

inspectors). Prisoners are also encouraged and enabled to take part in recreational PE, in safe and decent surroundings.

6.34 The PE department was much improved and participation in PE had increased since the previous inspection. All PE staff were appropriately qualified. The gym provided appropriate equipment although recreation facilities were limited. Prisoners valued PE, but there were too few opportunities for them to gain related qualifications.

6.35 Physical education and health were promoted through an effective weekly induction programme for all prisoners in the gymnasium. Access to PE had recently been restructured to increase participation by a wider range of prisoners. Prisoners could participate in up to two gym sessions a week on weekdays and could also use the gym and organised team sports at weekends. Evening gym sessions were provided for prisoners who were off site during the day. Over-50s sessions were delivered for older prisoners. Four orderlies worked as gym assistants supporting officers and advising other prisoners during induction and recreational sessions. All gym activities were well promoted around the establishment and in the dining hall. Wing representatives provided effective links between the gym and prisoners. However, relevant vocational qualifications in subjects such as coaching and PE training instruction were not provided.

6.36 The PE department was well maintained and managed. Indoor resources included a cardiovascular and modular weight training facility and a small stretching area. There were plans to convert the snooker room to a small sports and games hall to extend the facilities. Outside, a very small all-weather pitch and a cricket wicket were used in fine weather for team sports. Considerable effort had been made to improve the facilities and there were sensible plans to provide further indoor training facilities, including a classroom and injury rehabilitation suite. The modular weight training and cardiovascular equipment was well managed and most repair work was carried out quickly. Shower facilities in the gym were satisfactory.

6.37 Incidents were managed well and appropriate records of incidents maintained. However, medical checks were not conducted systematically by health care before prisoners received their induction into the gym. If a prisoner identified a medical concern on a questionnaire, this information was forwarded to health care.

## Recommendation

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6.38 Accredited training should be provided to support employment in health and physical training instruction.

## Time out of cell

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### Expected outcomes:

All prisoners are actively encouraged to engage in out of cell activities, and the prison offers a timetable of regular and varied extra-mural activities.

6.39 Prisoners were not locked in their cells and, apart from roll checks, had free movement around the site for over 12 hours each day. Activities were available in the evenings.

- 6.40 Prisoners all had keys to their cells and were not locked in at any time. They could leave their billets after the roll check release bells and, apart from returning for the midday roll check, did not have to be back in their billets until 8.45pm. They were expected to be in their own rooms after this time unless they were using the telephone or toilet. Exceptions were made for outworkers at roll checks, some of whom had to leave the establishment well before morning roll check. All prisoners, unless located in cells pending a transfer, were able to move around the prison for over 12 hours each day. All prisoners were allocated full-time activity from Monday to Friday.
- 6.41 Association took place each evening after the meal and the atmosphere was relaxed. The chapel was open until 8pm each night and the library was open on weekdays until 8pm. Evening classes were available twice a week. Some men preferred to associate in billets with their friends.



# Section 7: Good order

## Security and rules

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### Expected outcomes:

Security and good order are maintained through positive staff-prisoner relationships based on mutual respect as well as attention to physical and procedural matters. Rules and routines are well-publicised, proportionate, fair and encourage responsible behaviour.

7.1 The availability of mobile phones, drugs and to a lesser extent alcohol continued to be the main security concerns. The security department was well managed but broader dynamic security was undermined by poor staff-prisoner relationships. There was a strong security committee and there had been some recent improvements in physical security and joint working with the police. Security information had been reducing in quantity, but was well analysed and used, though the focus on intelligence objectives was too broad and static. Rules were clear, but were sometimes not enforced with sufficient discretion.

## Security

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- 7.2 The staff in the security department were committed and adaptable. Within the obvious constraints of an open prison environment, physical security had improved. It had been enhanced by improvements to the fence round the residential area, upgrading camera cover and relocating the camera control and monitoring desk to the communications room to facilitate continuous monitoring. Dynamic security based on good staff-prisoner relationships was weaker (see section on staff-prisoner relationships). Joint working with the local police had also improved and the police had arrested and charged people committing offences in the prison grounds. The rate of abscond had reduced over the previous year to about three each month. An average of 16 prisoners per month were returned to closed conditions.
- 7.3 The security committee was well attended. The minutes recorded intelligence objectives each month, most with specific actions noted. In October 2010, 27 objectives had been recorded, of which 24 repeated those recorded at the meeting in January 2010.
- 7.4 One thousand and twenty-two security information reports (SIRs) had been submitted in the previous six months, which was less than the same period in the previous financial year, particularly the two months before the inspection. Managers were aware of this and were taking action. Over the eight months from June 2009 to January 2010, the average number of SIRs had been 196 and in the following eight months 139. The most common theme was drugs (163 in the previous seven months), followed by mobile phones (112), inappropriate behaviour (100), abscond risk (58) and alcohol (57). SIRs on alcohol had risen to 16 in September and October 2010, having averaged five per month for the previous five months. In terms of actual finds, mobile phones and accessories were the commonest items discovered, followed by drugs and drug paraphernalia, for example burnt foils. Alcohol finds were common but not as prominent as at previous inspections.
- 7.5 The security team had begun to produce monthly graphs and reports on the main themes which they circulated to all functional managers. There were robust systems to follow up actions taken as a result of information received.

- 7.6 Strip-searching was carried out only on the basis of intelligence or an individual risk assessment, including prisoners returning to closed conditions. Random searches were carried out on 5% of prisoners leaving visits. Two visitors were banned at the time of the inspection. Reviews took place appropriately and bans did not last for more than three months.

### Rules

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- 7.7 Clear expectations of behaviour were published and given to each prisoner in the induction compact document. Staff sometimes did not use sufficient discretion in enforcing rules, for example refusing access to the dining hall to prisoners with a valid reason for being a few minutes late (see section on catering).

### Recommendation

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- 7.8 A limited number of intelligence objectives should be set each month to reflect key current priorities.

## Discipline

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### 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.**

- 7.9 The level of adjudications had been rising. They were fairly conducted and governance was sound. Peer interpreters were routinely used for prisoners who did not speak English. Use of force was rare and low level, but management oversight was inadequate. The segregation unit was used for short periods, usually pending transfer. The physical environment was clean. Prisoners located there were not allowed to have exercise in the open air. Segregation paperwork was generally completed adequately. A number of departments visited the unit commendably quickly.

### Disciplinary procedures

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- 7.10 The number of adjudications had been falling steadily for the six months from October 2009 to March 2010, but had then risen over the most recent six months to about the same level. There had been 291 adjudications in the six months preceding the inspection, which was quite high for a category D population. Several prisoners felt that staff were too ready to place them on report. Possession of unauthorised items was the most common charge, followed by breach of conditions of release on temporary licence.
- 7.11 A thorough check of 10% of adjudications had been regularly carried out by the governor who made appropriate criticisms of the conduct and recording of some adjudications. Adjudications which we observed were carried out fairly and with thorough investigation. The adjudicator was careful to ensure that each prisoner understood the procedure and had sufficient ability in English and in reading and writing to follow the proceedings and do justice to his case. Records showed that punishments were proportionate and that adjudicators were careful to enquire about any personal issues which might have contributed to non-compliant behaviour.

- 7.12 Records showed that on the few occasions when a prisoner placed on report did not speak good English, a fellow prisoner or staff member came in with his consent to interpret, risking the divulging of confidential information.

## The use of force

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- 7.13 The use of force occurred too infrequently to support statistical analysis. The monthly security meeting considered each use of force. Control and restraint (C&R) training was up to date. During the year, use of force had consisted at most of placing the flat of the hand on the chest and there were no records of prisoners being subjected to C&R techniques. Use of force reports had been completed thoroughly by the staff involved, but there was no evidence of management checks of the documentation.
- 7.14 Foreign national prisoners being returned to closed conditions following a deportation order were routinely taken to the segregation cells as if they were being returned on disciplinary grounds.

## Segregation unit

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- 7.15 The small segregation unit consisted of four cells, including a gated cell that was used for prisoners under constant supervision. The unit was almost always used for short periods pending transfer back to closed conditions. An average of 20 prisoners a month had been held there during the previous quarter. The cells and communal areas were clean and a shower was located at the end of the unit. There was an adjacent fenced exercise area, but it was unclear if this was ever used. Senior managers expected segregated prisoners to have an opportunity to exercise and this was also a requirement of the unit policy. However, many staff considered the area to be insecure in view of the disrepair of the fence and the difficulty of finding two staff to supervise.
- 7.16 Staffing of the unit was not consistent and the unit was often closed. Managers had previously been concerned about the quality of segregation paperwork completed by irregular staff and had issued further guidance. In our sample, safety algorithms had been completed. However, the time segregation had ended was absent in a few cases and duty governor authorisations were sometimes late; in one case the segregation of a prisoner at 2.15pm had not been authorised until the following day. The names of the authorising governors were sometimes missing and signatures were occasionally illegible. History sheets showed regular observations and there was evidence of staff interacting positively with prisoners. Staff from different departments, including the chaplaincy, health care and Independent Monitoring Board, attended commendably quickly, ensuring that prisoners were seen before transfer.
- 7.17 One prisoner was held in the unit during the inspection and told us that he had been treated well. He had been given food and drink and provided with written reasons for segregation. He had been seen by a chaplain and the duty governor and was complimentary about the assistance provided by unit staff. He was transferred to a closed prison a few hours after coming to the unit.

## Recommendations

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- 7.18 **Managers should review the volume and nature of adjudications to ensure that they are used to best effect within a wider behaviour management strategy.**

- 7.19 Professional interpretation should be offered to those placed on report for charges likely to result in a substantive punishment.
- 7.20 The record of an incident of use of force should always be checked and countersigned by a manager who was not present.
- 7.21 Prisoners in segregation should be offered an opportunity to exercise in the open air each day.
- 7.22 All segregation paperwork should be completed thoroughly and clearly.

## Incentives and earned privileges

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### Expected outcomes:

Incentives and earned privilege schemes are well-publicised, designed to improve behaviour and are applied fairly, transparently and consistently within and between establishments, with regular reviews.

7.23 There was sufficient difference between the levels on the incentives and earned privileges (IEP) scheme to encourage good behaviour. Prisoners were able to retain their enhanced status on transfer from another prison. The IEP scheme operated fairly and consistently across the establishment. IEP board reviews were fair and reasonable. IEP board decisions were monitored and reviewed by senior management.

7.24 At the time of the inspection, 69% of prisoners were on the enhanced level of the IEP scheme and 31% were on the standard level. No prisoners were on the basic regime. Staff and prisoners generally understood the scheme and the differences between the levels and there was sufficient difference between the levels to encourage responsible behaviour. Those on the basic level, in addition to the usual deprivations of privilege, had restricted access to the gym and had to report to an officer three times a day at weekends and bank holidays. Prisoners were able to retain their enhanced status on transfer from another prison.

7.25 The scheme operated fairly and consistently across the prison. Prisoners whose behaviour was inappropriate were issued with a written IEP warning and they had the opportunity to make a written representation or appeal the warning. IEP boards comprised at least two members of staff, one of whom was a senior officer. We observed three separate board reviews where warnings had been given to downgrade the prisoners from standard to basic. The senior officer's tone was even-handed and constructive. A prisoner who was having difficulty managing his behaviour in the light of his impending release was given advice on how to apply for a new job. The IEP policy provided for support to be given to offenders to help them attain or retain standard level.

7.26 In two of these three cases, an adjudication had triggered the review. Neither of these reviews had resulted in a downgrade, but we found a further record where the downgrade was automatically applied as a result of an adjudication without substantive review.

7.27 All IEP promotions or demotions were logged and forwarded to the head of residence. A percentage of the decisions were reviewed and a monthly report produced for the senior management team.

## Recommendation

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- 7.28 Prisoners should not receive an IEP downgrade following a disciplinary award without a separate review.



# Section 8: Services

## Catering

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### 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.

- 8.1 Most prisoners we spoke to said that the quality of the food was variable and the food that we sampled was of low to average quality. However, a range of diets were catered for and provision for religious festivals was appreciated. Some prisoners were refused entry to the dining hall if they arrived late for legitimate reasons. The kitchen was dirty during our night visit.
- 8.2 In our survey, only 13% of prisoners said that the food was good or very good, against the comparator of 43%. In our focus groups and individual discussions with prisoners, we were told that the food was 'hit and miss'. The lunchtime meal was particularly criticised for lacking variety, consisting mainly of a baguette on most days. Prisoners who worked outside the establishment said that when they got back to the prison their selected meal was not always available. Others said that they had been served food which had not appeared on the menu for the day. Inspectors sampled several meals and agreed with the prisoners' assessment that the food was variable in quality and some was poor.
- 8.3 A four-week menu cycle was in operation which included at least one hot meal each day. Many vegetables were grown on site and the kitchen manager liaised with farms and gardens staff on the produce that would be grown.
- 8.4 Prisoners were able to eat in association. The queues for meals were long and we observed prisoners being refused food at lunchtime because they had arrived at the dining hall a few minutes late and their claim that they had been delayed at work was dismissed. On these occasions, other prisoners shared their food with them. There were specific serving times for prisoners with disabilities, but some told us that food was not ready for them. Prisoners with special diets had a similar experience. Each prisoner had a daily supply of bread which could be used in wing toasters, although the toasters for A wing were often locked in the dining hall. Drinking water dispensers had been installed prior to the inspection. Prisoners who used their own plates and cutlery could rinse them in sinks, but the water was cold and there was no detergent.
- 8.5 The kitchen was clean and tidy on the afternoon that we visited it, but during the night visit we observed food on the floor, uncovered bins and unwashed utensils in the sinks. The floor was uneven and pools of water formed when it was washed. We were told of plans for a replacement kitchen to be built in 2011. We saw the dining hall and servery being cleaned inadequately with a vacuum cleaner.
- 8.6 Food was appropriately stored with halal and non-halal meat separated and clearly labelled. Separate equipment was used to prepare and serve halal food. Staff and prisoners working in the kitchen had been health screened. More than 40 prisoners worked in the kitchen, but working in the staff mess provided the only opportunity to obtain a national vocational qualification (NVQ). Kitchen staff were working towards accreditation as assessors to enable more prisoners to achieve NVQs.

- 8.7 Prisoners had been consulted through a dedicated food forum, but more recently discussion of food had passed to the offender consultative committee. Some prisoners we spoke to were unaware of the committee or how to contribute their views. A food comments book in the dining hall was well used.

## Recommendations

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- 8.8 The quality of food should be improved.
- 8.9 Men should not be denied meals until their reason for arriving late at the dining hall has been properly explored.
- 8.10 Prisoners working in the kitchen should have the opportunity to achieve accredited qualifications.

## Housekeeping points

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- 8.11 Prisoners should receive the food that they ordered on their pre-select form.
- 8.12 The kitchen should be properly cleaned after every meal.

## Prison shop

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### Expected outcomes:

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

- 8.13 The process for ordering and collecting canteen was sound, and few concerns were raised. Prices could be high but a range of less expensive items were available.
- 8.14 Prisoners were given their canteen sheets on Fridays and completed sheets had to be handed in to wing offices by Sunday evening. Orders were bagged up in the on-site DHL workshop and collected by prisoners on Tuesday and Wednesday. Orders for outworkers could be collected by another prisoner who had to sign for receipt of the goods. We did not receive any complaints about the process from prisoners.
- 8.15 In our survey, 49% of prisoners said that the canteen supplied a wide enough range of products to meet their needs, compared with 40% at the previous full inspection. Some prisoners in our groups thought that prices were high, but less expensive non-branded items were available. Amendments to the list were made four times a year. Consultation on canteen took place at the offender consultative committee. Diversity orderlies and the prisoner focus group were also consulted on revisions to the canteen list.
- 8.16 Prisoners or their families could place an order for newspapers and magazines with a local newsagent. Goods could be ordered from approved catalogues but we were told that this rarely happened.

# Section 9: Resettlement

## Strategic management of resettlement

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### Expected outcomes:

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

- 9.1 The management of resettlement had recently improved, but a longer-term failure to place resettlement at the heart of the prison's identity underpinned much prisoner frustration. Prisoner perceptions were negative and promotion of available services needed improvement. A much stronger focus was needed on preparation for life outside prison, including greater focus on the use of release on temporary licence (ROTL). The offender management unit (OMU) had suffered from the withdrawal of posts and the cross-deployment of uniformed staff. Prisoners complained vigorously about the implementation of home detention curfew (HDC) procedures. Interventions needed to be planned and prioritised using information from the needs analysis and OASys.
- 9.2 An up-to-date resettlement policy and a directory of reducing reoffending interventions had recently been published. The management team in the reducing reoffending department had taken a more energetic and coordinated approach recently, although outcomes and prisoner perceptions were still poor. A needs analysis had recently been carried out and it was intended to use this information and data from OASys to inform and develop interventions.
- 9.3 Many prisoners told us that they were not supported in preparing to resettle in the community and this was reflected in our survey. Prisoners responded less favourably to six questions on the broad resettlement role of Ford than at comparable establishments. Only 71% thought that they were given greater responsibility at Ford than in closed conditions against a comparator of 84%. We also found that a significant number of ACCT (assessment, care in custody and teamwork) forms had been opened because of resettlement concerns (see section on self-harm and suicide). Most prisoners were unaware of the help and support which was available on practical resettlement issues. In our survey, 69% of prisoners said that they had received information about ROTL and 49% that they had had access to ROTL against respective comparators of 79% and 64%.
- 9.4 This lack of awareness was compounded by the absence of conspicuous publicity displays in the establishment and the failure of staff to build relationships with prisoners. In our survey, only 14% of prisoners felt that any member of staff had helped them address their offending behaviour or had helped them prepare for release against respective comparators of 37% and 34%. The head of reducing reoffending now contributed to the induction course once a week which was a positive step.
- 9.5 Resettlement work did not focus sufficiently on preparing for life in the community and this was particularly evident in the education, training and employment pathway. The use of ROTL was well below the levels in comparable establishments.
- 9.6 The OMU was well organised but under constant pressure of deadlines. Some posts had been withdrawn to make efficiency savings and the uniformed staff who did much of the work on OASys assessments and risk assessments for ROTL were frequently redeployed to other

duties for up to 50% of their working hours. Managers hoped that layered offender management, which Ford had offered to pilot in 2011, would help to streamline procedures and provide custody planning for short-term prisoners.

- 9.7 Many prisoners complained to us about delays in the decision process for HDC. There had been recent improvements, resulting in fewer formal complaints and reduced attendance at the twice-weekly surgeries run by OMU. However, actual HDC dates were not sufficiently close to eligibility dates and efficiency was not maintained when key staff were absent. Communication with prisoners was not sufficiently good in terms of acknowledging applications and explaining any delays that were outside the establishment's control. The requirement for OMU to consider the constant flow of prisoners arriving with only a short time before their HDC or ROTL eligibility date prevented the timely management of the same procedures for longer-term prisoners.

## Recommendations

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- 9.8 Managers should ensure that information about resettlement services is readily available to prisoners and that personal officers and other staff encourage prisoners to seek out such services.
- 9.9 Managers should use the 2010 needs analysis and OASys to inform and prioritise the delivery of interventions to reduce re-offending.

## Offender management and planning

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### Expected outcomes:

All prisoners have a sentence or custody plan based upon 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 with drawing up and reviewing plans.

- 9.10 The OMU carried out an increasing number of OASys assessments but information was not always kept up to date and sentence planning objectives were not always specific. The overall quality of assessments was better than many seen in other establishments. There was limited assessment of diversity needs at the start of the sentence and this was reflected in the sentence planning process for interventions. Many prisoners did not appear to be in regular contact with offender supervisors. Offender managers in the community engaged well with sentence planning. Prisoners serving short sentences were at a disadvantage with little access to custody planning. Links between OMU and education and work staff were not strong enough.

## Sentence planning and offender management

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- 9.11 The OMU was a well-coordinated, multidisciplinary staff team, strengthened by a good number of probation officers but constrained by other staffing difficulties (see section on strategic management of resettlement). There was a persistent backlog of out-of-scope cases with no OASys assessment principally because many prisoners arrived with no OASys. The OMU was up to date with annual reviews of prisoners with an existing OASys. Progress was monitored and the number of OASys assessments and reviews completed each month had increased.

The timeliness of recording information in OASys needed improvement but most case files were well organised and clear.

- 9.12 OASys was not always used as an ongoing assessment tool if there had been a significant change in a prisoner's circumstances or behaviour or if there was disagreement over the initial classification of risk of harm. When prisoners were transferred into the establishment, OASys was not always reviewed and updated but all in-scope cases were reviewed within eight weeks of arrival, which was better than the target. In only three of the 19 cases examined was there evidence in the OMU file or in OASys of an assessment of potential diversity issues or other individual needs.
- 9.13 In over half the cases examined the prisoner had had contact with an offender supervisor within a week of arrival and the remainder were between a week and a month of arrival. In our survey, 63% of prisoners in scope for offender management said that they met their offender supervisor each month and 44% said that they had been supported by their offender supervisor while in custody, against respective comparators of 96% and 88%.
- 9.14 There was evidence in a number of cases of monthly contact between the offender supervisor and offender manager initiated by the offender supervisor, but less evidence that offender managers sought to engage offender supervisors in the process.
- 9.15 All the in-scope cases had a sentence plan, and there was evidence in half of them that the offender had engaged in the process. In only half of cases did the sentence plan contain outcome-focused objectives. Almost all sentence plans included objectives to address the likelihood of reoffending, but only 62% set out a logical sequencing of objectives and activities. In some cases, sentence plan objectives relevant to a previous prison were still included on the current sentence plan. Of the 19 sentence plans inspected, more than two-thirds were completed within the required timescale. In our survey, only 47% of prisoners said that they had a sentence plan, against the comparator for open prisons of 71%; while only 71% thought that they could achieve some or all of their sentence plan objectives, against a comparator of 84%.
- 9.16 Paper contact logs were kept in many cases. Some records of offender supervisors' meetings with prisoners were recorded on P-Nomis, but this information was not always shared with offender managers.
- 9.17 Although video conferencing facilities were available, telephone conferencing was more frequently used. Offender managers often contributed to sentence planning meetings and ROTL boards in person or by telephone link, and a representative of the Independent Monitoring Board often attended. Personal officers rarely attended.
- 9.18 Training in the implementation of layered offender management was planned for OMU staff in April 2011. There was a serious lack of custody planning for prisoners serving sentences of under 12 months who comprised 10% of the population. A number of these prisoners had arrived at Ford after as little as five days at a local prison after sentence. In effect, there had been no opportunity for planned work to reduce the risk of re-offending. Apart from referrals during induction, which were not monitored, prisoners might receive no help until their pre-discharge interview with the housing officer four weeks before release.
- 9.19 In 12 out of 19 cases, all interventions had been delivered in line with the sentence plan. There were no individual learning plans in OMU files, although the Careers Information and Advice Service had recently started to copy their action plans to the OMU. Some sentence plans

contained objectives appropriate to education, training and employment work, but there was limited evidence that such interventions had taken place.

## Recommendations

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- 9.20 Sentence plans should contain outcome-focused objectives that are measurable, with a timescale for their achievement.
- 9.21 Diversity factors should be recorded in OASys assessments so that a prisoner's diversity needs are considered when developing the sentence plan and determining interventions.
- 9.22 A protocol should be agreed and implemented for joint working between OMU and the education and work departments, so that sentence plans are aligned with individual learning plans.

## Housekeeping points

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- 9.23 The OASys assessment and sentence plan should be reviewed when a prisoner moves to open conditions and following any other significant change in circumstances.
- 9.24 Offender supervisors should record on P-Nomis the details and outcomes of sentence planning board meetings.

## Public protection

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- 9.25 There was an up-to-date public protection policy and a well-qualified team addressed public protection issues. The management of risk was satisfactory. The completion of assessment, particularly sentence plan reviews, was not always timely.
- 9.26 The public protection policy was comprehensive. The risk management committee met frequently with good representation from key departments. The strong team of probation staff covered the higher risk cases effectively. Prisoners posing a risk of harm to others were clearly identified in OASys, and in the sample of 19 cases examined, six were recorded as being high risk of serious harm (RoSH) to others, four were assessed as medium risk and eight low risk. One case had no recorded RoSH classification. Records in contact logs did not always demonstrate oversight by a manager of cases that were high RoSH or where there were child protection concerns.
- 9.27 A risk-of-harm screening had been completed for all in-scope cases and all but one out-of-scope case. The assessment for one out-of-scope screening was inaccurate. A full analysis of the risk of harm to others had been completed in 10 of the 11 cases where it was required.
- 9.28 Three analyses of risk of harm to others were of insufficient quality (two in scope and one out of scope). Some cases lacked sufficient analysis of the factors that had contributed to the initial assessment of risk of harm to others and failed to draw on all available sources of information. In some cases, the assessment of risk of harm to others had not been reviewed thoroughly and had remained constant. Two risk-of-harm assessments, one in scope and one out of scope, had not been reviewed within the required timescale.

- 9.29 In all but one case the risk-of-harm issues had been communicated to all relevant staff. A risk management plan had been completed in 90% of cases where it was required. In one out-of-scope case the plan did not use the required format. In three of the seven in-scope cases, and in one case that was out of scope, risk management plans were not comprehensive. Half the sentence plans in the sample did not accurately describe how the objectives in the sentence plan addressed risk-of-harm issues.
- 9.30 All cases examined contained an OASys likelihood of reoffending assessment and in 16 of the 19 cases this had been completed on time. This assessment was of sufficient quality in the great majority of cases. Multi-agency public protection agency (MAPPA) cases were handled appropriately and the MAPPA referral and notification were kept in a separate public protection unit file.

## Recommendations

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- 9.31 **Records in contact logs should demonstrate oversight by a manager of cases that are high risk of serious harm (RoSH), or where there are child protection concerns.**
- 9.32 **RoSH assessments and reviews should take account of all relevant information and should accurately reflect the dynamic nature of risk factors.**
- 9.33 **Sentence plan reviews should be completed on time.**

## Indeterminate-sentenced prisoners

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- 9.34 A settled, experienced team of staff managed the indeterminate-sentenced prisoners and had been allocated additional administrative support following a rapid increase in the number of IPP (indeterminate sentence for public protection) prisoners being transferred in during the previous year. At the time of the inspection, there were 48 life-sentence prisoners and 22 IPPs and the total was likely to rise to 80 by the end of the year. Managers were very concerned about the potential impact of further increases in the number of indeterminate-sentenced prisoners (ISPs). There was good participation by offender managers in sentence planning boards for ISPs. A number of ISPs had completed or were undertaking offending behaviour work, including interventions on domestic violence and alcohol-related violence.
- 9.35 The ISP team were located some distance from the OMU, which caused administrative complications. They continued to have an open door for their clients, which was valued. A lifer day had been planned recently but postponed because of limited interest.

## Recommendation

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- 9.36 **Managers should draw up a strategy for effective management of indeterminate sentenced prisoners.**

## Housekeeping point

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- 9.37 Lifer or ISP days should be arranged with sufficient preparation and promotion, and with the participation of prisoner representatives to achieve positive outcomes.

# Resettlement pathways

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## Expected outcomes:

Prisoners' resettlement needs are met under the seven pathways outlined in the Reducing Reoffending National Action Plan. An effective multi-agency response is used to meet the specific needs of each individual offender in order to maximise the likelihood of successful reintegration into the community.

## Reintegration planning

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- 9.38 An experienced housing adviser and a qualified debt counsellor provided a good service, but many prisoners were not aware of either. Peer advisers were used but needed training. There were few outside work places and work to prepare prisoners through education and other means for employment after release was uncoordinated and ineffective. Job-search facilities were needed and more prisoners needed a pre-release course and an exit guidance interview. Discharge planning in respect of physical health needs was in place and in development in relation to mental health.
- 9.39 In the offender management files that we examined, full attention had been given to promoting community reintegration in only four of the eight relevant cases.

## Accommodation

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- 9.40 A full-time, experienced worker, who had been trained by Shelter, supported prisoners with housing concerns. During the previous year, over 95% had consistently been released to settled accommodation. However, in our groups prisoners said that they did not know how to get help with accommodation and in our survey, only 37% said they knew whom to contact for help with finding accommodation on release. This compared with 51% at other open prisons and 66% at the previous full inspection. Twenty-eight per cent thought they would have a problem finding accommodation on release against the comparator of 23%.
- 9.41 The accommodation worker had good links with local housing providers and agencies, including Bognor Housing Trust and Littlehampton Link. Many prisoners were released to the London area and the St Giles Trust had extended its 'meet at the gate' service to such prisoners released from Ford.
- 9.42 Two prisoners worked as peer advisers on housing. They addressed induction sessions twice a week and dealt with the more straightforward housing issues, including rent and mortgage issues. They had not received any formal training and one had only been in the post for two weeks.

## Recommendation

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- 9.43 Managers should promote the availability of housing advice and support and monitor outcomes to improve perceptions and take-up.

## Housekeeping point

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- 9.44 The peer housing advisers should receive formal training.

## Education, training and employment

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*For further details, see Learning and skills and work activities in Section 6*

- 9.45 There were too few opportunities for work and training on ROTL. At the time of the inspection, only 35 of the 71 places in work, education or community service were full time. The range of placements for community service did not provide enough prisoners with an opportunity to develop the skills they had learnt in prison in real work environments.
- 9.46 The establishment did not provide a well-coordinated service to help prisoners identify the most appropriate resettlement pathway in employment, training or education. The prisoners received insufficient information and advice after induction to help identify realistic post-release goals so that they could make the most appropriate applications while in custody to support agreed plans for resettlement. The work of the careers information and advice service, the OMU, the labour board and education overlapped too much. Many prisoners had to answer similar questions in different settings about their previous work and training and their ideas for resettlement. Much of the advice they received focused on their prison activities and did not build on an agreed and realistic plan for the future.
- 9.47 The establishment still did not have adequate job-search facilities. Although the library had a good range of newspapers, they often did not cover areas that prisoners would be released to. The prisoners did not have access to up-to-date job vacancies or facilities to help them apply for jobs electronically in other parts of the country.
- 9.48 The pre-release course, run by the education department, was not available to enough prisoners. It provided satisfactory information on disclosing an offence to employers, but it did not deliver sufficient training and information on planning for resettlement. At the time of the inspection, less than half of prisoners received an exit guidance interview.

## Recommendations

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- 9.49 **Sufficient job-search activities should be provided, with good access to all prisoners, including those attending external placements.**
- 9.50 **There should be a coordinated approach to advising prisoners on resettlement and ensuring that their participation in activities is prioritised effectively to help them develop the skills they need to achieve these plans.**
- 9.51 **All prisoners should have the opportunity to attend a pre-release programme and an exit guidance interview.**

## Mental and physical health

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- 9.52 Discharge planning was available for prisoners who had complex or specific needs such as ongoing health issues, treatment or medication requirements. Discharge planning for prisoners with mental health conditions was limited. Not all prisoners received discharge letters or health promotion material on release, but there were plans to provide discharge planning for all

prisoners. Palliative care services had been successfully used to support the early release of a prisoner.

## **Finance, benefit and debt**

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- 9.53 A legally qualified Citizens' Advice debt counsellor visited twice a week, offering six appointments. He was contracted to offer two 45-minute sessions to each client, with an extra session for a family member if required. The most common themes were court fines and credit card debts. In addition, a Citizens' Advice general adviser held sessions fortnightly. The Jobcentre Plus workers gave advice and support on benefits, especially in relation to closing accounts on conviction, and applying for benefits in preparation for release.
- 9.54 There was no longer a waiting list for the debt counsellor. Nevertheless, our survey showed poor outcomes in this pathway. Fewer prisoners than at comparator prisons knew whom to contact for help with money and finance, claiming benefits or opening a bank account on release.
- 9.55 In our survey of some prisoners in scope for offender management, 60% said that they expected to have problems opening a bank account on release against the comparator of 19%. No money management course was offered.

## **Recommendations**

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- 9.56 **Managers should promote the availability of advice on finance, benefits and debt, and monitor and respond to outcomes to improve perceptions and take-up.**
- 9.57 **In consultation with the education provider, managers should provide a money management course.**

## **Drugs and alcohol**

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- 9.58 Drug and alcohol strategies were up to date, although the drug strategy team had been ineffective for the previous six months. The CARAT team (counselling, assessment, referral, advice and throughcare) was highly regarded by prisoners but struggled with excessive workloads. Alcohol services for primary alcohol users were limited to awareness sessions and Alcoholics Anonymous (AA). There was no drug-related offending behaviour programme, which was an omission, particularly for short-term prisoners.
- 9.59 There were separate drug and alcohol strategies, informed by an up-to-date CARAT service needs analysis and a separate integrated drug treatment system (IDTS) clinical needs analysis, which had been prepared by an external consultant.
- 9.60 During the period April to October 2010, no drug strategy meetings had taken place and the mandatory drug testing (MDT) random positive rate had risen significantly. We were pleased to see that the drug strategy team had been reconvened following the appointment of a new drug strategy manager, who was also responsible for project management of the IDTS.
- 9.61 The CARAT service was highly regarded by all prisoners we spoke to as approachable and effective. The service was widely promoted throughout the establishment and, in our survey,

100% of prisoners said they knew who to contact for help with drug or alcohol problems against the comparator of 91%.

- 9.62 The CARAT team comprised a manager, two workers and administrative support for 10 hours a week. They managed a caseload of 90 active cases, 30 suspended and 260 triaged cases. This staffing level was inadequate. The team was largely reacting to frequent requests for reports from risk assessment boards for prisoners, many of whom were not CARAT clients, and to deal with priority cases from a backlog of around 50 referrals. Consequently, only two group-work sessions were completed each month and there was little time for one-to-one sessions with prisoners. Targets for drug intervention records and comprehensive substance misuse assessments were not being achieved.
- 9.63 Until April 2010, the team had included a CARAT officer and we were told that there were plans to reinstate the post in early 2011 to improve the staff shortage problems. There were no immediate plans to increase the level of administrative support.
- 9.64 Alcohol services included an alcohol module delivered by the CARAT service and an Open College Network accredited drugs and alcohol awareness course run by the education department. The CARAT service was not funded to work with primary alcohol users. AA meetings were held, as were Cocaine Anonymous and Gamblers Anonymous. Narcotics Anonymous (NA) facilitators no longer attended the establishment, although prisoners held their own NA meetings.
- 9.65 There was a compact-based drug testing programme with a key performance target of 300 compacts, which was being achieved. The programme was under threat of closure in 2011.
- 9.66 The short duration programme drugs course had ceased operation at the end of 2009, and there were no other drug-related programmes. This put short-term prisoners at a disadvantage. They made up approximately 10% of the population and would not necessarily have the opportunity to engage in drug-related offending behaviour programmes elsewhere.
- 9.67 Links with local drug intervention programmes (DIP) and those further afield were appropriate. Most DIP teams referred non-class A drug users to other suitable support agencies on release.

## Recommendations

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- 9.68 The CARAT service should be provided with adequate administrative support.
- 9.69 A suitable accredited drug and alcohol treatment programme should be introduced, particularly to meet the assessed needs of the short-term population.

## Children and families of offenders

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- 9.70 Many prisoners at Ford were outside their home area. Prisoners made few complaints about the arrangements for family contact via visits, telephone or mail which ran effectively.
- 9.71 We did not receive many complaints about family contact during the inspection, except from the significant number of prisoners from the London area who were unhappy at being so far from home. Prisoners felt their wages were so low that they had to make difficult choices between having phone credit or saving to afford a town visit.

- 9.72 More than half the prisoners with a fixed address lived over 50 miles from the establishment and, in our survey, only 39% had received a visit in their first week at the prison against the comparator of 52%. Only 29% said that Ford was near their home area or intended release address against a comparator of 48%. In only seven of the 11 offender management cases that we examined was the prisoner adequately supported in retaining or developing community ties and relationships.

## **Visits**

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- 9.73 The visits room was large with plenty of natural light. It was open four afternoons each week, including weekends. Social visits were booked by prisoners rather than their visitors. Visitors could take new property for prisoners into the establishment once every three months where it was booked in at a reception desk in the visits room. There was a small garden with benches which could be used by prisoners and their visitors in the summer.
- 9.74 There were two private rooms in the visits area for legal visits. Legal visits took place each weekday morning and had to be booked by the visitor.
- 9.75 The social visits session we observed started on time and visitors were booked in and searched quickly. Staff dealt patiently with first-time visitors as they checked what they could take into the visits room with them. There were lockers for visitors to store their possessions while in the visits area. Supervision in the visits room was low key. Prisoners could wear their own clothing to visits if they wished. The atmosphere was relaxed with people sitting where they chose or walking around the room to get drinks and snacks from the vending machines. There was a pleasant children's play area which prisoners mentioned favourably in our focus groups, but this was only open for weekend visits when the part-time child supervisor employed by the establishment was on site. The adjacent mother and baby room was appropriately equipped and clean, as were the visitors' toilets.
- 9.76 The visits area hosted family days which took place throughout the year, usually during school holidays. Some family days were themed, for example one which took place during Gypsy and Traveller week. There was no family support worker at the prison and, in our survey, only 31% of prisoners said they had been helped to maintain contact with family and friends against a comparator of 54%.

## **Telephones**

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- 9.77 Each billet had a telephone. In A wing, telephones were housed in cubicles, ensuring privacy. In B wing, billet telephones were installed in the vestibule, close to the entrance, with privacy hoods. On arrival, prisoners submitted 20 telephone numbers that they wanted to call, but the telephone clerks said that in practice there was unrestricted access to telephone numbers unless there were security or other reasons for an individual prisoner to have restricted numbers.

## **Mail**

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- 9.78 Incoming and outgoing mail was well organised. Prisoners received four free letters on arrival and one free letter each week thereafter. Unused visiting orders could be exchanged for additional letters and two ordinary letters for an airmail letter. Emails received from emailprisoner.com were printed out and given to prisoners with their other mail. Small items sent into the establishment such as gloves, a hat, underwear or socks could be collected from

the mail room, but all other items went to reception to be checked, tested if appropriate and issued as in-possession property.

## Recommendation

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- 9.79 Prisoners should be supported to maintain contact and strengthen relationships with family and friends.

## Attitudes, thinking and behaviour

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- 9.80 There was an effective partnership between the establishment and Surrey and Sussex Probation Trust to facilitate access to programmes. Prisoners could undertake two accredited programmes, either in prison or the community, but there was insufficient analysis of needs or take-up for programmes. There was limited work on victim awareness and prisoners serving most of their sentence at Ford received little help with the attitudes, thinking and behaviour underlying their offences.
- 9.81 Two cognitive skills booster programmes had been run in the prison and one in the community during the previous four months and a further course was about to begin in Littlehampton. Prisoners had taken part recently in the integrated domestic abuse programme in the community, the thinking skills course and the programme on control of violence for angry impulsive drinkers. The probation team did some one-to-one work with prisoners when time permitted. Records were kept, but there was no analysis of throughput or success criteria, nor had the needs analysis been used to plan and prioritise the programmes offered.
- 9.82 Examination of a sample of OMU files showed that the quality of the work undertaken with prisoners on their attitudes, thinking and behaviour was generally good. In six of the 19 cases reviewed in detail, the offender was due to undertake an accredited programme and this had been delivered in five cases. In some cases, the prisoner needed more active engagement in constructive interventions to address offending behaviour. There was evidence that some offenders had not undertaken work on victim awareness while in custody in a previous establishment or at Ford. Victim awareness work had been undertaken in five of the nine relevant in-scope cases, but in only two of the 10 out-of-scope cases.
- 9.83 Some prisoners arrived at Ford as soon as five days after sentencing and had no access to planned programmes to reduce the risk of re-offending, which some of them complained about.

## Recommendations

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- 9.84 Managers should plan and prioritise the delivery of programmes based on analysis of the profile of criminogenic need in the population, and monitor the impact of programmes delivered.
- 9.85 The level of need for work on victim awareness should be analysed and provision made in accordance with the findings.
- 9.86 Interventions aimed at reducing the risk of reoffending, supported by a custody planning process, should be provided for prisoners who spend most of their sentence at Ford.

# Section 10: Recommendations and housekeeping points

The following is a listing of 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.

## Main recommendations

To the governor

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- 10.1 Managers should work with staff and prisoners to develop a strategy for positive staff-prisoner relationships which encourage prisoners' preparation for release and underpin strong dynamic security. (HP42)
  - 10.2 Procedures for combating illicit drug and alcohol use should be consistently applied. The application and results of drug and breath testing should be closely monitored. Results should be used with security intelligence reports to ensure security measures are effective and intelligence led. Appropriate staff should be trained so that technical resources such as the BOSS chair can be used when necessary. (HP43)
  - 10.3 Practical resettlement work should be central to the prison's vision and activity with an appropriate focus on levels of ROTL for work and job seeking. This should be supported by sustained improvement in the quality and speed of communication between OMU staff and prisoners. (HP44)
  - 10.4 Outstanding equality impact assessments should be carried out and acted upon. There should be a linked investigation into the disparities in access to ROTL, paid work and community service for black and minority ethnic prisoners. (HP45)
  - 10.5 All prisoners, including those serving short sentences, should have a formal plan specifying how their resettlement needs will be met during and after custody, and this should be updated in a timely manner. (HP46)

## Recommendations

To the governor

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### Courts, escorts and transfers

- 10.6 Prisoners being transferred to Ford should be provided with information in advance and have the opportunity to notify family and legal representatives of their destination. (1.4)

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### First days in custody: reception

- 10.7 Reception interviews should be held in private. (1.10)
- 10.8 Strip-searching of arriving prisoners should be intelligence led. (1.11)
- 10.9 Staff should be able to use the BOSS chair when appropriate. (1.12)

### **First days in custody: induction**

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- 10.10 Managers should investigate how arriving prisoners can be helped to adjust better to life at Ford. To this end, greater use should be made of the induction feedback forms to analyse patterns and trends. (1.20)

### **Residential units: accommodation and facilities**

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- 10.11 The cells in B wing should only be used for single occupancy. (2.9)
- 10.12 All prisoners in shared cells should have access to a lockable locker. (2.10)
- 10.13 There should be more opportunity to self-cater to help prepare for independent living. (2.11)

### **Residential units: clothing and possessions**

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- 10.14 The prison laundry should ensure that all items are properly washed and managers should monitor this. (2.14)
- 10.15 Arrangements should be made to ensure that prisoners can retrieve their property from storage within one week of making an application. The system should be monitored. (2.15)

### **Personal officers**

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- 10.16 The personal officer scheme should support prisoners throughout their sentence and encourage them to achieve resettlement and rehabilitation objectives. (2.27)

### **Bullying and violence reduction**

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- 10.17 Support for victims of bullying should be planned and coordinated to ensure that they have access to appropriate care. (3.10)
- 10.18 There should be planned interventions for the perpetrators of bullying. (3.11)
- 10.19 The establishment should carry out an anti-bullying survey annually to inform the review and update of the violence reduction strategy. The survey should include questions on the treatment of prisoners by staff. (3.12)
- 10.20 There should be a regular, planned and coordinated exchange of information between the social inclusion unit and the security department. (3.13)
- 10.21 All staff in contact with prisoners should receive anti-bullying and violence reduction training. (3.14)

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

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- 10.22 All staff, including those working at night, should carry ligature knives. (3.22)

## **Applications and complaints**

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- 10.23 Applications should be answered promptly and outcomes tracked. (3.31)
- 10.24 Managers should ensure that prisoners are aware of evidence showing that submitting a complaint has no bearing on their transfer. (3.32)
- 10.25 Prisoners' complaints should not be investigated by the person who is the subject of the complaint. (3.33)
- 10.26 All replies to complaints should be polite and detailed, and quality checks should be conducted by a senior member of staff. (3.34)

## **Legal rights**

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- 10.27 The legal services officer should receive training to update his knowledge. (3.42)

## **Substance use: drug testing**

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- 10.28 The MDT programme should be adequately resourced to undertake suspicion testing within identified timescales and without gaps in provision. (3.55)
- 10.29 Suspicion testing procedures should be monitored more effectively and the total number of alcohol tests should be recorded. (3.56)

## **Diversity**

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- 10.30 Effective and credible arrangements should be established to consult with minority groups. (4.9)

## **Diversity: race equality**

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- 10.31 Investigations into diversity incidents should be conducted by staff of appropriate seniority. (4.25)
- 10.32 Replies to diversity incident reports should be detailed, state whether the complaint has been upheld and the reasons for the decision. (4.26)
- 10.33 Conciliation strategies should be used where appropriate to resolve conflicts between perpetrators and victims of racist incidents. (4.27)

## **Diversity: foreign nationals**

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- 10.34 The foreign national prisoner policy should focus on prisoner needs and be accompanied by a time-bound action plan. (4.45)
- 10.35 Delayed replies from UKBA should be followed up promptly by the offender management unit. (4.46)

- 10.36 Foreign nationals should not be held beyond sentence without an up-to-date authority to detain (IS91). (4.47)
- 10.37 Efforts should be made to make and sustain contact with immigration advice and support agencies. (4.48)
- 10.38 Foreign national prisoner support and information groups should be held regularly to help raise awareness of provision and feed back areas of concern to senior managers. (4.49)

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#### **Diversity: disability and older prisoners**

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- 10.39 There should be a central register of prisoners with disabilities including information on how their individual needs should be met. All prisoners with disabilities should have a care plan. (4.56)
- 10.40 There should be a clear policy on how the unit with adapted cells should be used. (4.57)
- 10.41 The effectiveness of provision for prisoners with disabilities should be monitored at social inclusion meetings. (4.58)

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#### **Diversity: older prisoners**

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- 10.42 There should be a formal consultation process with older prisoners to inform the development of specific services to meet their needs. (4.63)

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#### **Health services: general**

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- 10.43 The prison partnership board should develop a prison health delivery plan to improve and monitor health services for prisoners. (5.5)
- 10.44 All equipment and surfaces should conform to infection control requirements and cupboards should have secure locks. (5.6)
- 10.45 There should be a health care room in reception that provides full facilities for initial screening of prisoners, including access to SystemOne. (5.7)

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#### **Health services: clinical governance**

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- 10.46 Emergency equipment should be easily accessible throughout the establishment and there should be sufficient staff trained to use it. (5.16)

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#### **Health services: primary care**

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- 10.47 There should be a full range of nurse-led clinics including hypertension and coronary heart disease. (5.28)
- 10.48 Formal documented triage algorithms, including those for emergency treatment, should be used to ensure consistency and continuity of care and advice given to patients. (5.29)

- 10.49 All prisoners should have the opportunity for a thorough reception screen and, where necessary, secondary health care screening within 72 hours. Information should be recorded using the standardised electronic screening tool, and assessment forms relevant to the prisoner's health needs should be completed. (5.30)

### **Health services: pharmacy**

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- 10.50 The pharmacist should be supported to develop pharmacy-led clinics and medicine use reviews. (5.39)
- 10.51 A range of patient group directions should be produced to facilitate the supply of more potent medicines by nursing staff when appropriate. (5.40)
- 10.52 There should be a regular audit of all medicines management systems and the pharmacist should regularly review prescribed and special sick medication and items issued from stock. (5.41)
- 10.53 Issues relating to drug compliance should be investigated, records maintained and, where necessary, adjustments made to the quantity of medication issued to reduce waste. (5.42)
- 10.54 There should be robust written policies for risk assessment and for the provision of in-possession and special sick medication. (5.43)
- 10.55 The medicines and therapeutics committee should ensure that prescribing is evidence based and a single prescribing formulary should be made available. (5.44)

### **Health services: dentistry**

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- 10.56 Further investigation of prisoners who do not attend should be carried out to promote more efficient use of the sessions. (5.50)
- 10.57 There should be a formal written triage system with clear treatment pathways and out-of-hours protocol for non-dental staff. (5.51)
- 10.58 Full cover for annual leave should be organised to accommodate the large number of patients. (5.52)
- 10.59 Record keeping and archiving of records should be reviewed with reference to current Good Practice Guidelines published by the Faculty of General Dental Practice (UK). (5.53)
- 10.60 Provision of radiographs should be reviewed with reference to Selection Criteria for Dental Radiography Faculty of General Dental Practice (UK) Good Practice Guidelines. Radiographs should be provided in accordance with IR(ME)R 2000. (5.54)

### **Health services: secondary care**

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- 10.61 There should be clear referral pathways to ensure timely access to secondary care. (5.57)

### **Health services: mental health**

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- 10.62 A full range of mental health services should be available and provided in a timely manner. (5.61)
- 10.63 A programme of mental health awareness training should be provided for all prison staff. (5.62)

### **Learning and skills and work activities: leadership and management**

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- 10.64 There should be clear and consistent strategic leadership and management of learning and skills which focuses on preparing prisoners for resettlement. (6.8)
- 10.65 Literacy and numeracy teaching provision should be included in vocational training and work. (6.9)
- 10.66 Members of staff from partner organisations providing work, training and education should receive training in equality, diversity and safeguarding. (6.10)
- 10.67 Diversity monitoring data should be used to identify any gaps in access or achievement and any disparities investigated. (6.11)
- 10.68 The quality of teaching, training and learning in education and vocational training should be monitored to improve standards and share good practice. (6.12)

### **Learning and skills and work activities: induction**

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- 10.69 Induction should focus on identifying prisoners' plans for resettlement so that they can select the most appropriate learning, skills and work activities to build on their prior learning and work experience, and help them prepare for their release. (6.15)

### **Learning and skills and work activities: vocational training**

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- 10.70 The use of individual learning plans should be improved across learning and skills and enterprises to recognise and record prisoners' progress and achievement. (6.22)

### **Learning and skills and work activities: library**

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- 10.71 Access to the library for wheelchair users should be improved. (6.31)
- 10.72 Computing facilities in the library should be improved to meet a reasonable level of need. (6.32)
- 10.73 Managers should enhance the use of the library to support prisoners' development in wider activities, such as creative writing, job search and parenting skills. (6.33)

### **Physical education and health promotion**

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- 10.74 Accredited training should be provided to support employment in health and physical training instruction. (6.38)

## **Security and rules**

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- 10.75 A limited number of intelligence objectives should be set each month to reflect key current priorities. (7.8)

## **Discipline**

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- 10.76 Managers should review the volume and nature of adjudications to ensure that they are used to best effect within a wider behaviour management strategy. (7.18)
- 10.77 Professional interpretation should be offered to those placed on report for charges likely to result in a substantive punishment. (7.19)
- 10.78 The record of an incident of use of force should always be checked and countersigned by a manager who was not present. (7.20)
- 10.79 Prisoners in segregation should be offered an opportunity to exercise in the open air each day. (7.21)
- 10.80 All segregation paperwork should be completed thoroughly and clearly. (7.22)

## **Incentives and earned privileges**

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- 10.81 Prisoners should not receive an IEP downgrade following a disciplinary award without a separate review. (7.28)

## **Catering**

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- 10.82 The quality of food should be improved. (8.8)
- 10.83 Men should not be denied meals until their reason for arriving late at the dining hall has been properly explored. (8.9)
- 10.84 Prisoners working in the kitchen should have the opportunity to achieve accredited qualifications. (8.10)

## **Strategic management of resettlement**

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- 10.85 Managers should ensure that information about resettlement services is readily available to prisoners and that personal officers and other staff encourage prisoners to seek out such services. (9.8)
- 10.86 Managers should use the 2010 needs analysis and OASys to inform and prioritise the delivery of interventions to reduce re-offending. (9.9)

## **Offender management and planning**

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- 10.87 Sentence plans should contain outcome-focused objectives that are measurable, with a timescale for their achievement. (9.20)

- 10.88 Diversity factors should be recorded in OASys assessments so that a prisoner's diversity needs are considered when developing the sentence plan and determining interventions. (9.21)
- 10.89 A protocol should be agreed and implemented for joint working between OMU and the education and work departments, so that sentence plans are aligned with individual learning plans. (9.22)

### **Offender management and planning: public protection**

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- 10.90 Records in contact logs should demonstrate oversight by a manager of cases that are high risk of serious harm (RoSH), or where there are child protection concerns. (9.31)
- 10.91 RoSH assessments and reviews should take account of all relevant information and should accurately reflect the dynamic nature of risk factors. (9.32)
- 10.92 Sentence plan reviews should be completed on time. (9.33)

### **Offender management and planning: indeterminate-sentenced prisoners**

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- 10.93 Managers should draw up a strategy for effective management of indeterminate sentenced prisoners. (9.36)

### **Resettlement pathways: accommodation**

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- 10.94 Managers should promote the availability of housing advice and support and monitor outcomes to improve perceptions and take-up. (9.43)

### **Resettlement pathways: education, training and employment**

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- 10.95 Sufficient job-search activities should be provided, with good access to all prisoners, including those attending external placements. (9.49)
- 10.96 There should be a coordinated approach to advising prisoners on resettlement and ensuring that their participation in activities is prioritised effectively to help them develop the skills they need to achieve these plans. (9.50)
- 10.97 All prisoners should have the opportunity to attend a pre-release programme and an exit guidance interview. (9.51)

### **Resettlement pathways: finance, benefit and debt**

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- 10.98 Managers should promote the availability of advice on finance, benefits and debt, and monitor and respond to outcomes to improve perceptions and take-up. (9.56)
- 10.99 In consultation with the education provider, managers should provide a money management course. (9.57)

### **Resettlement pathways: drugs and alcohol**

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- 10.100 The CARAT service should be provided with adequate administrative support. (9.68)
- 10.101 A suitable accredited drug and alcohol treatment programme should be introduced, particularly to meet the assessed needs of the short-term population. (9.69)

### **Resettlement pathways: children and families of offenders**

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- 10.102 Prisoners should be supported to maintain contact and strengthen relationships with family and friends. (9.79)

### **Resettlement pathways: attitudes, thinking and behaviour**

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- 10.103 Managers should plan and prioritise the delivery of programmes based on analysis of the profile of criminogenic need in the population, and monitor the impact of programmes delivered. (9.84)
- 10.104 The level of need for work on victim awareness should be analysed and provision made in accordance with the findings. (9.85)
- 10.105 Interventions aimed at reducing the risk of reoffending, supported by a custody planning process, should be provided for prisoners who spend most of their sentence at Ford. (9.86)

## **Housekeeping points**

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### **First days in custody: first night**

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- 10.106 The arrangements for smoking in the induction billets should be clarified and enforced. (1.15)

### **Residential units: hygiene**

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- 10.107 Prisoners should have access to sufficient and adequate cleaning materials. (2.18)

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

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- 10.108 Night observations of those subject to ACCT documents should be at unpredictable times. (3.23)

### **Applications and complaints**

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- 10.109 The complaints box on B wing should be clearly labelled. (3.35)
- 10.110 The application form should be rewritten in plain English. (3.36)

## **Legal rights**

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- 10.111 Prisoners should be made aware of the role of the LSO and how he can be contacted. (3.43)
- 10.112 Prisoners should have access to information about how they can complain about a solicitor. (3.44)

## **Substance use: drug testing**

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- 10.113 The MDT suite should be cleaned to provide decent and forensic waiting and testing environments. (3.57)

## **Diversity**

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- 10.114 The opening hours of the diversity drop-in centre should be revised to enable prisoners working outside to use the facility. (4.10)
- 10.115 Diversity representatives should be appointed following an open recruitment campaign. (4.11)
- 10.116 Diversity should be positively promoted through the décor of the prison. (4.12)

## **Diversity: race equality**

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- 10.117 A separate entry should be made in the diversity incident log for each DIRF received. (4.28)
- 10.118 Investigators' names should be recorded on the DIRF investigation records. (4.29)

## **Health services: general**

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- 10.119 Information about health services should be available in a range of languages. (5.8)

## **Health services: clinical governance**

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- 10.120 PALS information should be advertised around the establishment. (5.17)

## **Health services: primary care**

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- 10.121 SystemOne should be used to its full capacity to enable effective case management review and appointment planning. (5.31)
- 10.122 Health promotion literature should be available in a range of languages. (5.32)
- 10.123 Condoms should be available for prisoners confidentially. (5.33)

## **Health services: dentistry**

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- 10.124 Hand washing should take place between patients to comply with current good practice for infection control. (5.55)

## **Catering**

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10.125 Prisoners should receive the food that they ordered on their pre-select form. (8.11)

10.126 The kitchen should be properly cleaned after every meal. (8.12)

## **Offender management and planning**

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10.127 The OASys assessment and sentence plan should be reviewed when a prisoner moves to open conditions and following any other significant change in circumstances. (9.23)

10.128 Offender supervisors should record on P-Nomis the details and outcomes of sentence planning board meetings. (9.24)

## **Offender management and planning: indeterminate-sentenced prisoners**

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10.129 Lifer or ISP days should be arranged with sufficient preparation and promotion, and with the participation of prisoner representatives to achieve positive outcomes. (9.37)

## **Resettlement pathways: accommodation**

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10.130 The peer housing advisers should receive formal training. (9.44)

## Appendix I: Inspection team

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Hindpal Singh Bhui	Team leader
Colin Carroll	Inspector
Angela Johnson	Inspector
Martin Kettle	Inspector
Ian Thomson	Inspector
Beverley Alden	Inspector
Peter Dunn	Inspector
Louise Falshaw	Senior researcher
Joe Simmonds	Researcher
<b>Specialist inspectors</b>	
Paul Roberts	Substance use inspector
Helen Carter	Health services inspector
Eilean Robson	Pharmacist
Christine Windle	Dentist
Karen Adriaanse	Ofsted inspector
Martin Hughes	Ofsted inspector
Allan Shaw	Ofsted inspector
Eileen O'Sullivan	Prison offender management inspector
Mark Boother	Prison offender management inspector

## Appendix II: Prison population profile

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

Status	21 and Over	%
Sentenced	541	99.1
Recall	0	0.0
Convicted unsentenced	4	0.7
Remand	1	0.2
Civil prisoners	1	0.2
Detainees	0	0.0
<b>Total</b>	<b>547</b>	<b>100</b>

Sentence	21 and over	%
Unsentenced	1	0.2
Less than 6 months	15	2.7
6 months to less than 12 months	39	7.1
12 months to less than 2 years	67	12.2
2 years to less than 4 years	135	24.7
4 years to less than 10 years	196	35.8
10 years and over (not life)	27	4.9
ISPP	20	3.7
Life	47	8.6
<b>Total</b>	<b>547</b>	<b>100</b>

Age	Number of offenders	%
Please state minimum age: 21		
Under 21 years	0	0.0
21 years to 29 years	180	32.9
30 years to 39 years	142	26.0
40 years to 49 years	121	22.1
50 years to 59 years	66	12.1
60 years to 69 years	34	6.2
70 plus years	4	0.7
Please state maximum age: 71		
<b>Total</b>	<b>547</b>	<b>100</b>

Nationality	21 and over	%
British	485	90.8
Foreign nationals	49	9.2
<b>Total (13 not stated)</b>	<b>534</b>	<b>100</b>

Security category	21 and over	%
Uncategorised unsentenced		
Uncategorised sentenced		
Cat A		
Cat B		
Cat C		
Cat D	547	100

Other		
<b>Total</b>	<b>547</b>	<b>100</b>

<b>Ethnicity</b>	<b>21 and over</b>	<b>%</b>
White		
British	325	59.4
Irish	4	0.7
Other white	32	65.9
Mixed		
White and black Caribbean	5	0.9
White and black African	2	0.4
White and Asian	0	0.0
Other mixed	4	0.7
Asian or Asian British		
Indian	20	3.7
Pakistani	14	2.6
Bangladeshi	3	0.5
Other Asian	20	3.7
Black or black British		
Caribbean	55	10.1
African	42	7.7
Other black	16	2.9
Chinese or other ethnic group		
Chinese	0	0.0
Other ethnic group	4	0.7
Not stated	1	0.2
<b>Total</b>	<b>547</b>	<b>100</b>

<b>Religion</b>	<b>21 and over</b>	<b>%</b>
Baptist	5	0.9
Church of England	144	26.3
Roman Catholic	75	13.7
Other Christian denominations	47	8.6
Muslim	80	14.6
Sikh	5	0.9
Hindu	13	2.4
Buddhist	11	2.0
Jewish	0	0.0
Other	5	0.9
No religion	162	29.6
<b>Total</b>	<b>547</b>	<b>100</b>

**Sentenced offenders only**

Length of stay	21 and over	
	Number	%
Less than 1 month	112	20.5
1 month to 3 months	161	29.5
3 months to 6 months	124	22.7
6 months to 1 year	131	24.0
1 year to 2 years	18	3.3
2 years to 4 years	0	0.0
4 years or more	0	0.0
<b>Total</b>	<b>546</b>	<b>100</b>

**Unsentenced offenders only**

Length of stay	21 and over	
	Number	%
Less than 1 month		
1 month to 3 months		
3 months to 6 months	1	100
6 months to 1 year		
1 year to 2 years		
2 years to 4 years		
4 years or more		
<b>Total</b>	<b>1</b>	<b>100</b>

Main offence	21 and over	%
Violence against the person	92	16.7
Sexual offences	0	0.0
Burglary	46	8.4
Robbery	42	7.6
Theft and handling	35	6.4
Fraud and forgery	22	4.0
Drugs offences	69	12.5
Other offences	46	8.9
Civil offences	0	0.0
Offence not recorded/holding warrant	195	35.6
<b>Total</b>	<b>547</b>	<b>100</b>

# Appendix III: Summary of prisoner questionnaires and interviews

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## Prisoner survey methodology

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

### Choosing the sample size

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The baseline for the sample size was calculated using a robust statistical formula provided by a government department statistician. Essentially, the formula indicates the sample size that is required and the extent to which the findings from a sample of that size reflect the experiences of the whole population.

At the time of the survey on 1 November 2010 the prisoner population at HMP Ford was 552. The sample size was 218. Overall, this represented 39% of the prisoner population.

### Selecting the sample

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Respondents were randomly selected from a P-NOMIS prisoner population printout using a stratified systematic sampling method. This basically means every second person is selected from a P-NOMIS list, which is printed in location order, if 50% of the population is to be sampled.

Completion of the questionnaire was voluntary. Refusals were noted and no attempts were made to replace them. Three respondents refused to complete a questionnaire.

## Methodology

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Every attempt was made to distribute the questionnaires to each respondent on an individual basis. This gave researchers an opportunity to explain the independence of the Inspectorate and the purpose of the questionnaire, as well as to answer questions.

All completed questionnaires were confidential – only members of the Inspectorate saw them. In order to ensure confidentiality, respondents were asked to do one of the following:

- have their questionnaire ready to hand back to a member of the research team at a specified time;
- seal the questionnaire in the envelope provided and hand it to a member of staff, if they were agreeable;
- or seal the questionnaire in the envelope provided and leave it in their cell for collection.

Respondents were not asked to put their names on their questionnaire.

## Response rates

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In total, 144 respondents completed and returned their questionnaires. This represented 26% of the prison population. The response rate was 66%. In addition to the three respondents who refused to complete a questionnaire, 31 questionnaires were not returned and 40 were returned blank.

## Comparisons

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The following details the results from the survey. Data from each establishment have been weighted in order to mimic a consistent percentage sampled in each establishment.

Some questions have been filtered according to the response to a previous question. Filtered questions are clearly indented and preceded by an explanation as to which respondents are included in the filtered questions. Otherwise, percentages provided refer to the entire sample. All missing responses are excluded from the analysis.

The following analyses have been conducted:

- The current survey responses in 2010 against comparator figures for all prisoners surveyed in open prisons. This comparator is based on all responses from prisoner surveys carried out in 14 open prisons since 2005.
- The current survey responses in 2010 against the responses of prisoners surveyed at HMP Ford in 2005.
- A comparison within the 2010 survey between the responses of white prisoners and those from a black and minority ethnic group.
- A comparison within the 2010 survey between those who are aged 50 and over and those under 50.
- A comparison of offender management survey responses in 2010 against the overall OM comparator and against the open prisons OM comparator.

In all the above documents, statistical significance is used to indicate whether there is a real difference between the figures that is the difference is not due to chance alone. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading and where there is no significant difference, there is no shading. Orange shading has been used to show a significant difference in prisoners' background details.

It should be noted that, in order for statistical comparisons to be made between the most recent survey data and that of the previous survey, both sets of data have been coded in the same way. This may result in changes to percentages from previously published surveys. However, all percentages are true of the populations they were taken from, and the statistical significance is correct.

## Summary

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In addition, a summary of the survey results is attached. This shows a breakdown of responses for each question. Percentages have been rounded and therefore may not add up to 100%.

No questions have been filtered within the summary so all percentages refer to responses from the entire sample. The percentages to certain responses within the summary, for example 'Not sentenced' options across questions, may differ slightly. This is due to different response rates across questions, meaning that the percentages have been calculated out of different totals (all missing data are excluded). The actual numbers will match up as the data are cleaned to be consistent.

Percentages shown in the summary may differ by 1 or 2% from that shown in the comparison data as the comparator data have been weighted for comparison purposes.

# Survey results

## Section 1: About you

<b>Q1.2</b>	<b>How old are you?</b>	
	<i>Under 21</i> .....	0 (0%)
	<i>21 - 29</i> .....	37 (26%)
	<i>30 - 39</i> .....	48 (34%)
	<i>40 - 49</i> .....	32 (22%)
	<i>50 - 59</i> .....	19 (13%)
	<i>60 - 69</i> .....	5 (3%)
	<i>70 and over</i> .....	2 (1%)
<b>Q1.3</b>	<b>Are you on recall?</b>	
	Yes.....	4 (3%)
	No.....	131 (97%)
<b>Q1.4</b>	<b>How long is your sentence?</b>	
	<i>Less than 6 months</i> .....	7 (5%)
	<i>6 months to less than 1 year</i> .....	10 (7%)
	<i>1 year to less than 2 years</i> .....	16 (11%)
	<i>2 years to less than 4 years</i> .....	36 (25%)
	<i>4 years to less than 10 years</i> .....	55 (38%)
	<i>10 years or more</i> .....	6 (4%)
	<i>IPP (Indeterminate Sentence for Public Protection)</i> .....	2 (1%)
	<i>Life</i> .....	11 (8%)
<b>Q1.5</b>	<b>Approximately, how long do you have left to serve? (If you are serving life or IPP, please use the date of your next board.)</b>	
	<i>6 months or less</i> .....	69 (52%)
	<i>More than 6 months</i> .....	64 (48%)
<b>Q1.6</b>	<b>How long have you been in this prison?</b>	
	<i>Less than 1 month</i> .....	14 (10%)
	<i>1 to less than 3 months</i> .....	38 (26%)
	<i>3 to less than 6 months</i> .....	24 (17%)
	<i>6 to less than 12 months</i> .....	21 (15%)
	<i>12 months to less than 2 years</i> .....	28 (19%)
	<i>2 to less than 4 years</i> .....	12 (8%)
	<i>4 years or more</i> .....	7 (5%)
<b>Q1.7</b>	<b>Are you a foreign national (i.e. do not hold UK citizenship)?</b>	
	Yes.....	11 (8%)
	No.....	131 (92%)
<b>Q1.8</b>	<b>Is English your first language?</b>	
	Yes.....	128 (91%)
	No.....	13 (9%)

**Q1.9 What is your ethnic origin?**

<i>White - British</i> .....	87 (62%)	<i>Asian or Asian British - Bangladeshi</i> .....	1 (1%)
<i>White - Irish</i> .....	2 (1%)	<i>Asian or Asian British - other...</i>	3 (2%)
<i>White - other</i> .....	5 (4%)	<i>Mixed heritage - white and black Caribbean</i> .....	2 (1%)
<i>Black or black British - Caribbean</i> .....	14 (10%)	<i>Mixed heritage - white and black African</i> .....	0 (0%)
<i>Black or black British - African</i>	5 (4%)	<i>Mixed heritage - white and Asian</i> .....	3 (2%)
<i>Black or black British - other ...</i>	4 (3%)	<i>Mixed heritage - other</i> .....	1 (1%)
<i>Asian or Asian British - Indian</i>	5 (4%)	<i>Chinese</i> .....	0 (0%)
<i>Asian or Asian British - Pakistani</i> .....	4 (3%)	<i>Other ethnic group</i> .....	5 (4%)

**Q1.10 Do you consider yourself to be Gypsy/Romany/Traveller?**

<i>Yes</i> .....	6 (4%)
<i>No</i> .....	133 (96%)

**Q1.11 What is your religion?**

<i>None</i> .....	34 (25%)	<i>Hindu</i> .....	4 (3%)
<i>Church of England</i> .....	44 (32%)	<i>Jewish</i> .....	0 (0%)
<i>Catholic</i> .....	24 (17%)	<i>Muslim</i> .....	12 (9%)
<i>Protestant</i> .....	2 (1%)	<i>Sikh</i> .....	3 (2%)
<i>Other Christian denomination</i>	11 (8%)	<i>Other</i> .....	2 (1%)
<i>Buddhist</i> .....	2 (1%)		

**Q1.12 How would you describe your sexual orientation?**

<i>Heterosexual/straight</i> .....	136 (98%)
<i>Homosexual/gay</i> .....	1 (1%)
<i>Bisexual</i> .....	2 (1%)
<i>Other</i> .....	0 (0%)

**Q1.13 Do you consider yourself to have a disability?**

<i>Yes</i> .....	16 (11%)
<i>No</i> .....	125 (89%)

**Q1.14 How many times have you been in prison before?**

<i>0</i>	<i>1</i>	<i>2 to 5</i>	<i>More than 5</i>
89 (62%)	25 (17%)	20 (14%)	9 (6%)

**Q1.15 Including this prison, how many prisons have you been in during this sentence/remand time?**

<i>1</i>	<i>2 to 5</i>	<i>More than 5</i>
7 (5%)	116 (83%)	17 (12%)

**Q1.16 Do you have any children under the age of 18?**

<i>Yes</i> .....	79 (55%)
<i>No</i> .....	65 (45%)

## Section 2: Courts, transfers and escorts

**Q2.1 We want to know about the most recent journey you have made either to or from court or between prisons. How was:**

	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>	<i>Don't remember</i>	<i>N/A</i>
The cleanliness of the van?	15 (10%)	70 (49%)	35 (24%)	7 (5%)	10 (7%)	3 (2%)	4 (3%)
Your personal safety during the journey?	14 (10%)	65 (47%)	27 (20%)	21 (15%)	7 (5%)	1 (1%)	3 (2%)
The comfort of the van?	4 (3%)	9 (6%)	22 (15%)	58 (41%)	46 (32%)	0 (0%)	3 (2%)
The attention paid to your health needs?	7 (5%)	43 (32%)	37 (27%)	27 (20%)	16 (12%)	0 (0%)	6 (4%)
The frequency of toilet breaks?	2 (1%)	14 (10%)	19 (13%)	29 (20%)	50 (35%)	2 (1%)	27 (19%)

**Q2.2 How long did you spend in the van?**

<i>Less than 1 hour</i>	<i>Over 1 hour to 2 hours</i>	<i>Over 2 hours to 4 hours</i>	<i>More than 4 hours</i>	<i>Don't remember</i>
9 (6%)	43 (30%)	81 (57%)	8 (6%)	1 (1%)

**Q2.3 How did you feel you were treated by the escort staff?**

<i>Very well</i>	<i>Well</i>	<i>Neither</i>	<i>Badly</i>	<i>Very badly</i>	<i>Don't remember</i>
24 (17%)	80 (56%)	28 (20%)	8 (6%)	1 (1%)	1 (1%)

**Q2.4 Please answer the following questions about when you first arrived here:**

	<i>Yes</i>	<i>No</i>	<i>Don't remember</i>
Did you know where you were going when you left court or when transferred from another prison?	126 (89%)	15 (11%)	1 (1%)
Before you arrived here did you receive any written information about what would happen to you?	31 (22%)	106 (76%)	3 (2%)
When you first arrived here did your property arrive at the same time as you?	127 (91%)	12 (9%)	1 (1%)

## Section 3: Reception, first night and induction

**Q3.1 In the first 24 hours, did staff ask you if you needed help or support with the following? (Please tick all that apply to you.)**

<i>Didn't ask about any of these.....</i>	38 (28%)	<i>Money worries.....</i>	12 (9%)
<i>Loss of property.....</i>	15 (11%)	<i>Feeling depressed or suicidal..</i>	54 (39%)
<i>Housing problems.....</i>	20 (14%)	<i>Health problems.....</i>	82 (59%)
<i>Contacting employers.....</i>	10 (7%)	<i>Needing protection from other prisoners.....</i>	14 (10%)
<i>Contacting family.....</i>	45 (33%)	<i>Accessing phone numbers.....</i>	49 (36%)
<i>Ensuring dependants were being looked after.....</i>	11 (8%)	<i>Other.....</i>	5 (4%)

**Q3.2 Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)**

<i>Didn't have any problems</i> .....	49 (39%)	<i>Money worries</i> .....	11 (9%)
<i>Loss of property</i> .....	17 (14%)	<i>Feeling depressed or suicidal</i> ..	12 (10%)
<i>Housing problems</i> .....	11 (9%)	<i>Health problems</i> .....	27 (22%)
<i>Contacting employers</i> .....	1 (1%)	<i>Needing protection from other prisoners</i> .....	4 (3%)
<i>Contacting family</i> .....	29 (23%)	<i>Accessing phone numbers</i> .....	29 (23%)
<i>Ensuring dependants were looked after</i> .....	5 (4%)	<i>Other</i> .....	3 (2%)

**Q3.3 Please answer the following questions about reception:**

	Yes	No	Don't remember
Were you seen by a member of health services?	125 (90%)	9 (6%)	5 (4%)
When you were searched, was this carried out in a respectful way?	100 (74%)	27 (20%)	8 (6%)

**Q3.4 Overall, how well did you feel you were treated in reception?**

<i>Very well</i>	<i>Well</i>	<i>Neither</i>	<i>Badly</i>	<i>Very badly</i>	<i>Don't remember</i>
13 (9%)	56 (40%)	37 (27%)	23 (17%)	10 (7%)	0 (0%)

**Q3.5 On your day of arrival, were you offered information on the following? (Please tick all that apply to you.)**

<i>Information about what was going to happen to you</i> .....	77 (55%)
<i>Information about what support was available for people feeling depressed or suicidal</i> .....	51 (37%)
<i>Information about how to make routine requests</i> .....	61 (44%)
<i>Information about your entitlement to visits</i> .....	62 (45%)
<i>Information about health services</i> .....	86 (62%)
<i>Information about the chaplaincy</i> .....	59 (42%)
<b><i>Not offered anything</i></b> .....	30 (22%)

**Q3.6 On your day of arrival, were you offered any of the following? (Please tick all that apply to you.)**

<i>A smokers/non-smokers pack</i> .....	126 (90%)
<i>The opportunity to have a shower</i> .....	91 (65%)
<i>The opportunity to make a free telephone call</i> .....	90 (64%)
<i>Something to eat</i> .....	107 (76%)
<b><i>Did not receive anything</i></b> .....	3 (2%)

**Q3.7 Did you meet any of the following people within the first 24 hours of your arrival at this prison? (Please tick all that apply to you.)**

<i>Chaplain or religious leader</i> .....	50 (37%)
<i>Someone from health services</i> .....	114 (84%)
<i>A Listener/Samaritans</i> .....	15 (11%)
<b><i>Did not meet any of these people</i></b> .....	20 (15%)

**Q3.8 Did you have access to the prison shop/canteen within the first 24 hours of your arrival at this prison?**

Yes ..... 16 (12%)  
 No ..... 120 (88%)

**Q3.9 Did you feel safe on your first night here?**

Yes ..... 123 (88%)  
 No ..... 15 (11%)  
 Don't remember ..... 2 (1%)

**Q3.10 How soon after your arrival did you go on an induction course?**

*Have not been on an induction course* ..... 1 (1%)  
 Within the first week ..... 136 (97%)  
 More than a week after my arrival ..... 2 (1%)  
 Don't remember ..... 1 (1%)

**Q3.11 Did the induction course cover everything you needed to know about the prison?**

*Have not been on an induction course* ..... 1 (1%)  
 Yes ..... 78 (56%)  
 No ..... 53 (38%)  
 Don't remember ..... 8 (6%)

## 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>
Communicate with your solicitor or legal representative?	22 (16%)	51 (36%)	17 (12%)	13 (9%)	9 (6%)	28 (20%)
Attend legal visits?	13 (10%)	31 (25%)	17 (14%)	10 (8%)	6 (5%)	48 (38%)

**Q4.2 Have staff here ever opened letters from your solicitor or your legal representative when you were not with them?**

*Not had any letters* ..... 37 (26%)  
 Yes ..... 40 (29%)  
 No ..... 63 (45%)

**Q4.3 Please answer the following questions about the wing/unit you are currently living on:**

	Yes	No	<i>Don't know</i>	<i>N/A</i>
Are you normally able to have a shower every day?	126 (90%)	14 (10%)	0 (0%)	0 (0%)
Do you normally receive clean sheets every week?	112 (81%)	19 (14%)	2 (1%)	5 (4%)

Do you normally get cell cleaning materials every week?	61 (44%)	69 (50%)	6 (4%)	2 (1%)
Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	101 (74%)	34 (25%)	2 (1%)	0 (0%)
Can you normally get your stored property if you need to?	44 (32%)	71 (52%)	18 (13%)	4 (3%)

**Q4.4 What is the food like here?**

<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
2 (1%)	16 (12%)	39 (28%)	40 (29%)	42 (30%)

**Q4.5 Does the shop/canteen sell a wide enough range of goods to meet your needs?**

<i>Have not bought anything yet</i> .....	5 (4%)
Yes.....	68 (49%)
No.....	66 (47%)

**Q4.6 Is it easy or difficult to get:**

	<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>	<i>Don't know</i>
A complaint form?	62 (45%)	62 (45%)	5 (4%)	3 (2%)	0 (0%)	5 (4%)
An application form?	65 (48%)	62 (46%)	5 (4%)	2 (1%)	0 (0%)	1 (1%)

**Q4.7 Have you made an application?**

Yes.....	114 (83%)
No.....	24 (17%)

**Q4.8 Please answer the following questions concerning applications:**

*(If you have not made an application please tick the 'not made one' option.)*

	<b>Not made one</b>	Yes	No
Do you feel <i>applications</i> are dealt with fairly?	24 (18%)	60 (44%)	51 (38%)
Do you feel <i>applications</i> are dealt with promptly (within seven days)?	24 (18%)	48 (36%)	60 (45%)

**Q4.9 Have you made a complaint?**

Yes.....	45 (33%)
No.....	93 (67%)

**Q4.10 Please answer the following questions concerning complaints:**

*(If you have not made a complaint please tick the 'not made one' option.)*

	<b>Not made one</b>	Yes	No
Do you feel <i>complaints</i> are dealt with fairly?	93 (68%)	14 (10%)	29 (21%)
Do you feel <i>complaints</i> are dealt with promptly (within seven days)?	93 (68%)	16 (12%)	27 (20%)
Were you given information about how to make an appeal?	69 (55%)	21 (17%)	36 (29%)

**Q4.11 Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?**  
*Not made a complaint*..... 93 (67%)  
 Yes ..... 7 (5%)  
 No ..... 38 (28%)

**Q4.12 How easy or difficult is it for you to see the Independent Monitoring Board (IMB)?**  
*Don't know who they are*    *Very easy*    *Easy*    *Neither*    *Difficult*    *Very difficult*  
 23 (17%)    7 (5%)    46 (34%)    42 (31%)    13 (10%)    4 (3%)

**Q4.13 Please answer the following questions about your religious beliefs?**

	Yes	No	<i>Don't know/N/A</i>
Do you feel your religious beliefs are respected?	80 (59%)	21 (16%)	34 (25%)
Are you able to speak to a religious leader of your faith in private if you want to?	83 (63%)	12 (9%)	36 (27%)

**Q4.14 Can you speak to a listener at any time, if you want to?**

Yes	No	<i>Don't know</i>
74 (54%)	3 (2%)	61 (44%)

**Q4.15 Please answer the following questions about staff in this prison?**

	Yes	No
Is there a member of staff you can turn to for help if you have a problem?	73 (56%)	58 (44%)
Do <b>most</b> staff treat you with respect?	64 (49%)	67 (51%)

## Section 5: Safety

**Q5.1 Have you ever felt unsafe in this prison?**  
 Yes ..... 26 (19%)  
 No ..... 112 (81%)

**Q5.2 Do you feel unsafe in this prison at the moment?**  
 Yes ..... 9 (7%)  
 No ..... 128 (93%)

**Q5.3 In which areas of this prison do you/have you ever felt unsafe? (Please tick all that apply to you.)**

<i>Never felt unsafe</i> ..... 112 (84%)	<i>At mealtimes</i> ..... 9 (7%)
<i>Everywhere</i> ..... 2 (2%)	<i>At health services</i> ..... 0 (0%)
<i>Segregation unit</i> ..... 1 (1%)	<i>Visit's area</i> ..... 0 (0%)
<i>Association areas</i> ..... 8 (6%)	<i>In wing showers</i> ..... 6 (5%)
<i>Reception area</i> ..... 2 (2%)	<i>In gym showers</i> ..... 0 (0%)
<i>At the gym</i> ..... 4 (3%)	<i>In corridors/stairwells</i> ..... 4 (3%)
<i>In an exercise yard</i> ..... 1 (1%)	<i>On your landing/wing</i> ..... 5 (4%)
<i>At work</i> ..... 2 (2%)	<i>In your cell</i> ..... 6 (5%)
<i>During movement</i> ..... 6 (5%)	<i>At religious services</i> ..... 0 (0%)
<i>At education</i> ..... 0 (0%)	

**Q5.4 Have you been victimised by another prisoner or group of prisoners here?**

Yes ..... 15 (11%)  
No ..... 122 (89%) **If No, go to question 5.6**

**Q5.5 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>	6 (4%)	<i>Because of your sexuality.....</i>	0 (0%)
<i>Physical abuse (being hit, kicked or assaulted).....</i>	0 (0%)	<i>Because you have a disability....</i>	3 (2%)
<i>Sexual abuse.....</i>	0 (0%)	<i>Because of your religion/religious beliefs.....</i>	0 (0%)
<i>Because of your race or ethnic origin .....</i>	3 (2%)	<i>Because of your age.....</i>	4 (3%)
<i>Because of drugs.....</i>	0 (0%)	<i>Being from a different part of the country than others.....</i>	1 (1%)
<i>Having your canteen/property taken .....</i>	3 (2%)	<i>Because of your offence/crime...</i>	2 (1%)
<i>Because you were new here.....</i>	2 (1%)	<i>Because of gang related issues.</i>	1 (1%)

**Q5.6 Have you been victimised by a member of staff or group of staff here?**

Yes ..... 30 (22%)  
No ..... 106 (78%) **If No, go to question 5.8**

**Q5.7 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>	12 (9%)	<i>Because you have a disability....</i>	4 (3%)
<i>Physical abuse (being hit, kicked or assaulted).....</i>	0 (0%)	<i>Because of your religion/religious beliefs.....</i>	2 (1%)
<i>Sexual abuse.....</i>	0 (0%)	<i>Because of your age.....</i>	4 (3%)
<i>Because of your race or ethnic origin .....</i>	4 (15%)	<i>Being from a different part of the country than others.....</i>	4 (3%)
<i>Because of drugs.....</i>	0 (0%)	<i>Because of your offence/crime...</i>	4 (3%)
<i>Because you were new here.....</i>	9 (7%)	<i>Because of gang related issues.</i>	1 (1%)
<i>Because of your sexuality.....</i>	0 (0%)		

**Q5.8 If you have been victimised by prisoners or staff, did you report it?**

**Not been victimised** ..... 100 (74%)  
Yes ..... 4 (3%)  
No ..... 32 (24%)

**Q5.9 Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?**

Yes ..... 25 (19%)  
No ..... 110 (81%)

**Q5.10 Have you ever felt threatened or intimidated by a member of staff/group of staff in here?**

Yes ..... 32 (24%)  
 No ..... 103 (76%)

**Q5.11 Is it easy or difficult to get illegal drugs in this prison?**

<i>Very easy</i>	<i>Easy</i>	<i>Neither</i>	<i>Difficult</i>	<i>Very difficult</i>	<i>Don't know</i>
43 (32%)	13 (10%)	9 (7%)	4 (3%)	2 (1%)	64 (47%)

## Section 6: Health services

**Q6.1 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	17 (12%)	14 (10%)	57 (42%)	14 (10%)	29 (21%)	6 (4%)
The nurse	17 (13%)	26 (19%)	64 (47%)	11 (8%)	13 (10%)	4 (3%)
The dentist	25 (19%)	2 (1%)	21 (16%)	9 (7%)	39 (29%)	38 (28%)
The optician	47 (36%)	2 (2%)	24 (18%)	16 (12%)	23 (18%)	19 (15%)

**Q6.2 Are you able to see a pharmacist?**

Yes ..... 64 (52%)  
 No ..... 58 (48%)

**Q6.3 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	30 (22%)	22 (16%)	51 (38%)	18 (13%)	11 (8%)	4 (3%)
The nurse	20 (15%)	37 (27%)	51 (38%)	13 (10%)	8 (6%)	7 (5%)
The dentist	55 (41%)	13 (10%)	23 (17%)	16 (12%)	11 (8%)	15 (11%)
The optician	71 (55%)	10 (8%)	16 (12%)	18 (14%)	10 (8%)	5 (4%)

**Q6.4 What do you think of the overall quality of the health services here?**

<i>Not been</i>	<i>Very good</i>	<i>Good</i>	<i>Neither</i>	<i>Bad</i>	<i>Very bad</i>
11 (8%)	25 (19%)	51 (38%)	27 (20%)	12 (9%)	9 (7%)

**Q6.5 Are you currently taking medication?**

Yes ..... 62 (46%)  
 No ..... 74 (54%)

**Q6.6 If you are taking medication, are you allowed to keep possession of your medication in your own cell?**

*Not taking medication* ..... 74 (55%)  
 Yes ..... 60 (45%)  
 No ..... 0 (0%)

**Q6.7 Do you feel you have any emotional well-being/mental health issues?**

Yes ..... 19 (14%)  
 No ..... 116 (86%)

<b>Q6.8</b>	<b>Are your emotional well-being/ mental health issues being addressed by any of the following? (Please tick all that apply to you.)</b>			
	<i>Do not have any issues/not receiving any help</i> .....			116 (88%)
	<i>Doctor</i> .....			9 (7%)
	<i>Nurse</i> .....			8 (6%)
	<i>Psychiatrist</i> .....			0 (0%)
	<i>Mental health in-reach team</i> .....			4 (3%)
	<i>Counsellor</i> .....			2 (2%)
	<i>Other</i> .....			2 (2%)
<b>Q6.9</b>	<b>Did you have a problem with either of the following when you came into this prison?</b>			
		<b>Yes</b>	<b>No</b>	
	Drugs	8 (6%)	123 (94%)	
	Alcohol	11 (8%)	122 (92%)	
<b>Q6.10</b>	<b>Have you developed a problem with drugs since you have been in this prison?</b>			
	Yes .....			4 (3%)
	No.....			130 (97%)
<b>Q6.11</b>	<b>Do you know who to contact in this prison to get help with your drug or alcohol problem?</b>			
	Yes.....			17 (13%)
	No .....			0 (0%)
	<i>Did not / do not have a drug or alcohol problem</i> .....			117 (87%)
<b>Q6.12</b>	<b>Have you received any intervention or help (including, CARATs, Health Services etc.) for your drug/alcohol problem, while in this prison?</b>			
	Yes .....			15 (11%)
	No.....			2 (1%)
	<i>Did not/do not have a drug or alcohol problem</i> .....			117 (87%)
<b>Q6.13</b>	<b>Was the intervention or help you received, while in this prison, helpful?</b>			
	Yes .....			13 (10%)
	No.....			1 (1%)
	<i>Did not have a problem/have not received help</i> .....			119 (89%)
<b>Q6.14</b>	<b>Do you think you will have a problem with either of the following when you leave this prison?</b>			
		<b>Yes</b>	<b>No</b>	<b>Don't know</b>
	Drugs	2 (1%)	124 (93%)	8 (6%)
	Alcohol	1 (1%)	119 (90%)	12 (9%)
<b>Q6.15</b>	<b>Do you know who in this prison can help you contact external drug or alcohol agencies on release?</b>			
	Yes .....			8 (6%)
	No.....			5 (4%)
	N/A .....			118 (90%)

## Section 7: Purposeful activity

- Q7.1 Are you currently involved in any of the following activities? (Please tick all that apply to you.)**
- |   |               |
|---|---------------|
| Prison job .....                          | 119 (89%)     |
| Vocational or skills training .....       | 16 (12%)      |
| Education (including basic skills).....   | 43 (32%)      |
| Offending behaviour programmes.....       | 7 (5%)        |
| <b>Not involved in any of these</b> ..... | <b>6 (5%)</b> |
- Q7.2 If you have been involved in any of the following, whilst in this prison, do you think it will help you on release?**
- |                                    | <i>Not been involved</i> | Yes      | No       | Don't know |
|------------------------------------|--------------------------|----------|----------|------------|
| Prison job                         | 3 (3%)                   | 45 (38%) | 63 (53%) | 8 (7%)     |
| Vocational or skills training      | 29 (35%)                 | 30 (36%) | 19 (23%) | 6 (7%)     |
| Education (including basic skills) | 17 (17%)                 | 51 (52%) | 25 (25%) | 6 (6%)     |
| Offending behaviour programmes     | 35 (43%)                 | 16 (20%) | 25 (30%) | 6 (7%)     |
- Q7.3 How often do you go to the library?**
- |                                    |          |
|------------------------------------|----------|
| <i>Don't want to go</i> .....      | 7 (5%)   |
| <i>Never</i> .....                 | 18 (14%) |
| <i>Less than once a week</i> ..... | 31 (23%) |
| <i>About once a week</i> .....     | 31 (23%) |
| <i>More than once a week</i> ..... | 41 (31%) |
| <i>Don't know</i> .....            | 5 (4%)   |
- Q7.4 On average how many times do you go to the gym each week?**
- | <i>Don't want to go</i> | 0        | 1      | 2        | 3 to 5   | More than 5 | Don't know |
|-------------------------|----------|--------|----------|----------|-------------|------------|
| 23 (17%)                | 20 (15%) | 8 (6%) | 16 (12%) | 58 (44%) | 7 (5%)      | 1 (1%)     |
- Q7.5 On average how many times do you go outside for exercise each week?**
- | <i>Don't want to go</i> | 0       | 1 to 2   | 3 to 5   | More than 5 | Don't know |
|-------------------------|---------|----------|----------|-------------|------------|
| 3 (2%)                  | 12 (9%) | 16 (12%) | 33 (25%) | 62 (47%)    | 5 (4%)     |
- Q7.6 On average how many hours do you spend out of your cell on a weekday? (Please include hours at education, at work etc.)**
- |                                      |          |
|--------------------------------------|----------|
| <i>Less than 2 hours</i> .....       | 2 (2%)   |
| <i>2 to less than 4 hours</i> .....  | 9 (7%)   |
| <i>4 to less than 6 hours</i> .....  | 11 (8%)  |
| <i>6 to less than 8 hours</i> .....  | 32 (24%) |
| <i>8 to less than 10 hours</i> ..... | 29 (22%) |
| <i>10 hours or more</i> .....        | 44 (34%) |
| <i>Don't know</i> .....              | 4 (3%)   |
- Q7.7 On average, how many times do you have association each week?**
- | <i>Don't want to go</i> | 0      | 1 to 2 | 3 to 5 | More than 5 | Don't know |
|-------------------------|--------|--------|--------|-------------|------------|
| 1 (1%)                  | 2 (2%) | 6 (5%) | 6 (5%) | 90 (71%)    | 21 (17%)   |

<b>Q7.8</b>	<b>How often do staff normally speak to you during association time?</b>	
	<i>Do not go on association</i> .....	11 (9%)
	<i>Never</i> .....	43 (36%)
	<i>Rarely</i> .....	32 (26%)
	<i>Some of the time</i> .....	23 (19%)
	<i>Most of the time</i> .....	7 (6%)
	<i>All of the time</i> .....	5 (4%)

## Section 8: Resettlement

<b>Q8.1</b>	<b>When did you first meet your personal officer?</b>	
	<i>Still have not met him/her</i> .....	80 (61%)
	<i>In the first week</i> .....	14 (11%)
	<i>More than a week</i> .....	26 (20%)
	<i>Don't remember</i> .....	11 (8%)

<b>Q8.2</b>	<b>How helpful do you think your personal officer is?</b>					
	<i>Do not have a personal officer/ still have not met him/her</i>	<i>Very helpful</i>	<i>Helpful</i>	<i>Neither</i>	<i>Not very helpful</i>	<i>Not at all helpful</i>
	80 (62%)	9 (7%)	16 (12%)	15 (12%)	5 (4%)	4 (3%)

<b>Q8.3</b>	<b>Do you have a sentence plan/OASys?</b>	
	<i>Yes</i> .....	62 (47%)
	<i>No</i> .....	70 (53%)

<b>Q8.4</b>	<b>How involved were you in the development of your sentence plan?</b>	
	<i>Do not have a sentence plan/OASys</i> .....	70 (53%)
	<i>Very involved</i> .....	22 (17%)
	<i>Involved</i> .....	22 (17%)
	<i>Neither</i> .....	2 (2%)
	<i>Not very involved</i> .....	9 (7%)
	<i>Not at all involved</i> .....	7 (5%)

<b>Q8.5</b>	<b>Can you achieve all or some of your sentence plan targets in this prison?</b>	
	<i>Do not have a sentence plan/OASys</i> .....	70 (55%)
	<i>Yes</i> .....	41 (32%)
	<i>No</i> .....	17 (13%)

<b>Q8.6</b>	<b>Are there plans for you to achieve all/some of your sentence plan targets in another prison?</b>	
	<i>Do not have a sentence plan/OASys</i> .....	70 (55%)
	<i>Yes</i> .....	20 (16%)
	<i>No</i> .....	38 (30%)

<b>Q8.7</b>	<b>Do you feel that any member of staff has helped you to address your offending behaviour whilst at this prison?</b>	
	<i>Yes</i> .....	18 (14%)
	<i>No</i> .....	115 (86%)

- Q8.8 Do you feel that any member of staff has helped you to prepare for your release?**  
 Yes ..... 19 (14%)  
 No ..... 113 (86%)
- Q8.9 Have you had any problems with sending or receiving mail?**  
 Yes ..... 32 (24%)  
 No ..... 95 (71%)  
 Don't know ..... 7 (5%)
- Q8.10 Have you had any problems getting access to the telephones?**  
 Yes ..... 12 (9%)  
 No ..... 122 (91%)  
 Don't know ..... 0 (0%)
- Q8.11 Did you have a visit in the first week that you were here?**  
*Not been here a week yet* ..... 2 (2%)  
 Yes ..... 52 (39%)  
 No ..... 76 (57%)  
 Don't remember ..... 3 (2%)
- Q8.12 How many visits did you receive in the last week?**
- | <i>Not been in a week</i> | 0        | 1 to 2   | 3 to 4 | 5 or more |
|---------------------------|----------|----------|--------|-----------|
| 2 (2%)                    | 76 (58%) | 52 (40%) | 0 (0%) | 0 (0%)    |
- Q8.13 How are you and your family/ friends treated by visits staff?**  
*Not had any visits* ..... 17 (13%)  
 Very well ..... 18 (13%)  
 Well ..... 53 (40%)  
 Neither ..... 22 (16%)  
 Badly ..... 10 (7%)  
 Very badly ..... 4 (3%)  
 Don't know ..... 10 (7%)
- Q8.14 Have you been helped to maintain contact with your family/friends whilst in this prison?**  
 Yes ..... 40 (31%)  
 No ..... 91 (69%)
- Q8.15 Do you know who to contact to get help with the following within this prison? (Please tick all that apply to you.)**
- |  |   |
|--|---|
| <i>Don't know who to contact</i> .. 49 (41%) | Help with your finances in preparation for release ..... 27 (23%)           |
| Maintaining good relationships 30 (25%)      | Claiming benefits on release... 47 (39%)                                    |
| Avoiding bad relationships ..... 21 (18%)    | Arranging a place at college/continuing education on release ..... 34 (28%) |
| Finding a job on release ..... 52 (43%)      | Continuity of health services on release ..... 30 (25%)                     |

*Finding accommodation on release*..... 44 (37%) *Opening a bank account*..... 31 (26%)

**Q8.16 Do you think you will have a problem with any of the following on release from prison? (Please tick all that apply to you.)**

<i>No problems</i> .....	60 (50%)	<i>Help with your finances in preparation for release</i> .....	19 (16%)
<i>Maintaining good relationships</i>	7 (6%)	<i>Claiming benefits on release</i> ...	23 (19%)
<i>Avoiding bad relationships</i> .....	2 (2%)	<i>Arranging a place at college/continuing education on release</i> .....	10 (8%)
<i>Finding a job on release</i> .....	51 (42%)	<i>Continuity of health services on release</i> .....	10 (8%)
<i>Finding accommodation on release</i> .....	34 (28%)	<i>Opening a bank account</i> .....	19 (16%)

**Q8.17 Have you been provided with information on the following:**

	Yes	No
ROTL (temporary release)	86 (69%)	39 (31%)
Facility licence (outside work, education)	47 (39%)	74 (61%)
Resettlement licence (other outside activities such as arranging accommodation, work, family visits)	51 (43%)	69 (57%)
Earned community visits (town visits)	72 (59%)	50 (41%)

**Q8.18 Have you had access to the following:**

	Yes	No
ROTL (temporary release)	62 (49%)	64 (51%)
Facility licence (outside work, education)	23 (20%)	93 (80%)
Resettlement licence (other outside activities such as arranging accommodation, work, family visits)	29 (25%)	87 (75%)
Earned community visits (town visits)	56 (47%)	62 (53%)

**Q8.19 Please answer the following questions on resettlement:**

	Yes	No
Were you given up to date information about this prison before you came here?	9 (7%)	121 (93%)
Were you helped to prepare for open conditions before you came here (increased responsibility, freedom etc)?	17 (13%)	112 (87%)
Do you feel you have been given greater responsibility here than when you were in closed conditions?	91 (71%)	38 (29%)
Have you been on a preparation for release course?	11 (9%)	117 (91%)
Have you done anything, or has anything happened to you here that you think will make you less likely to offend in the future?	62 (50%)	62 (50%)
Is this prison near your home area or intended release address?	38 (29%)	91 (71%)

## Main comparator and comparator to last time



### Prisoner survey responses HMP Ford 2010

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

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<b>Number of completed questionnaires returned</b>		<b>144</b>	<b>1326</b>	<b>144</b>	<b>61</b>
<b>SECTION 1: General information</b>					
2	Are you under 21 years of age?	0%	1%	0%	0%
3	Are you on recall?	3%	3%	3%	
4	Is your sentence less than 12 months?	12%	11%	12%	16%
5	Do you have six months or less to serve?	52%	50%	52%	49%
6	Have you been in this prison less than a month?	10%	12%	10%	
7	Are you a foreign national?	8%	3%	8%	26%
8	Is English your first language?	91%	94%	91%	84%
9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	33%	25%	33%	45%
10	Do you consider yourself to be Gypsy/Romany/Traveller?	4%	2%	4%	
11	Are you Muslim?	9%	12%	9%	
12	Are you homosexual/gay or bisexual?	2%	1%	2%	
13	Do you consider yourself to have a disability?	11%	10%	11%	
14	Is this your first time in prison?	62%	50%	62%	66%
15	Have you been in more than five prisons this sentence/remand time?	12%	15%	12%	
16	Do you have any children under the age of 18?	55%	55%	55%	56%
<b>SECTION 2: Transfers and escorts</b>					
For the most recent journey you have made either to or from court or between prisons:					
1a	Was the cleanliness of the van good/very good?	59%	55%	59%	55%
1b	Was your personal safety during the journey good/very good?	57%	61%	57%	63%
1c	Was the comfort of the van good/very good?	9%	16%	9%	21%
1d	Was the attention paid to your health needs good/very good?	37%	33%	37%	35%
1e	Was the frequency of toilet breaks good/very good?	11%	13%	11%	19%
2	Did you spend more than four hours in the van?	6%	9%	6%	5%
3	Were you treated well/very well by the escort staff?	73%	69%	73%	76%
4a	Did you know where you were going when you left court or when transferred from another prison?	89%	87%	89%	93%
4b	Before you arrived here did you receive any written information about what would happen to you?	22%	23%	22%	24%
4c	When you first arrived here did your property arrive at the same time as you?	91%	93%	91%	90%

## Main comparator and comparator to last time

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<b>SECTION 3: Reception, first night and induction</b>					
<b>3</b>	In the first 24 hours, did staff ask you if you needed help/support with the following:				
<b>1b</b>	Problems with loss of property?	11%	15%	11%	
<b>1c</b>	Housing problems?	15%	20%	15%	
<b>1d</b>	Problems contacting employers?	7%	12%	7%	
<b>1e</b>	Problems contacting family?	33%	49%	33%	
<b>1f</b>	Problems ensuring dependants were looked after?	8%	14%	8%	
<b>1g</b>	Money problems?	9%	16%	9%	
<b>1h</b>	Problems of feeling depressed/suicidal?	39%	38%	39%	
<b>1i</b>	Health problems?	59%	53%	59%	
<b>1j</b>	Problems in needing protection from other prisoners?	10%	15%	10%	
<b>1k</b>	Problems accessing phone numbers?	36%	37%	36%	
	When you first arrived:				
<b>2a</b>	Did you have any problems?	61%	44%	61%	57%
<b>2b</b>	Did you have any problems with loss of property?	14%	8%	14%	14%
<b>2c</b>	Did you have any housing problems?	9%	14%	9%	7%
<b>2d</b>	Did you have any problems contacting employers?	1%	5%	1%	2%
<b>2e</b>	Did you have any problems contacting family?	23%	12%	23%	38%
<b>2f</b>	Did you have any problems ensuring dependants were being looked after?	4%	4%	4%	5%
<b>2g</b>	Did you have any money worries?	9%	16%	9%	18%
<b>2h</b>	Did you have any problems with feeling depressed or suicidal?	10%	7%	10%	7%
<b>2i</b>	Did you have any health problems?	22%	11%	22%	9%
<b>2j</b>	Did you have any problems with needing protection from other prisoners?	3%	2%	3%	0%
<b>2k</b>	Did you have problems accessing phone numbers?	23%	11%	23%	
<b>3a</b>	Were you seen by a member of health services in reception?	90%	86%	90%	57%
<b>3b</b>	When you were searched in reception, was this carried out in a respectful way?	74%	84%	74%	60%
<b>4</b>	Were you treated well/very well in reception?	50%	81%	50%	61%
	On your day of arrival, were you offered any of the following information:				
<b>5a</b>	Information about what was going to happen to you?	55%	61%	55%	67%
<b>5b</b>	Information about what support was available for people feeling depressed or suicidal?	37%	51%	37%	49%
<b>5c</b>	Information about how to make routine requests?	44%	53%	44%	42%
<b>5d</b>	Information about your entitlement to visits?	45%	60%	45%	61%
<b>5e</b>	Information about health services?	62%	65%	62%	
<b>5f</b>	Information about the chaplaincy?	42%	53%	42%	

## Main comparator and comparator to last time

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<b>SECTION 3: Reception, first night and induction continued</b>					
On your day of arrival, were you offered any of the following:					
6a	A smokers/non-smokers pack?	90%	76%	90%	77%
6b	The opportunity to have a shower?	65%	63%	65%	63%
6c	The opportunity to make a free telephone call?	64%	50%	64%	14%
6d	Something to eat?	77%	76%	77%	72%
Within the first 24 hours did you meet any of the following people:					
7a	The chaplain or a religious leader?	37%	43%	37%	62%
7b	Someone from health services?	84%	79%	84%	68%
7c	A Listener/Samaritans?	11%	31%	11%	57%
8	Did you have access to the prison shop/canteen within the first 24 hours?	12%	23%	12%	21%
9	Did you feel safe on your first night here?	88%	93%	88%	75%
10	Have you been on an induction course?	99%	97%	99%	88%
For those who have been on an induction course:					
11	Did the course cover everything you needed to know about the prison?	56%	74%	56%	60%
<b>SECTION 4: Legal rights and respectful custody</b>					
In terms of your legal rights, is it easy/very easy to:					
1a	Communicate with your solicitor or legal representative?	52%	60%	52%	
1b	Attend legal visits?	35%	54%	35%	
2	Have staff ever opened letters from your solicitor or legal representative when you were not with them?	29%	28%	29%	16%
For the wing/unit you are currently on:					
3a	Are you normally able to have a shower every day?	90%	98%	90%	97%
3b	Do you normally receive clean sheets every week?	81%	79%	81%	93%
3c	Do you normally get cell cleaning materials every week?	44%	73%	44%	45%
3d	Is it normally quiet enough for you to be able to relax or sleep in your cell at night time?	74%	79%	74%	73%
3e	Can you normally get your stored property if you need to?	32%	52%	32%	39%
4	Is the food in this prison good/very good?	13%	43%	13%	29%
5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	49%	52%	49%	40%
6a	Is it easy/very easy to get a complaints form?	91%	85%	91%	91%
6b	Is it easy/very easy to get an application form?	94%	91%	94%	96%
7	Have you made an application?	83%	84%	83%	89%

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<b>SECTION 4: Legal rights and respectful custody continued</b>					
For those who have made an application:					
8a	Do you feel applications are dealt with fairly?	54%	76%	54%	66%
8b	Do you feel applications are dealt with promptly (within seven days)?	44%	72%	44%	50%
9	Have you made a complaint?	33%	32%	33%	44%
For those who have made a complaint:					
10a	Do you feel complaints are dealt with fairly?	33%	42%	33%	42%
10b	Do you feel complaints are dealt with promptly (within seven days)?	37%	51%	37%	43%
11	Have you ever been made to or encouraged to withdraw a complaint since you have been in this prison?	16%	22%	16%	22%
10c	Were you given information about how to make an appeal?	17%	22%	17%	41%
12	Is it easy/very easy to see the Independent Monitoring Board?	39%	44%	39%	49%
13a	Do you feel your religious beliefs are respected?	59%	58%	59%	52%
13b	Are you able to speak to a religious leader of your faith in private if you want to?	63%	63%	63%	55%
14	Are you able to speak to a Listener at any time if you want to?	54%	61%	54%	82%
15a	Is there a member of staff, in this prison, that you can turn to for help if you have a problem?	56%	78%	56%	46%
15b	Do most staff, in this prison, treat you with respect?	49%	77%	49%	62%
<b>SECTION 5: Safety</b>					
1	Have you ever felt unsafe in this prison?	19%	15%	19%	20%
2	Do you feel unsafe in this prison at the moment?	7%	4%	7%	
4	Have you been victimised by another prisoner?	10%	8%	10%	7%
Since you have been here, has another prisoner:					
5a	Made insulting remarks about you, your family or friends?	4%	4%	4%	6%
5b	Hit, kicked or assaulted you?	0%	1%	0%	0%
5c	Sexually abused you?	0%	0%	0%	0%
5d	Victimised you because of your race or ethnic origin?	2%	2%	2%	0%
5e	Victimised you because of drugs?	0%	0%	0%	0%
5f	Taken your canteen/property?	2%	1%	2%	0%
5g	Victimised you because you were new here?	2%	2%	2%	4%
5h	Victimised you because of your sexuality?	0%	0%	0%	0%
5i	Victimised you because you have a disability?	2%	0%	2%	
5j	Victimised you because of your religion/religious beliefs?	0%	1%	0%	
5k	Victimised you because of your age?	3%	0%	3%	
5l	Victimised you because you were from a different part of the country?	1%	2%	1%	0%
5m	Victimised you because of your offence/crime?	2%	1%	2%	
5n	Victimised you because of gang related issues?	1%	1%	1%	

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<b>SECTION 5: Safety continued</b>					
<b>6</b>	Have you been victimised by a member of staff?	23%	16%	23%	21%
	Since you have been here, has a member of staff:				
<b>7a</b>	Made insulting remarks about you, your family or friends?	9%	7%	9%	15%
<b>7b</b>	Hit, kicked or assaulted you?	0%	1%	0%	2%
<b>7c</b>	Sexually abused you?	0%	1%	0%	0%
<b>7d</b>	Victimised you because of your race or ethnic origin?	3%	3%	3%	8%
<b>7e</b>	Victimised you because of drugs?	0%	1%	0%	0%
<b>7f</b>	Victimised you because you were new here?	7%	4%	7%	4%
<b>7g</b>	Victimised you because of your sexuality?	0%	0%	0%	0%
<b>7h</b>	Victimised you because you have a disability?	3%	0%	3%	
<b>7i</b>	Victimised you because of your religion/religious beliefs?	2%	2%	2%	
<b>7j</b>	Victimised you because of your age?	3%	1%	3%	
<b>7k</b>	Victimised you because you were from a different part of the country?	3%	2%	3%	6%
<b>7l</b>	Victimised you because of your offence/crime?	3%	2%	3%	
<b>7m</b>	Victimised you because of gang related issues?	1%	1%	1%	
For those who have been victimised by staff or other prisoners:					
<b>8</b>	Did you report any victimisation that you have experienced?	11%	25%	11%	36%
<b>9</b>	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	19%	9%	19%	
<b>10</b>	Have you ever felt threatened or intimidated by a member of staff in here?	24%	14%	24%	
<b>11</b>	Is it easy/very easy to get illegal drugs in this prison?	42%	35%	42%	46%
<b>SECTION 6: Health care</b>					
<b>1a</b>	Is it easy/very easy to see the doctor?	52%	61%	52%	
<b>1b</b>	Is it easy/very easy to see the nurse?	67%	79%	67%	
<b>1c</b>	Is it easy/very easy to see the dentist?	17%	29%	17%	
<b>1d</b>	Is it easy/very easy to see the optician?	20%	25%	20%	
<b>2</b>	Are you able to see a pharmacist?	53%	50%	53%	
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:					
<b>3a</b>	The doctor?	69%	71%	69%	71%
<b>3b</b>	The nurse?	76%	78%	76%	79%
<b>3c</b>	The dentist?	46%	59%	46%	72%
<b>3d</b>	The optician?	44%	58%	44%	65%
<b>4</b>	The overall quality of health services?	61%	67%	61%	71%

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<b>health care continued</b>					
5	Are you currently taking medication?	46%	37%	46%	
For those currently taking medication:					
6	Are you allowed to keep possession of your medication in your own cell?	100%	95%	100%	
7	Do you feel you have any emotional well-being/mental health issues?	14%	13%	14%	
For those with emotional well-being/mental health issues, are these being addressed by any of the following:					
8a	Not receiving any help?	0%	31%	0%	
8b	A doctor?	44%	39%	44%	
8c	A nurse?	44%	29%	44%	
8d	A psychiatrist?	0%	8%	0%	
8e	The mental health in-reach team?	18%	26%	18%	
8f	A counsellor?	13%	8%	13%	
9a	Did you have a drug problem when you came into this prison?	6%	7%	6%	4%
9b	Did you have an alcohol problem when you came into this prison?	8%	6%	8%	2%
10a	Have you developed a drug problem since you have been in this prison?	3%	3%	3%	
For those with drug or alcohol problems:					
11	Do you know who to contact in this prison for help?	100%	91%	100%	
12	Have you received any help or intervention while in this prison?	88%	85%	88%	
For those who have received help or intervention with their drug or alcohol problem:					
13	Was this intervention or help useful?	93%	79%	93%	
14a	Do you think you will have a problem with drugs when you leave this prison? (Yes/don't know)	8%	9%	8%	9%
14b	Do you think you will have a problem with alcohol when you leave this prison? (Yes/don't know)	10%	9%	10%	8%
For those who may have a drug or alcohol problem on release, do you know who in this prison:					
15	Can help you contact external drug or alcohol agencies on release?	61%	73%	61%	83%
<b>SECTION 7: Purposeful activity</b>					
1	Are you currently involved in any of the following activities:				
1a	A prison job?	90%	73%	90%	
1b	Vocational or skills training?	12%	23%	12%	
1c	Education (including basic skills)?	32%	30%	32%	
1d	Offending behaviour programmes?	5%	11%	5%	
2ai	Have you had a job while in this prison?	98%	90%	98%	
For those who have had a prison job while in this prison:					
2aii	Do you feel the job will help you on release?	39%	48%	39%	
2bi	Have you been involved in vocational or skills training while in this prison?	66%	80%	66%	
For those who have had vocational or skills training while in this prison:					
2bii	Do you feel the vocational or skills training will help you on release?	55%	73%	55%	

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<b>Purposeful activity continued</b>					
2ci	Have you been involved in education while in this prison?	83%	83%	83%	
For those who have been involved in education while in this prison:					
2cii	Do you feel the education will help you on release?	62%	72%	62%	
2di	Have you been involved in offending behaviour programmes while in this prison?	57%	71%	57%	
For those who have been involved in offending behaviour programmes while in this prison:					
2dii	Do you feel the offending behaviour programme(s) will help you on release?	34%	56%	34%	
3	Do you go to the library at least once a week?	54%	57%	54%	79%
4	On average, do you go to the gym at least twice a week?	61%	62%	61%	56%
5	On average, do you go outside for exercise three or more times a week?	73%	70%	73%	76%
6	On average, do you spend ten or more hours out of your cell on a weekday?	34%	51%	34%	52%
7	On average, do you go on association more than five times each week?	71%	78%	71%	60%
8	Do staff normally speak to you most of the time/all of the time during association?	10%	22%	10%	7%
<b>SECTION 8: Resettlement</b>					
1	Do you have a personal officer?	39%	68%	39%	40%
For those with a personal officer:					
2	Do you think your personal officer is helpful/very helpful?	51%	77%	51%	68%
For those who are sentenced:					
3	Do you have a sentence plan?	47%	71%	47%	52%
For those with a sentence plan?					
4	Were you involved/very involved in the development of your plan?	71%	75%	71%	63%
5	Can you achieve some/all of your sentence plan targets in this prison?	71%	84%	71%	
6	Are there plans for you to achieve some/all your targets in another prison?	35%	29%	35%	
7	Do you feel that any member of staff has helped you address your offending behaviour while at this prison?	14%	37%	14%	
8	Do you feel that any member of staff has helped you to prepare for release?	14%	34%	14%	
9	Have you had any problems with sending or receiving mail?	24%	21%	24%	23%
10	Have you had any problems getting access to the telephones?	9%	11%	9%	8%
11	Did you have a visit in the first week that you were here?	39%	52%	39%	37%
12	Did you receive one or more visits in the last week?	40%	48%	40%	
For those who have had visits:					
13	How are you and your family/ friends usually treated by visits staff? (Very well/well)	61%	70%	61%	
14	Have you been helped to maintain contact with family/friends while in this prison?	31%	54%	31%	

## Main comparator and comparator to last time

### Key to tables

		HMP Ford 2010	Open prisons comparator	HMP Ford 2010	HMP Ford 2005
	Any percent highlighted in green is significantly better				
	Any percent highlighted in blue is significantly worse				
	Any percent highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>Resettlement continued</b>					
<b>15</b>	Do you know who to contact within this prison to get help with the following:				
<b>15b</b>	Maintaining good relationships?	25%	21%	25%	
<b>15c</b>	Avoiding bad relationships?	18%	16%	18%	
<b>15d</b>	Finding a job on release?	43%	57%	43%	72%
<b>15e</b>	Finding accommodation on release?	37%	51%	37%	66%
<b>15f</b>	With money/finances on release?	23%	39%	23%	45%
<b>15g</b>	Claiming benefits on release?	39%	47%	39%	65%
<b>15h</b>	Arranging a place at college/continuing education on release?	28%	43%	28%	55%
<b>15i</b>	Accessing health services on release?	25%	39%	25%	49%
<b>15j</b>	Opening a bank account on release?	26%	41%	26%	
<b>16</b>	Do you think you will have a problem with any of the following on release from prison?				
<b>16b</b>	Maintaining good relationships?	6%	5%	6%	
<b>16c</b>	Avoiding bad relationships?	2%	5%	2%	
<b>16d</b>	Finding a job?	42%	31%	42%	
<b>16e</b>	Finding accommodation?	28%	23%	28%	
<b>16f</b>	Money/finances?	16%	22%	16%	
<b>16g</b>	Claiming benefits?	19%	18%	19%	
<b>16h</b>	Arranging a place at college/continuing education?	8%	11%	8%	
<b>16i</b>	Accessing health services?	8%	9%	8%	
<b>16j</b>	Opening a bank account?	16%	19%	16%	
<b>17</b>	Have you been provided with information on the following:				
<b>17a</b>	ROTL (release on temporary licence)	69%	79%	69%	55%
<b>17b</b>	Facility licence (outside work, education)	39%	61%	39%	44%
<b>17c</b>	Resettlement licence (other outside activities e.g. work, arranging accommodation, family visits)	43%	63%	43%	40%
<b>17d</b>	Earned Community Visits (Town visits)	59%	77%	59%	56%
<b>18</b>	Have you had access to the following:				
<b>18a</b>	ROTL (release on temporary licence)	49%	64%	49%	42%
<b>18b</b>	Facility Licence (outside work, education)	20%	44%	20%	30%
<b>18c</b>	Resettlement Licence (other outside activities e.g. work, arranging accommodation, family visits)	25%	45%	25%	34%
<b>18d</b>	Earned community visits (town visits)	47%	62%	47%	49%
<b>19</b>	Please answer the following about resettlement:				
<b>19a</b>	Were you given up to date information about this prison before you came here?	7%	28%	7%	18%
<b>19b</b>	Were you helped to prepare for open conditions before you came here (increased responsibility)?	13%	29%	13%	34%
<b>19c</b>	Do you feel you have been given greater responsibility here than when you were in closed conditions?	71%	84%	71%	76%
<b>19d</b>	Have you been on a preparation for release course?	9%	21%	9%	16%
<b>19e</b>	Have you done anything, or has anything happened to you here to make you less likely to offend in future?	50%	67%	50%	73%
<b>19f</b>	Is this prison near your home area or your intended release address?	29%	48%	29%	32%



## Diversity Analysis

### Key question responses (ethnicity) HMP Ford 2010

**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 percent highlighted in green is significantly better	<b>BME prisoners</b>	<b>White prisoners</b>
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>Number of completed questionnaires returned</b>		<b>47</b>	<b>94</b>
<b>1.3</b>	Are you sentenced?		
<b>1.7</b>	Are you a foreign national?	<b>13%</b>	<b>5%</b>
<b>1.8</b>	Is English your first language?	<b>81%</b>	<b>96%</b>
<b>1.9</b>	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?		
<b>1.1</b>	Do you consider yourself to be Gypsy/Romany/Traveller?	<b>0%</b>	<b>7%</b>
<b>1.11</b>	Are you Muslim?	<b>27%</b>	<b>0%</b>
<b>1.13</b>	Do you consider yourself to have a disability?	<b>8%</b>	<b>13%</b>
<b>1.14</b>	Is this your first time in prison?	<b>58%</b>	<b>64%</b>
<b>2.1d</b>	Was the attention paid to your health needs good/very good?	<b>33%</b>	<b>37%</b>
<b>2.3</b>	Were you treated well/very well by the escort staff?	<b>70%</b>	<b>75%</b>
<b>2.4a</b>	Did you know where you were going when you left court or when transferred from another prison?	<b>87%</b>	<b>90%</b>
<b>3.1e</b>	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	<b>41%</b>	<b>29%</b>
<b>3.1h</b>	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	<b>34%</b>	<b>42%</b>
<b>3.1i</b>	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	<b>61%</b>	<b>58%</b>
<b>3.2a</b>	Did you have any problems when you first arrived?	<b>58%</b>	<b>61%</b>
<b>3.3a</b>	Were you seen by a member of health care staff in reception?	<b>93%</b>	<b>88%</b>
<b>3.3b</b>	When you were searched in reception, was this carried out in a respectful way?	<b>76%</b>	<b>73%</b>

## Diversity Analysis

### Key to tables

	Any percent highlighted in green is significantly better	<b>BME prisoners</b>	<b>White prisoners</b>
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>3.4</b>	Were you treated well/very well in reception?	46%	52%
<b>3.7b</b>	Did you have access to someone from health care within the first 24 hours?	82%	85%
<b>3.9</b>	Did you feel safe on your first night here?	89%	89%
<b>3.10</b>	Have you been on an induction course?	98%	100%
<b>4.1a</b>	Is it easy/very easy to communicate with your solicitor or legal representative?	55%	51%
<b>4.3b</b>	Are you normally able to have a shower every day?	91%	89%
<b>4.4</b>	Is the food in this prison good/very good?	7%	16%
<b>4.5</b>	Does the shop/canteen sell a wide enough range of goods to meet your needs?	44%	52%
<b>4.6a</b>	Is it easy/very easy to get a complaints form?	86%	93%
<b>4.6b</b>	Is it easy/very easy to get an application form?	93%	94%
<b>4.9</b>	Have you made a complaint?	25%	35%
<b>4.13a</b>	Do you feel your religious beliefs are respected?	68%	56%
<b>4.13b</b>	Are you able to speak to a religious leader of your faith in private if you want to?	71%	59%
<b>4.14</b>	Are you able to speak to a Listener at any time if you want to?	55%	55%
<b>4.15a</b>	Is there a member of staff you can turn to for help if you have a problem in this prison?	50%	59%
<b>4.15b</b>	Do <b>most</b> staff, in this prison, treat you with respect?	49%	51%
<b>5.1</b>	Have you ever felt unsafe in this prison?	17%	19%
<b>5.2</b>	Do you feel unsafe in this prison at the moment?	7%	6%
<b>5.4</b>	Have you been victimised by another prisoner?	5%	12%
<b>5.5d</b>	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	2%	1%

## Key to tables

## Diversity Analysis

		BME prisoners	White prisoners
	Any percent highlighted in green is significantly better		
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
5.5i	Victimised you because you have a disability?	2%	1%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	0%
5.6	Have you been victimised by a member of staff?	23%	21%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	5%	1%
5.7h	Victimised you because you have a disability?	3%	2%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	3%	1%
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	9%	22%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	21%	23%
5.11	Is it easy/very easy to get illegal drugs in this prison?	26%	49%
6.1a	Is it easy/very easy to see the doctor?	44%	57%
6.1b	Is it easy/ very easy to see the nurse?	57%	71%
6.2	Are you able to see a pharmacist?	51%	54%
6.5	Are you currently taking medication?	42%	47%
6.7	Do you feel you have any emotional well-being/mental health issues?	2%	19%
7.1a	Are you currently working in the prison?	88%	91%
7.1b	Are you currently undertaking vocational or skills training?	12%	13%
7.1c	Are you currently in education (including basic skills)?	35%	31%
7.1d	Are you currently taking part in an offending behaviour programme?	7%	5%
7.3	Do you go to the library at least once a week?	63%	50%
7.4	On average, do you go to the gym at least twice a week?	79%	52%
7.5	On average, do you go outside for exercise three or more times a week?	66%	76%

## Diversity Analysis

### Key to tables

	Any percent highlighted in green is significantly better	<b>BME prisoners</b>	<b>White prisoners</b>
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>7.6</b>	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	<b>19%</b>	<b>41%</b>
<b>7.7</b>	On average, do you go on association more than five times each week?	<b>58%</b>	<b>80%</b>
<b>7.8</b>	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	<b>3%</b>	<b>14%</b>
<b>8.1</b>	Do you have a personal officer?	<b>35%</b>	<b>42%</b>
<b>8.9</b>	Have you had any problems sending or receiving mail?	<b>17%</b>	<b>25%</b>
<b>8.10</b>	Have you had any problems getting access to the telephones?	<b>0%</b>	<b>14%</b>
<b>8.18</b>	Have you been provided with information on the following:		
<b>8.18a</b>	ROTL (release on temporary licence)	<b>63%</b>	<b>72%</b>
<b>8.18b</b>	Facility licence (outside work, education)	<b>39%</b>	<b>39%</b>
<b>8.18c</b>	Resettlement licence (other outside activities e.g. work, arranging accommodation, family visits)	<b>39%</b>	<b>45%</b>
<b>8.18d</b>	Earned community visits (town visits)	<b>54%</b>	<b>61%</b>
<b>8.19</b>	Have you had access to the following:		
<b>8.19a</b>	ROTL (release on temporary licence)	<b>46%</b>	<b>51%</b>
<b>8.19b</b>	Facility licence (outside work, education)	<b>15%</b>	<b>21%</b>
<b>8.19c</b>	Resettlement licence (other outside activities e.g. work, arranging accommodation, family visits)	<b>15%</b>	<b>28%</b>
<b>8.19d</b>	Earned community visits (town visits)	<b>47%</b>	<b>48%</b>
<b>8.20</b>	Please answer the following about resettlement:		
<b>8.20a</b>	Were you given up to date information about this prison before you came here?	<b>3%</b>	<b>9%</b>
<b>8.20b</b>	were you helped to prepare for open conditions before you came here (increased responsibility)?	<b>18%</b>	<b>12%</b>
<b>8.20c</b>	Do you feel you have been given greater responsibility here than when you were in closed conditions?	<b>60%</b>	<b>75%</b>
<b>8.20d</b>	Have you been on a preparation for release course?	<b>13%</b>	<b>7%</b>
<b>8.20e</b>	Is this prison near your home area or your intended release address?	<b>7%</b>	<b>39%</b>



## Diversity Analysis - Age

### Key question responses (age over 50) HMP Ford 2010

**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 percent highlighted in green is significantly better	<b>Prisoners aged 50 and over</b>	<b>Prisoners under the age of 50</b>
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>Number of completed questionnaires returned</b>		<b>26</b>	<b>117</b>
1.3	Are you sentenced?		
1.7	Are you a foreign national?	4%	9%
1.8	Is English your first language?	91%	91%
1.9	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	20%	37%
1.1	Do you consider yourself to be Gypsy/Romany/Traveller?	0%	4%
1.11	Are you Muslim?	0%	11%
1.12	Do you consider yourself to have a disability?	12%	11%
1.13	Is this your first time in prison?	56%	64%
2.1d	Was the attention paid to your health needs good/very good?	31%	38%
2.3	Were you treated well/very well by the escort staff?	81%	71%
2.4a	Did you know where you were going when you left court or when transferred from another prison?	89%	89%
3.1e	Did staff ask if you needed any help/support in dealing with problems contacting family within the first 24 hours?	24%	35%
3.1h	Did staff ask if you needed any help/support in dealing with problems of feeling depressed/suicidal within the first 24 hours?	24%	42%
3.1i	Did staff ask if you needed any help/support in dealing with health problems within the first 24 hours?	52%	61%
3.2a	Did you have any problems when you first arrived?	48%	64%
3.3a	Were you seen by a member of health care staff in reception?	84%	91%
3.3b	When you were searched in reception, was this carried out in a respectful way?	91%	71%

## Diversity Analysis - Age

### Key to tables

	Any percent highlighted in green is significantly better	Prisoners aged 50 and over	Prisoners under the age of 50
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
3.4	Were you treated well/very well in reception?	60%	48%
3.7b	Did you have access to someone from healthcare within the first 24 hours?	88%	83%
3.9	Did you feel safe on your first night here?	92%	87%
3.10	Have you been on an induction course?	100%	99%
4.1a	Is it easy/very easy to communicate with your solicitor or legal representative?	48%	54%
4.3b	Are you normally able to have a shower every day?	96%	89%
4.4	Is the food in this prison good/very good?	12%	13%
4.5	Does the shop/canteen sell a wide enough range of goods to meet your needs?	60%	47%
4.6a	Is it easy/very easy to get a complaints form?	88%	91%
4.6b	Is it easy/very easy to get an application form?	91%	95%
4.9	Have you made a complaint?	36%	31%
4.13a	Do you feel your religious beliefs are respected?	68%	57%
4.13b	Are you able to speak to a religious leader of your faith in private if you want to?	74%	61%
4.14	Are you able to speak to a Listener at any time if you want to?	72%	49%
4.15a	Is there a member of staff you can turn to for help if you have a problem in this prison?	71%	53%
4.15b	Do <b>most</b> staff, in this prison, treat you with respect?	56%	48%
5.1	Have you ever felt unsafe in this prison?	20%	19%
5.2	Do you feel unsafe in this prison at the moment?	12%	6%
5.4	Have you been victimised by another prisoner?	16%	8%
5.5d	Have you been victimised because of your race or ethnic origin since you have been here? (By prisoners)	4%	2%

## Key to tables

## Diversity Analysis - Age

		Prisoners aged 50 and over	Prisoners under the age of 50
	Any percent highlighted in green is significantly better		
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
5.5i	Victimised you because you have a disability?	4%	2%
5.5j	Have you been victimised because of your religion/religious beliefs? (By prisoners)	0%	0%
5.5k	Have you been victimised because of your age? (By prisoners)	12%	1%
5.6	Have you been victimised by a member of staff?	12%	25%
5.7d	Have you been victimised because of your race or ethnic origin since you have been here? (By staff)	4%	2%
5.7h	Victimised you because you have a disability?	4%	2%
5.7i	Have you been victimised because of your religion/religious beliefs? (By staff)	0%	1%
5.7j	Have you been victimised because of your age? (By staff)	8%	2%
5.9	Have you ever felt threatened or intimidated by another prisoner/group of prisoners in here?	20%	17%
5.10	Have you ever felt threatened or intimidated by a member of staff in here?	20%	24%
5.11	Is it easy/very easy to get illegal drugs in this prison?	44%	41%
6.1a	Is it easy/very easy to see the doctor?	68%	48%
6.1b	Is it easy/ very easy to see the nurse?	91%	61%
6.2	Are you able to see a pharmacist?	44%	54%
6.5	Are you currently taking medication?	60%	42%
6.7	Do you feel you have any emotional well-being/mental health issues?	16%	14%
7.1a	Are you currently working in the prison?	80%	92%
7.1b	Are you currently undertaking vocational or skills training?	16%	11%
7.1c	Are you currently in education (including basic skills)?	24%	35%
7.1d	Are you currently taking part in an offending behaviour programme?	4%	6%
7.3	Do you go to the library at least once a week?	75%	50%

## Diversity Analysis - Age

### Key to tables

	Any percent highlighted in green is significantly better	<b>Prisoners aged 50 and over</b>	<b>Prisoners under the age of 50</b>
	Any percent highlighted in blue is significantly worse		
	Any percent highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
7.4	On average, do you go to the gym at least twice a week?	37%	66%
7.5	On average, do you go outside for exercise three or more times a week?	96%	67%
7.6	On average, do you spend ten or more hours out of your cell on a weekday? (This includes hours at education, at work etc.)	35%	34%
7.7	On average, do you go on association more than five times each week?	74%	71%
7.8	Do staff normally speak to you at least most of the time during association time? (Most/all of the time)	11%	10%
8.1	Do you have a personal officer?	59%	34%
8.9	Have you had any problems sending or receiving mail?	33%	22%
8.10	Have you had any problems getting access to the telephones?	4%	10%
8.18	Have you been provided with information on the following:		
8.18a	ROTL (release on temporary licence)	69%	69%
8.18b	Facility licence (outside work, education)	38%	39%
8.18c	Resettlement licence (other outside activities e.g. work, arranging accommodation, family visits)	34%	45%
8.18d	Earned community visits (town visits)	66%	58%
8.19	Have you had access to the following:		
8.19a	ROTL (release on temporary licence)	50%	49%
8.19b	Facility licence (outside work, education)	30%	18%
8.19c	Resettlement Licence (other outside activities e.g. work, arranging accommodation, family visits)	32%	24%
8.19d	Earned community visits (town visits)	56%	45%
8.20	Please answer the following about resettlement:		
8.20a	Were you given up to date information about this prison before you came here?	9%	7%
8.20b	Were you helped to prepare for open conditions before you came here? (increased responsibility)	26%	11%
8.20c	Do you feel you have been given greater responsibility here than when you were in closed conditions?	74%	70%
8.20d	Have you been on a preparation for release course?	13%	8%
8.20e	Is this prison near your home area or your intended release address?	39%	28%



## Prisoner OM survey responses HMP Ford 2010

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

		HMP Ford 2010	Overall OM comparator	HMP Ford 2010	Open prisons comparator
	Any percent highlighted in green is significantly better				
	Any percent highlighted in blue is significantly worse				
	Any percent highlighted in orange shows a significant difference in prisoners' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		<b>12</b>	<b>878</b>	<b>12</b>	<b>70</b>
<b>SECTION 1: General information</b>					
1	Are you under 21 years of age?	0%	11%	0%	0%
2	Are you a foreign national?	0%	10%	0%	6%
3	Are you from a minority ethnic group (including all those who did not tick white British, white Irish or white other categories)?	42%	25%	42%	24%
4	Do you consider yourself to have a disability?	0%	17%	0%	9%
5	Is this prison in your home probation area?	20%	23%	20%	7%
6	Are you on recall?	8%	17%	8%	4%
7	Were you sentenced to less than two years?	0%	10%	0%	3%
8	Do you have six months or less to serve?	46%	28%	46%	27%
<b>SECTION 2: Reception and induction</b>					
9	Did you have any of the following problems when you first arrived here:				
9a	Housing problems?	30%	22%	30%	26%
9b	Problems contacting employers?	20%	8%	20%	7%
9c	Problems contacting family?	10%	19%	10%	5%
9d	Problems of feeling depressed/suicidal?	10%	20%	10%	7%
9e	None of the above problems?	70%	56%	70%	71%
For those who have been on an induction course:					
10	Did you go on an induction within the first week?	100%	78%	100%	93%
11	If you have been on an induction, did it cover everything you needed to know about the prison?	50%	67%	50%	79%
For those who have received a basic skills assessment:					
12	Did you receive a 'basic skills' assessment within the first week?	71%	45%	71%	62%
13	After arrival into this prison did you have an interview with staff to ask if you needed help (e.g. for housing problems, contacting family, feeling depressed or suicidal)?	80%	55%	80%	51%

**Key to tables**

Any percent highlighted in green is significantly better		HMP Ford 2010	Overall OM comparator	HMP Ford 2010	Open prisons comparator
Any percent highlighted in blue is significantly worse					
Any percent highlighted in orange shows a significant difference in prisoners' background details					
Percentages which are not highlighted show there is no significant difference					
<b>SECTION 3: Sentence planning</b>					
14	Do you have a sentence plan?	75%	72%	75%	91%
For those who have a sentence plan:					
15	Were you involved in the development of your sentence plan?	67%	72%	67%	89%
16	Has your sentence plan taken into account your individual needs?	44%	63%	44%	82%
17	Can you achieve all or some of your sentence plan targets in this prison?	50%	70%	50%	90%
18	Are there plans for you to achieve some/all your targets in another prison?	13%	35%	13%	13%
19	Are there plans for you to achieve some/all your targets while on licence in the community?	33%	43%	33%	54%
20	Have you had any meetings to discuss your sentence plan while in custody?	67%	81%	67%	98%
21	If you have had sentence planning meetings did any of the following attend:				
21a	Offender supervisor?	83%	65%	83%	82%
21b	Prison staff from other departments?	17%	30%	17%	38%
21c	Offender manager?	83%	57%	83%	68%
21d	Anyone from other agencies?	17%	18%	17%	25%
22	Were these meetings useful to you?	67%	67%	67%	86%
<b>SECTION 4: Offender manager</b>					
23	Do you have a named offender manager in the probation service?	100%	90%	100%	99%
For those who have an offender manager:					
24	Has your offender manager been in contact with you since you have been in custody?	73%	81%	73%	97%
25	If you have had contact from your offender manager, what type of contact was it:				
25a	Contact by letter?	50%	49%	50%	62%
25b	Contact by phone?	75%	30%	75%	68%
25c	A visit to the prison?	63%	68%	63%	74%
26	Has your offender manager changed since you have been in custody?	55%	44%	55%	56%
For those who have a sentence plan:					
27	Has your offender manager discussed your sentence plan with you?	78%	69%	78%	88%
28	Do you think you have been supported by your offender manager while in prison?	55%	42%	55%	72%

## Key to tables

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<b>SECTION 5: Offender supervisor</b>					
29	Do you have an offender supervisor within this prison?	82%	75%	82%	88%
For those who have an offender supervisor:					
30	Do you meet with your offender supervisor every month?	63%	75%	63%	96%
31	Do you think you have been supported by your offender supervisor while in prison?	44%	51%	44%	88%
<b>SECTION 6: Your time in custody</b>					
32	Have any of the following made it more difficult to take full part in the activities in custody:				
32a	No issues?	30%	69%	30%	90%
32b	Difficulties with religion?	50%	8%	50%	7%
32b	Difficulties with race?	20%	4%	20%	3%
32c	Difficulties with a disability?	10%	8%	10%	3%
32d	Difficulties with language?	10%	3%	10%	0%
32e	Difficulties with reading/writing skills?	20%	10%	20%	0%
32f	Difficulties with other issues?	30%	10%	30%	0%
33	Whist in custody have you been helped with any of the following:				
33a	Housing?	30%	11%	30%	14%
33b	Eductaion/training/employment?	60%	55%	60%	75%
33c	Money and debt?	30%	10%	30%	9%
33d	Relationships (e.g. family/partner)?	0%	14%	0%	22%
33e	Lifestyle (e.g. friendships)?	0%	14%	0%	23%
33f	Drug use?	30%	36%	30%	31%
33g	Alcohol use?	20%	28%	20%	37%
33h	Emotional well-being?	20%	22%	20%	20%
33i	Thinking skills?	50%	39%	50%	71%
33j	Attitude to offending?	30%	32%	30%	65%
33k	Health?	20%	36%	20%	39%
33l	Not had any help?	10%	16%	10%	8%
34	Has anyone done any work with you on basic skills?	0%	54%	0%	82%
35	Has anyone done any work with you on victim awareness?	56%	36%	56%	83%
36	Has any member of staff helped you to address your offending behaviour while in custody?	44%	38%	44%	66%
<b>SECTION 7: Resettlement</b>					
37	Has any member of staff helped to prepare for your release while in custody?	20%	16%	20%	43%
38	Do you think you will have a problem with the following on release from custody:				
38a	Problems maintaining/avoiding good relationships?	10%	21%	10%	3%
38b	Problems finding a job?	80%	61%	80%	35%

**Key to tables**

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<b>38c</b>	Finding accommodation?	50%	46%	50%	32%
<b>38d</b>	Problems with money/finances?	30%	37%	30%	30%
<b>38e</b>	Problems claiming benefits?	10%	34%	10%	22%
<b>38f</b>	Problems arranging a place at college/continuing education?	20%	22%	20%	11%
<b>38g</b>	Problems contacting external drug or alcohol agencies?	10%	11%	10%	0%
<b>38h</b>	Problems accessing health care services?	30%	15%	30%	3%
<b>38i</b>	Problems opening a bank account?	60%	29%	60%	19%
<b>38j</b>	None of the above problems?	20%	21%	20%	38%
<b>39</b>	Have you done anything, or has anything happened to you during custody that you think will make you less likely to offend in future?	89%	67%	89%	88%